

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 91
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
TIM RYAN FOR CONGRESS

Full Name (Last, First, Middle Initial) Rose Caiola		Date of Receipt M M / D D / Y Y Y Y Y 01 / 10 / 2015
Mailing Address 230 east 85th street		Transaction ID : C10335130
City New York	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00
Name of Employer Bettina Equities	Occupation Real estate development	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00	

Full Name (Last, First, Middle Initial) Rose Caiola		Date of Receipt M M / D D / Y Y Y Y Y 01 / 10 / 2015
Mailing Address 230 east 85th street		Transaction ID : C10335240
City New York	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00
Name of Employer Bettina Equities	Occupation Real estate development	
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00	

Full Name (Last, First, Middle Initial) Rajashree Choudhury		Date of Receipt M M / D D / Y Y Y Y Y 02 / 17 / 2015
Mailing Address 11500 W Olympic Blvd Ste 150		Transaction ID : C10348412
City Los Angeles	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self-Employed	Occupation Yoga Therapist	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

SUBTOTAL of Receipts This Page (optional).....	5700.00
TOTAL This Period (last page this line number only).....	