

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**
TEAM HUIZENGA

ADDRESS (number and street) **PO Box 2485**
 Check if different than previously reported. (ACC) **Springfield VA 22152-0485**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00580043 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on / / in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period / / 2019 through / / 2019

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Carlin, Robert, F., ,
Type or Print Name of Treasurer

Signature of Treasurer Carlin, Robert, F., , [Electronically Filed] Date / / 2020

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

TEAM HUIZENGA

Report Covering the Period: From: / / To: / /

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|--|--|--|
| 6. (a) Cash on Hand January 1, <input type="text" value="2019"/> | <input type="text" value="1000.00"/> | <input type="text" value="1000.00"/> |
| (b) Cash on Hand at Beginning of Reporting Period..... | <input type="text" value="11293.60"/> | |
| (c) Total Receipts (from Line 19) | <input type="text" value="91620.00"/> | <input type="text" value="113160.00"/> |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... | <input type="text" value="102913.60"/> | <input type="text" value="114160.00"/> |
| 7. Total Disbursements (from Line 31)..... | <input type="text" value="89256.62"/> | <input type="text" value="100503.02"/> |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | <input type="text" value="13656.98"/> | <input type="text" value="13656.98"/> |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | <input type="text" value="0.00"/> | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | <input type="text" value="0.00"/> | |

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

TEAM HUIZENGA

Report Covering the Period: From: M M / D D / Y Y Y Y 07 / 01 / 2019 To: M M / D D / Y Y Y Y 12 / 31 / 2019

| I. Receipts | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|---|---------------------------------------|---|
| 11. Contributions (other than loans) From: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (i) Itemized (use Schedule A)..... | 63500.00 | 78900.00 |
| (ii) Unitemized | 17120.00 | 23260.00 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶ | 80620.00 | 102160.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 1000.00 | 1000.00 |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) | 81620.00 | 103160.00 |
| 12. Transfers From Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 13. All Loans Received | 0.00 | 0.00 |
| 14. Loan Repayments Received..... | 0.00 | 0.00 |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... | 0.00 | 0.00 |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... | 0.00 | 0.00 |
| 17. Other Federal Receipts (Dividends, Interest, etc.)..... | 10000.00 | 10000.00 |
| 18. Transfers from Non-Federal and Levin Funds | | |
| (a) Non-Federal Account (from Schedule H3)..... | 0.00 | 0.00 |
| (b) Levin Funds (from Schedule H5) | 0.00 | 0.00 |
| (c) Total Transfers (add 18(a) and 18(b)).. | 0.00 | 0.00 |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶ | 91620.00 | 113160.00 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶ | 91620.00 | 113160.00 |

DETAILED SUMMARY PAGE
of Disbursements

| II. Disbursements | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures: | | |
| (a) Allocated Federal/Non-Federal Activity (from Schedule H4) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) Non-Federal Share..... | 0.00 | 0.00 |
| (b) Other Federal Operating Expenditures | 68725.46 | 72945.14 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 68725.46 | 72945.14 |
| 22. Transfers to Affiliated/Other Party Committees..... | 20481.16 | 27507.88 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 0.00 | 0.00 |
| 24. Independent Expenditures (use Schedule E) | 0.00 | 0.00 |
| 25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F)..... | 0.00 | 0.00 |
| 26. Loan Repayments Made..... | 0.00 | 0.00 |
| 27. Loans Made..... | 0.00 | 0.00 |
| 28. Refunds of Contributions To: | | |
| (a) Individuals/Persons Other Than Political Committees | 50.00 | 50.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... | 50.00 | 50.00 |
| 29. Other Disbursements (Including Non-Federal Donations)..... | 0.00 | 0.00 |
| 30. Federal Election Activity (52 U.S.C. § 30101(20)) | | |
| (a) Allocated Federal Election Activity (from Schedule H6) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) "Levin" Share..... | 0.00 | 0.00 |
| (b) Federal Election Activity Paid Entirely With Federal Funds | 0.00 | 0.00 |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) | 0.00 | 0.00 |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) .. | 89256.62 | 100503.02 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 89256.62 | 100503.02 |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

| III. Net Contributions/ Operating Expenditures | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|---------------------------------------|---|
| 33. Total Contributions (other than loans) (from Line 11(d), page 3) | 81620.00 | 103160.00 |
| 34. Total Contribution Refunds (from Line 28(d)) | 50.00 | 50.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 81570.00 | 103110.00 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 68725.46 | 72945.14 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 68725.46 | 72945.14 |

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

| | | |
|---|---|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 6 OF 49 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
TEAM HUIZENGA

A. Allor, Philip, L.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 825 Bishop Rd
 City Grosse Pointe Park State MI Zip Code 48230-1924
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SelfLube Occupation (for Individual) Business Owner
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **500.00**

Date of Receipt **07 / 24 / 2019**
Transaction ID : A2C2C8B1E699D4488A59
 Amount of Each Receipt this Period **500.00**
 Memo Item

B. Baker, Clarice, M.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4013 Lakeridge Dr
 City Holland State MI Zip Code 49424-2263
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1000.00**

Date of Receipt **07 / 11 / 2019**
Transaction ID : AF1B723E323E849E78A6
 Amount of Each Receipt this Period **1000.00**
 Memo Item

C. Baker, Clarice, M.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4013 Lakeridge Dr
 City Holland State MI Zip Code 49424-2263
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **2000.00**

Date of Receipt **10 / 17 / 2019**
Transaction ID : A563BC191F67D46F7983
 Amount of Each Receipt this Period **1000.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... **2500.00**
TOTAL This Period (last page this line number only).....

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

| | | |
|---|---|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 7 OF 49 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
TEAM HUIZENGA

A. Bilardello, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1231 E Beltline Ave NE
 Stop 1370

City Grand Rapids State MI Zip Code 49525-4501

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Priority Health Occupation (for Individual) Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 800.00

Date of Receipt
 09 / 10 / 2019
Transaction ID : A9993BE4526AB4098835

Amount of Each Receipt this Period
 800.00

Memo Item

B. Boerigter, George, D, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address Freedom Village #540
 145 Columbia Ave.

City Holland State MI Zip Code 49423

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SoundOff Signal Occupation (for Individual) PRESIDENT/CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 10 / 17 / 2019
Transaction ID : A572922650D46403BA13

Amount of Each Receipt this Period
 500.00

Memo Item

C. Bolhuis, Steven, R, , Sr.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1008 Randall Rd

City Norton Shores State MI Zip Code 49441-4862

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Beacon Recycling Occupation (for Individual) President

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 07 / 24 / 2019
Transaction ID : A98A581D3EAE04C7BBF2

Amount of Each Receipt this Period
 1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 2300.00

TOTAL This Period (last page this line number only)..... ▶

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 8 OF 49 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
TEAM HUIZENGA

A. Borreson, Daniel, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7995 S Thornapple Ave
 City Newaygo State MI Zip Code 49337-9212
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) West Michigan Surgical Specialists Occupation (for Individual) Surgeon
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2019
Transaction ID : A60E3D4FAA73B4921813
 Amount of Each Receipt this Period
 500.00
 Memo Item

B. Braekevelt, Donald, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16295 Kingston
 City Fraser State MI Zip Code 48026-3267
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) None Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 08 / 2019
Transaction ID : A2E61EEAE419F4692B3E
 Amount of Each Receipt this Period
 250.00
 Memo Item

C. Bunbury, Barbara, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 140 Krause St
 City Rockford State MI Zip Code 49341-1214
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2019
Transaction ID : A1DC46348E56544D9B93
 Amount of Each Receipt this Period
 250.00
 Memo Item

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 1000.00 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 9 OF 49 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
TEAM HUIZENGA

A. Byker, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3845 Navaho Ct SW
 City Grandville State MI Zip Code 49418-1982
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Byker & Associates Occupation (for Individual) President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 24 / 2019
Transaction ID : AD555F2B32C0D42F9967
 Amount of Each Receipt this Period 250.00
 Memo Item

B. Chandonnet, Robert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1589 Brookwood Dr
 City Norton Shores State MI Zip Code 49441-5276
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Nugent Sand Company Occupation (for Individual) President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2800.00

Date of Receipt 08 / 12 / 2019
Transaction ID : A8573FC455AD94E3AA9C
 Amount of Each Receipt this Period 2300.00
 Memo Item

C. Cuellar, Noel, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3424 Production Ct
 City Zeeland State MI Zip Code 49464-8546
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Primera Plastics Inc Occupation (for Individual) President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 09 / 10 / 2019
Transaction ID : AD13295EE24CC4774A8A
 Amount of Each Receipt this Period 2500.00
 Memo Item

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 5050.00 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 10 OF 49 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
TEAM HUIZENGA

A. Currie, William, G, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9000 Byron Commerce Drive SW
 City Byron Center State MI Zip Code 49315-8077
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Universal Forest Products Occupation (for Individual) Chairman
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 12 / 31 / 2019
Transaction ID : A710ABC77FE0F45D688C
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. DeWitt, Marlies, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 404 E Central Ave
 City Zeeland State MI Zip Code 49464-1802
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) None Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 31 / 2019
Transaction ID : A27683348989E4F1CAE8
 Amount of Each Receipt this Period 100.00
 Memo Item

C. Easa, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6378 Hidden Pond Dr
 City Holland State MI Zip Code 49423-9774
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Holland Hospital Occupation (for Individual) Anesthesiologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 31 / 2019
Transaction ID : A4C117986AF504739B5A
 Amount of Each Receipt this Period 250.00
 Memo Item

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 1350.00 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 11 OF 49 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
TEAM HUIZENGA

A. Essex, Bruce, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7595 Automobile Rd

| | | |
|-------------------|-------------|------------------------|
| City Twin Lake | State MI | Zip Code 49457-8715 |
|-------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|--|--|
| Name of Employer (for Individual) retired | Occupation (for Individual) Retired |
|--|--|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 24 / 2019

Transaction ID : A8D9AB002AFDE4F0D8E8

Amount of Each Receipt this Period
2800.00

Memo Item

B. Essex, Bruce, J., , Jr.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1985 E Laketon Ave

| | | |
|------------------|-------------|------------------------|
| City Muskegon | State MI | Zip Code 49442-6127 |
|------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|--|--|
| Name of Employer (for Individual) Port City Group | Occupation (for Individual) President |
|--|--|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 12 / 2019

Transaction ID : A04D32D5E5D5746E2BEE

Amount of Each Receipt this Period
2800.00

Memo Item

C. Essex, Bruce, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7595 Automobile Rd

| | | |
|-------------------|-------------|------------------------|
| City Twin Lake | State MI | Zip Code 49457-8715 |
|-------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|--|--|
| Name of Employer (for Individual) retired | Occupation (for Individual) Retired |
|--|--|

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2019

Transaction ID : A45B4B79E4F5A4E968C9

Amount of Each Receipt this Period
2300.00

Memo Item

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 7900.00 |
| TOTAL This Period (last page this line number only)..... | |

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 12 OF 49 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
TEAM HUIZENGA

A. Fazakerley, Mark, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 391 Grover Rd

| | | |
|------------------|-------------|------------------------|
| City Muskegon | State MI | Zip Code 49442-8504 |
|------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|--|--------------------------------------|
| Name of Employer (for Individual) Eagle Alloy | Occupation (for Individual) Owner |
|--|--------------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2800.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08 | | 12 | | 2019 |

Transaction ID : A69570866D1FA434390A

Amount of Each Receipt this Period
2800.00

Memo Item

B. Fody, Edward, P., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6574 Partridge Ln

| | | |
|-----------------|-------------|------------------------|
| City Holland | State MI | Zip Code 49423-8965 |
|-----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|--|--|
| Name of Employer (for Individual) Self-employed | Occupation (for Individual) pathologist |
|--|--|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07 | | 11 | | 2019 |

Transaction ID : ACD29306458AB423A99B

Amount of Each Receipt this Period
250.00

Memo Item

C. Gruppen, William, G., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 516 W Lawrence Ave

| | | |
|-----------------|-------------|------------------------|
| City Zeeland | State MI | Zip Code 49464-1542 |
|-----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|---|--|
| Name of Employer (for Individual) None | Occupation (for Individual) Retired |
|---|--|

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09 | | 23 | | 2019 |

Transaction ID : AD90174C749F843AD9F4

Amount of Each Receipt this Period
100.00

Memo Item

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 3150.00 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 13 OF 49 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
TEAM HUIZENGA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Gruppen, William, G., ,

Mailing Address 516 W Lawrence Ave

| | | |
|-----------------|-------------|------------------------|
| City Zeeland | State MI | Zip Code 49464-1542 |
|-----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|---|--|
| Name of Employer (for Individual) None | Occupation (for Individual) Retired |
|---|--|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 31 | / | 2019 |

Transaction ID : A01E1A6CA7B194711BCB

Amount of Each Receipt this Period
50.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Haworth, Ethelyn, L., ,

Mailing Address 99 E 8th St
Ste 310

| | | |
|-----------------|-------------|------------------------|
| City Holland | State MI | Zip Code 49423-3562 |
|-----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|--|--|
| Name of Employer (for Individual) Homemaker | Occupation (for Individual) Homemaker |
|--|--|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5600.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 11 | / | 14 | / | 2019 |

Transaction ID : A1D87BED89F2648628F9

Amount of Each Receipt this Period
5600.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Haworth, Richard, G., ,

Mailing Address 99 E 8th St
Ste 310

| | | |
|-----------------|-------------|------------------------|
| City Holland | State MI | Zip Code 49423-3562 |
|-----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|---|--|
| Name of Employer (for Individual) Haworth Incorporated | Occupation (for Individual) Chairman Emeritus |
|---|--|

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5600.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 11 | / | 14 | / | 2019 |

Transaction ID : A04B9449DCB26467B9FB

Amount of Each Receipt this Period
5600.00

Memo Item

| | |
|---|----------|
| SUBTOTAL of Receipts This Page (optional)..... | 11250.00 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | | |
|---|------------------------------|-----------------------------------|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 14 OF 49 |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
TEAM HUIZENGA

A. Hayden, Agnes, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 929 Peninsula Dr
 City Traverse City State MI Zip Code 49686-2743
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 30 / 2019
Transaction ID : A1F4E771045034B6F8AE
 Amount of Each Receipt this Period 250.00
 Memo Item

B. Herbruck, Stephen, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7420 Biscayne Way SE
 City Grand Rapids State MI Zip Code 49546-9760
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Herbruck's Poultry Ranch Occupation (for Individual) CEO & Chairman
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 08 / 2019
Transaction ID : A679EA50E413D4B8B93F
 Amount of Each Receipt this Period 500.00
 Memo Item

C. Hilleary, Bradley, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1749 Sunset Point Dr
 City Norton Shores State MI Zip Code 49441-5892
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Webb Chemical Occupation (for Individual) President/CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 12 / 2019
Transaction ID : AC578CB6115C643CFB18
 Amount of Each Receipt this Period 1000.00
 Memo Item

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 1750.00 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 15 OF 49 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

| | | |
|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 12 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)
TEAM HUIZENGA

A. Hines, Larry, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 335 W Circle Dr
 City North Muskegon State MI Zip Code 49445-2715
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hines Group Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2800.00

Date of Receipt 08 / 12 / 2019
Transaction ID : A04C5A9A50BCB41CFB42
 Amount of Each Receipt this Period 800.00
 Memo Item

B. Hines, Larry, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 335 W Circle Dr
 City North Muskegon State MI Zip Code 49445-2715
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hines Group Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3800.00

Date of Receipt 09 / 23 / 2019
Transaction ID : AC1365C0CE0734C309DD
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. Jackson, Stephen, James, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3855 Harbor Pt Dr
 City Norton Shores State MI Zip Code 49441-4697
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Jackson-Merkey Contractors Occupation (for Individual) President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 12 / 2019
Transaction ID : A9CF0D0DE8A6E42A8AB6
 Amount of Each Receipt this Period 1000.00
 Memo Item

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 2800.00 |
| TOTAL This Period (last page this line number only)..... | |

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

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

FOR LINE NUMBER: PAGE 16 OF 49
(check only one)

| | | | | | | | | | | | | | | | | | |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|----|--------------------------|----|--------------------------|----|--------------------------|----|--------------------------|----|
| <input checked="" type="checkbox"/> | 11a | <input type="checkbox"/> | 11b | <input type="checkbox"/> | 11c | <input type="checkbox"/> | 12 | <input type="checkbox"/> | 13 | <input type="checkbox"/> | 14 | <input type="checkbox"/> | 15 | <input type="checkbox"/> | 16 | <input type="checkbox"/> | 17 |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|----|--------------------------|----|--------------------------|----|--------------------------|----|--------------------------|----|

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NAME OF COMMITTEE (In Full)
TEAM HUIZENGA

A. Johnson, Bruce, H., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 761 Wintersun Place

| | | |
|-----------------|-------------|------------------------|
| City Holland | State MI | Zip Code 49424-2788 |
|-----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|---|--|
| Name of Employer (for Individual) CapTrust Finanacial Advisors | Occupation (for Individual) Consulting Director |
|---|--|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2800.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 31 | / | 2019 |

Transaction ID : A1471207B469845D5986

Amount of Each Receipt this Period
2800.00

Memo Item

B. Johnson, Margie, M., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 761 Wintersun Place

| | | |
|-----------------|-------------|------------------------|
| City Holland | State MI | Zip Code 49424-2788 |
|-----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|--|--|
| Name of Employer (for Individual) Homemaker | Occupation (for Individual) Homemaker |
|--|--|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2800.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 31 | / | 2019 |

Transaction ID : A1AE825090BD049E3A88

Amount of Each Receipt this Period
2800.00

Memo Item

C. Kalkman, Paul, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10628 Perry St

| | | |
|-----------------|-------------|------------------------|
| City Holland | State MI | Zip Code 49424-9616 |
|-----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|---|--|
| Name of Employer (for Individual) None | Occupation (for Individual) Retired |
|---|--|

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09 | / | 25 | / | 2019 |

Transaction ID : AFE5D428B54234CC2A05

Amount of Each Receipt this Period
250.00

Memo Item

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 5850.00 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 17 OF 49 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
TEAM HUIZENGA

A. Kalkman, Paul, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10628 Perry St
 City Holland State MI Zip Code 49424-9616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) None Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2019
Transaction ID : A4AAC0359DEDE431CB06
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. Keeler, Mary Ann, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2525 Indian Trl SE
 City Grand Rapids State MI Zip Code 49506-3116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2019
Transaction ID : A52B084A7BCDC4B2F93E
 Amount of Each Receipt this Period
 2800.00
 Memo Item

C. Kersman, Robert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 202 1st Street
 City Muskegon State MI Zip Code 49445-2951
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Lorin Industries Occupation (for Individual) Chairman
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 22 / 2019
Transaction ID : A52009587A9B241BFB0D
 Amount of Each Receipt this Period
 500.00
 Memo Item

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 3550.00 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 18 OF 49 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
TEAM HUIZENGA

A. Landheer, Ben, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 260
 City Fremont State MI Zip Code 49412-0260
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Landheer Ins. Agency Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 23 / 2019
Transaction ID : ADFEC3717325D45198AC
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Langerak, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6612 Barry St
 City Hudsonville State MI Zip Code 49426-9507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Langerak Roof Systems Occupation (for Individual) Roofing
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 30 / 2019
Transaction ID : AA9943E817F2849968BA
 Amount of Each Receipt this Period 250.00
 Memo Item

C. Little River Band of Ottawa Indians
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2608 Government Center Drive
 City Manistee State MI Zip Code 49660-8302
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 3300.00

Date of Receipt 09 / 25 / 2019
Transaction ID : A942554DC43D34B3F9A5
 Amount of Each Receipt this Period 3300.00
 Memo Item

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 3650.00 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | | |
|---|------------------------------|-----------------------------------|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 19 OF 49 |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
TEAM HUIZENGA

A. McKee, Max, B, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 505 Montague Street

| | | |
|---------------------|-------------|------------------------|
| City Grand Haven | State MI | Zip Code 49417-1812 |
|---------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|---|---|
| Name of Employer (for Individual) Sand Products Corp | Occupation (for Individual) Chairman |
|---|---|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09 | | 23 | | 2019 |

Transaction ID : ABCF818938B194C3DB14

Amount of Each Receipt this Period
500.00

Memo Item

B. Okkema, Bruce, M, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 55 E Roosevelt Ave

| | | |
|-----------------|-------------|------------------------|
| City Zeeland | State MI | Zip Code 49464-1235 |
|-----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|--|---|
| Name of Employer (for Individual) Eagle Design & Technology, Inc. | Occupation (for Individual) Business Owner |
|--|---|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07 | | 11 | | 2019 |

Transaction ID : AD9038126059C4839923

Amount of Each Receipt this Period
250.00

Memo Item

C. Olsen, Deborah, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 820 Oakmere Place

| | | |
|------------------|-------------|------------------------|
| City Muskegon | State MI | Zip Code 49445-2963 |
|------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|--|--|
| Name of Employer (for Individual) Homemaker | Occupation (for Individual) Homemaker |
|--|--|

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08 | | 12 | | 2019 |

Transaction ID : A415AF58157504B2E9AB

Amount of Each Receipt this Period
2500.00

Memo Item

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 3250.00 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 20 OF 49 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

| | | |
|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 12 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)
TEAM HUIZENGA

A. Olthoff, Kay, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1499 Middlebrook Drive
 City Norton Shores State MI Zip Code 49441-4654
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Homemaker Occupation (for Individual) Homemaker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2800.00

Date of Receipt 08 / 12 / 2019
Transaction ID : A93E40F6374AD4E01AFD
 Amount of Each Receipt this Period 2800.00
 Memo Item

B. Paradiso, Nicholas, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1755 Secretariat Dr SE
 City Grand Rapids State MI Zip Code 49546-8211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) National Heritage Academies Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 31 / 2019
Transaction ID : A5CE4E70C8665456A94A
 Amount of Each Receipt this Period 250.00
 Memo Item

C. Peterson, Daryl, K, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6115 W Olmstead Rd
 City Ludington State MI Zip Code 49431-9754
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Bushel Basket Orchards Occupation (for Individual) Farmer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 25 / 2019
Transaction ID : A4428D6D91C34445CA4D
 Amount of Each Receipt this Period 250.00
 Memo Item

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 3300.00 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | | |
|---|------------------------------|-----------------------------------|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 21 OF 49 |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
TEAM HUIZENGA

A. Powers, Catherine, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6061 Ridgeview Dr
 City Norton Shores State MI Zip Code 49441-6143
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) None Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 12 / 31 / 2019
Transaction ID : A96BA5011A29B43F5A9D
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Public Affairs Associates, LLC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 120 N Washington Square Ste 1050
 City Lansing State MI Zip Code 48933-1630
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 09 / 25 / 2019
Transaction ID : ACB065EC72BA84324AD4
 Amount of Each Receipt this Period 800.00
 Memo Item
 Partner Attribution-Rebecca Bechler

C. Bechler, Rebecca, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 120 N. Washington Sq Ste 1050
 City Lansing State MI Zip Code 48933-1630
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Public Affairs Associates Occupation (for Individual) Lobbyist/Co-Mgr Partner
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 09 / 25 / 2019
Transaction ID : A3A0BF9251470459899A
 Amount of Each Receipt this Period 800.00
 Memo Item
 Partnership Attribution - Public Affairs Associates, LLC

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 850.00 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 22 OF 49 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
TEAM HUIZENGA

A. Ritsema, Herbert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2772 Pfeiffer Woods Dr SE
 Apt 3304
 City Grand Rapids State MI Zip Code 49512-9178
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) None Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 30 / 2019**
Transaction ID : A8067C357BFEB41098B6
 Amount of Each Receipt this Period 250.00
 Memo Item

B. Sieffert, John, J., , Jr.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 740 Randall Dr
 City Troy State MI Zip Code 48085-4853
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) none Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **10 / 17 / 2019**
Transaction ID : AB69DE9DEC75C4ABAA37
 Amount of Each Receipt this Period 100.00
 Memo Item

C. Slenk, Larry, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1141 Alden Ct
 City Holland State MI Zip Code 49423-5282
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Filmore Beef Co. Occupation (for Individual) Owner
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **12 / 31 / 2019**
Transaction ID : A0D32E04CDD0D423EB23
 Amount of Each Receipt this Period 250.00
 Memo Item

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 600.00 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | | |
|---|------------------------------|-----------------------------------|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 23 OF 49 |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
TEAM HUIZENGA

A. Tjarksen, Donald, E, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4298 Braeburn Ct
 City Norton Shores State MI Zip Code 49441-4691
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 31 / 2019
Transaction ID : A7204A5E5B1004321B50
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Tyler, James, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2100 Park St
 City Muskegon State MI Zip Code 49444-1047
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Tyler Sales & Distributing Occupation (for Individual) President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 31 / 2019
Transaction ID : A4370D82ADBD44BE2B0D
 Amount of Each Receipt this Period 500.00
 Memo Item

C. Van Eerden, Harold, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10911 Lakeshore Dr
 City West Olive State MI Zip Code 49460-9571
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VEC Occupation (for Individual) manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 31 / 2019
Transaction ID : A485EE53CEB354E698C3
 Amount of Each Receipt this Period 250.00
 Memo Item

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 850.00 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | | |
|---|------------------------------|-----------------------------------|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 24 OF 49 |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
TEAM HUIZENGA

A. Vankuiken, Norma, Jean, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6802 Fox Meadow Lane
 City Ada State MI Zip Code 49301-7559
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) None Occupation (for Individual) Homemaker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3300.00

Date of Receipt 10 / 03 / 2019
Transaction ID : A968FDC5BEB1D40CFB8E
 Amount of Each Receipt this Period 500.00
 Memo Item

B. VanWyk, Roger, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14700 Powderhorn Trail
 City Holland State MI Zip Code 49424-6379
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 31 / 2019
Transaction ID : A248F2C4D21FB4C1B961
 Amount of Each Receipt this Period 100.00
 Memo Item

C. Verhagen, Connie, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3467 Winnetaska Rd
 City Norton Shores State MI Zip Code 49441-3335
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) West Coast Pediatric Dentistry Occupation (for Individual) Pediatric Dentist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 31 / 2019
Transaction ID : A5E854A99244B4385A21
 Amount of Each Receipt this Period 250.00
 Memo Item

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 850.00 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 25 OF 49 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
TEAM HUIZENGA

A. Verplank, L.J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 8
 City Ferrysburg State MI Zip Code 49409-0008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) None Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 12 / 2019
Transaction ID : AEA2F60B901AE4EA48AF
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. Voyt, Robert, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4915 Clearwater Ct
 City Norton Shores State MI Zip Code 49441-5413
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) None Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 31 / 2019
Transaction ID : A94D87CBFEFA23442C9AD
 Amount of Each Receipt this Period 250.00
 Memo Item

C. Vroon, Thomas, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 95 CROSSWIND DR
 City HOLLAND State MI Zip Code 49424-7656
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) T2 Construction Occupation (for Individual) Owner
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 30 / 2019
Transaction ID : AA47AE98142754770A64
 Amount of Each Receipt this Period 250.00
 Memo Item

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 1500.00 |
| TOTAL This Period (last page this line number only)..... | |

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

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

FOR LINE NUMBER: PAGE 26 OF 49
(check only one)

| | | | |
|---|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
TEAM HUIZENGA

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Yonkers, Randall, , ,

Mailing Address 3800 Rain Tree Ave

| | | |
|---------------------|-------------|------------------------|
| City Hudsonville | State MI | Zip Code 49426-8466 |
|---------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|---|--|
| Name of Employer (for Individual) None | Occupation (for Individual) Retired |
|---|--|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09 | / | 30 | / | 2019 |

Transaction ID : AB82DC26AE1A048338AB

Amount of Each Receipt this Period
200.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

| | | |
|------|-------|----------|
| City | State | Zip Code |
|------|-------|----------|

FEC ID number of contributing federal political committee. **C**

| | |
|-----------------------------------|-----------------------------|
| Name of Employer (for Individual) | Occupation (for Individual) |
|-----------------------------------|-----------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
|-----|---|-----|---|---------|

Amount of Each Receipt this Period

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

| | | |
|------|-------|----------|
| City | State | Zip Code |
|------|-------|----------|

FEC ID number of contributing federal political committee. **C**

| | |
|-----------------------------------|-----------------------------|
| Name of Employer (for Individual) | Occupation (for Individual) |
|-----------------------------------|-----------------------------|

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
|-----|---|-----|---|---------|

Amount of Each Receipt this Period

Memo Item

| | |
|---|----------|
| SUBTOTAL of Receipts This Page (optional)..... | 200.00 |
| TOTAL This Period (last page this line number only)..... | 63500.00 |

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

| | | | |
|---|------------------------------|---|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 27 OF 49 |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
TEAM HUIZENGA

A. UPSPAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 55 Glenlake Pkwy

| | | |
|-----------------|-------------|------------------------|
| City Atlanta | State GA | Zip Code 30328-3474 |
|-----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C** C00064766

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09 | / | 10 | / | 2019 |

Transaction ID : A02E6D88782F34C48993

Amount of Each Receipt this Period

| |
|---------|
| 1000.00 |
|---------|

 Memo Item

B.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

| | | |
|------|-------|----------|
| City | State | Zip Code |
|------|-------|----------|

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
|-------|---|-------|---|-------------|

Amount of Each Receipt this Period

| |
|--|
| |
|--|

 Memo Item

C.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

| | | |
|------|-------|----------|
| City | State | Zip Code |
|------|-------|----------|

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
|-------|---|-------|---|-------------|

Amount of Each Receipt this Period

| |
|--|
| |
|--|

 Memo Item

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 1000.00 |
| TOTAL This Period (last page this line number only)..... | 1000.00 |

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

| | | | |
|---|------------------------------|-----------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 28 OF 49 |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | | | <input checked="" type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
TEAM HUIZENGA

A. HUIZENGA FOR CONGRESS
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO Box 254

| | | |
|-----------------|-------------|------------------------|
| City Zeeland | State MI | Zip Code 49464-1509 |
|-----------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C** C00459297

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 31 | | 2019 |

Transaction ID : AFB4E383BD60B45209D3

Amount of Each Receipt this Period
5000.00

Memo Item
Pre-Pay JFC Expenses

B. UPPER HAND FUND
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 2485

| | | |
|---------------------|-------------|-------------------|
| City SPRINGFIELD | State VA | Zip Code 22152 |
|---------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C** C00503151

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | | 26 | | 2019 |

Transaction ID : ABC73188C97C84DBB9D0

Amount of Each Receipt this Period
5000.00

Memo Item
Pre-Pay JFC Expenses

C.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address

| | | |
|------|-------|----------|
| City | State | Zip Code |
|------|-------|----------|

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
|-------|---|-------|---|-------------|

Amount of Each Receipt this Period

Memo Item

| | |
|---|----------|
| SUBTOTAL of Receipts This Page (optional)..... | 10000.00 |
| TOTAL This Period (last page this line number only)..... | 10000.00 |

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
TEAM HUIZENGA

| | | | |
|---|--|--|---|
| Full Name (Last, First, Middle Initial) A. American Express | | Date of Disbursement MM / DD / YYYY 07 / 22 / 2019 | |
| Mailing Address PO Box 1270 | | FEC Identification Number C [REDACTED] | |
| City Newark | State NJ | Zip Code 07101 | Transaction ID : B25BC9AFDI |
| Purpose of Disbursement Credit Card Payment | | Category/ Type 001 | Amount of Each Disbursement this Period 844.61 |
| Candidate Name | | Memo Item <input type="checkbox"/> | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: District: | | | |

| | | | |
|---|--|--|---|
| Full Name (Last, First, Middle Initial) B. Doubletree Metropolitan Hotel | | Date of Disbursement MM / DD / YYYY 06 / 18 / 2019 | |
| Mailing Address 569 Lexington Ave | | FEC Identification Number C [REDACTED] | |
| City New York | State NY | Zip Code 10022-7562 | Transaction ID : B99BE97FCC |
| Purpose of Disbursement Lodging | | Category/ Type 002 | Amount of Each Disbursement this Period 605.84 |
| Candidate Name | | Memo Item <input checked="" type="checkbox"/> | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: District: | | | |

| | | | |
|---|--|--|--|
| Full Name (Last, First, Middle Initial) C. American Express | | Date of Disbursement MM / DD / YYYY 08 / 23 / 2019 | |
| Mailing Address PO Box 1270 | | FEC Identification Number C [REDACTED] | |
| City Newark | State NJ | Zip Code 07101 | Transaction ID : BA08944356 |
| Purpose of Disbursement Credit Card Payment | | Category/ Type 001 | Amount of Each Disbursement this Period 6782.37 |
| Candidate Name | | Memo Item <input type="checkbox"/> | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: District: | | | |

SUBTOTAL of Disbursements This Page (optional)..... ▶

7626.98

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
TEAM HUIZENGA

A. Lake View Hotel

Full Name (Last, First, Middle Initial)

Mailing Address One Huron Street

City Mackinac Island State MI Zip Code 49757

Purpose of Disbursement Lodging

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 17 / 2019

FEC Identification Number: C

Transaction ID : B9A0F41DA7

Amount of Each Disbursement this Period: 1417.08

Memo Item

B. U.S. Postal Service

Full Name (Last, First, Middle Initial)

Mailing Address 200 E. Main Ave.

City Zeeland State MI Zip Code 49464-1786

Purpose of Disbursement Postage

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 22 / 2019

FEC Identification Number: C

Transaction ID : B78307E3A43

Amount of Each Disbursement this Period: 275.00

Memo Item

C. Del Mar de Fabio Trabocchi

Full Name (Last, First, Middle Initial)

Mailing Address 791 Wharf St SW

City Washington State DC Zip Code 20024-3433

Purpose of Disbursement Food/Beverage

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 23 / 2019

FEC Identification Number: C

Transaction ID : B5DFE1F38C

Amount of Each Disbursement this Period: 360.85

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
TEAM HUIZENGA

Full Name (Last, First, Middle Initial)

A. Staples

Mailing Address 2337 N Park Drive
Suite 310

City Holland State MI Zip Code 49424-8522

Purpose of Disbursement Office Supplies

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 07 / 29 / 2019

FEC Identification Number: C

Transaction ID : B579FC85C8

Amount of Each Disbursement this Period: 571.28

Memo Item

Full Name (Last, First, Middle Initial)

B. Grand Hotel

Mailing Address 1 Grand Ave.

City Mackinac Island State MI Zip Code 49757

Purpose of Disbursement Facility Rental

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 08 / 07 / 2019

FEC Identification Number: C

Transaction ID : BFC75EA350I

Amount of Each Disbursement this Period: 2019.92

Memo Item

Full Name (Last, First, Middle Initial)

C. American Airlines

Mailing Address 4333 Amon Carter Boulevard

City Fort Worth State TX Zip Code 76155-2605

Purpose of Disbursement Airfare

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 08 / 08 / 2019

FEC Identification Number: C

Transaction ID : BD6257BA1C

Amount of Each Disbursement this Period: 868.60

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
TEAM HUIZENGA

A. Delta Air Lines

Full Name (Last, First, Middle Initial)
Mailing Address 5235 Portage Road

City Portage State MI Zip Code 49002-1766

Purpose of Disbursement Airfare

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 08 / 09 / 2019

FEC Identification Number: C
Transaction ID : BEA8C1CF72
Amount of Each Disbursement this Period: 764.00

Memo Item

B. American Express

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 1270

City Newark State NJ Zip Code 07101

Purpose of Disbursement Credit Card Payment

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 09 / 23 / 2019

FEC Identification Number: C
Transaction ID : B1621B5D42f
Amount of Each Disbursement this Period: 3687.94

Memo Item

C. The Made In Michigan Store

Full Name (Last, First, Middle Initial)
Mailing Address 360 Water Street

City Saugatuck State MI Zip Code 49453-8431

Purpose of Disbursement Event Supplies

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 08 / 22 / 2019

FEC Identification Number: C
Transaction ID : B022C20B75
Amount of Each Disbursement this Period: 254.40

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 3687.94

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
TEAM HUIZENGA

A. Delta Airlines

Full Name (Last, First, Middle Initial)

Mailing Address 1030 Delta Blvd.

City Atlanta State GA Zip Code 30320

Purpose of Disbursement Airfare

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 06 / 2019

FEC Identification Number: C

Transaction ID : B0B74786A4

Amount of Each Disbursement this Period: 508.60

Memo Item

B. Delta Airlines

Full Name (Last, First, Middle Initial)

Mailing Address 1030 Delta Blvd.

City Atlanta State GA Zip Code 30320

Purpose of Disbursement Airfare

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 07 / 2019

FEC Identification Number: C

Transaction ID : B65908B2854

Amount of Each Disbursement this Period: 1929.00

Memo Item

C. Lake View Hotel

Full Name (Last, First, Middle Initial)

Mailing Address One Huron Street

City Mackinac Island State MI Zip Code 49757

Purpose of Disbursement REFUND - Lodging

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 10 / 2019

FEC Identification Number: C

Transaction ID : B3852F53E5

Amount of Each Disbursement this Period: - 354.36

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
TEAM HUIZENGA

| | | | |
|---|--|--|--------------------------|
| Full Name (Last, First, Middle Initial) A. Mokaya | | Date of Disbursement MM / DD / YYYY 09 / 13 / 2019 | |
| Mailing Address 638 Wealthy Street SE | | FEC Identification Number C [REDACTED] Transaction ID : B9C13785FE1 Amount of Each Disbursement this Period [REDACTED] 740.00 | |
| City Grand Rapids | State MI | Zip Code 49503-5447 | Category/ Type 003 |
| Purpose of Disbursement Event Supplies | | | |
| Candidate Name | | Memo Item <input checked="" type="checkbox"/> | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: District: | | | |

| | | | |
|---|--|--|--------------------------|
| Full Name (Last, First, Middle Initial) B. American Express | | Date of Disbursement MM / DD / YYYY 10 / 24 / 2019 | |
| Mailing Address PO Box 1270 | | FEC Identification Number C [REDACTED] Transaction ID : BFC4C0C700 Amount of Each Disbursement this Period [REDACTED] 7544.05 | |
| City Newark | State NJ | Zip Code 07101 | Category/ Type 001 |
| Purpose of Disbursement See Below | | | |
| Candidate Name | | Memo Item <input type="checkbox"/> | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: District: | | | |

| | | | |
|---|--|---|--------------------------|
| Full Name (Last, First, Middle Initial) C. Taylor Rental Center | | Date of Disbursement MM / DD / YYYY 09 / 16 / 2019 | |
| Mailing Address 62 S Waverly Road | | FEC Identification Number C [REDACTED] Transaction ID : B4B90572F1 Amount of Each Disbursement this Period [REDACTED] 265.00 | |
| City Holland | State MI | Zip Code 49423-3053 | Category/ Type 003 |
| Purpose of Disbursement Event Supplies | | | |
| Candidate Name | | Memo Item <input checked="" type="checkbox"/> | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: District: | | | |

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| SUBTOTAL of Disbursements This Page (optional).....▶ | [REDACTED] 7544.05 |
| TOTAL This Period (last page this line number only).....▶ | [REDACTED] |

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
TEAM HUIZENGA

| | | | |
|---|--|--|--------------------------|
| Full Name (Last, First, Middle Initial) A. Meijer | | Date of Disbursement MM / DD / YYYY 09 / 16 / 2019 | |
| Mailing Address 2929 Walker Ave NW | | FEC Identification Number C [REDACTED] Transaction ID : BB06376A14! Amount of Each Disbursement this Period [REDACTED] 209.66 | |
| City Grand Rapids | State MI | Zip Code 49544-6402 | Category/ Type 001 |
| Purpose of Disbursement Office Supplies | | | |
| Candidate Name | | Memo Item <input checked="" type="checkbox"/> | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: District: | | | |

| | | | |
|---|--|--|--------------------------|
| Full Name (Last, First, Middle Initial) B. Grand Hotel | | Date of Disbursement MM / DD / YYYY 09 / 17 / 2019 | |
| Mailing Address 1 Grand Ave. | | FEC Identification Number C [REDACTED] Transaction ID : B2F79DB6B8! Amount of Each Disbursement this Period [REDACTED] 599.37 | |
| City Mackinac Island | State MI | Zip Code 49757 | Category/ Type 003 |
| Purpose of Disbursement Food/Beverage | | | |
| Candidate Name | | Memo Item <input checked="" type="checkbox"/> | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: District: | | | |

| | | | |
|---|--|--|--------------------------|
| Full Name (Last, First, Middle Initial) C. JW Marriott Grand Rapids | | Date of Disbursement MM / DD / YYYY 09 / 18 / 2019 | |
| Mailing Address 235 Louis Street NW | | FEC Identification Number C [REDACTED] Transaction ID : B11DA79E4! Amount of Each Disbursement this Period [REDACTED] 1085.88 | |
| City Grand Rapids | State MI | Zip Code 49503-2600 | Category/ Type 002 |
| Purpose of Disbursement Lodging | | | |
| Candidate Name | | Memo Item <input checked="" type="checkbox"/> | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: District: | | | |

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|--|-----------------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | [REDACTED] 0.00 |
| TOTAL This Period (last page this line number only).....▶ | [REDACTED] |

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
TEAM HUIZENGA

A. Staples

Full Name (Last, First, Middle Initial)

Mailing Address 2337 N Park Drive
Suite 310

City Holland State MI Zip Code 49424-8522

Purpose of Disbursement Office Supplies

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 09 / 19 / 2019

FEC Identification Number: C

Transaction ID : BA2C64DAAI

Amount of Each Disbursement this Period: 348.24

Memo Item

B. Lake View Hotel

Full Name (Last, First, Middle Initial)

Mailing Address One Huron Street

City Mackinac Island State MI Zip Code 49757

Purpose of Disbursement Lodging

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 09 / 19 / 2019

FEC Identification Number: C

Transaction ID : B706CEE763I

Amount of Each Disbursement this Period: 1063.44

Memo Item

C. Sheplers

Full Name (Last, First, Middle Initial)

Mailing Address 500 E Central Ave

City Mackinaw City State MI Zip Code 49701

Purpose of Disbursement Event Supplies

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 09 / 20 / 2019

FEC Identification Number: C

Transaction ID : BEF939957E

Amount of Each Disbursement this Period: 303.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
TEAM HUIZENGA

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Watermark Country Club | | Date of Disbursement MM / DD / YYYY 09 / 20 / 2019 |
| Mailing Address 5500 Cascade Road SE | | FEC Identification Number C [REDACTED] Transaction ID : BF830A7A58 Amount of Each Disbursement this Period [REDACTED] 1066.18 |
| City Grand Rapids | State MI | Zip Code 49546-6455 |
| Purpose of Disbursement Food/Beverage | | Category/Type 003 |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | <input checked="" type="checkbox"/> Memo Item | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Grand Hotel | | Date of Disbursement MM / DD / YYYY 09 / 20 / 2019 |
| Mailing Address 1 Grand Ave. | | FEC Identification Number C [REDACTED] Transaction ID : B2D93CD877 Amount of Each Disbursement this Period [REDACTED] 598.90 |
| City Mackinac Island | State MI | Zip Code 49757 |
| Purpose of Disbursement Food/Beverage | | Category/Type 003 |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | <input checked="" type="checkbox"/> Memo Item | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Grand Hotel | | Date of Disbursement MM / DD / YYYY 09 / 21 / 2019 |
| Mailing Address 1 Grand Ave. | | FEC Identification Number C [REDACTED] Transaction ID : B6028983B3 Amount of Each Disbursement this Period [REDACTED] 55.12 |
| City Mackinac Island | State MI | Zip Code 49757 |
| Purpose of Disbursement Food/Beverage | | Category/Type 003 |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | <input checked="" type="checkbox"/> Memo Item | |

| | |
|--|-----------------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | [REDACTED] 0.00 |
| TOTAL This Period (last page this line number only).....▶ | [REDACTED] |

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
TEAM HUIZENGA

Full Name (Last, First, Middle Initial)

A. Sheplers

Mailing Address 500 E Central Ave

City Mackinaw City State MI Zip Code 49701

Purpose of Disbursement
Event Supplies

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
09 / 21 / 2019

FEC Identification Number

Transaction ID : B322B1093EI
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Grand Hotel

Mailing Address 1 Grand Ave.

City Mackinac Island State MI Zip Code 49757

Purpose of Disbursement
Food/Beverage

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
09 / 22 / 2019

FEC Identification Number

Transaction ID : B7F292253AE
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Grand Hotel

Mailing Address 1 Grand Ave.

City Mackinac Island State MI Zip Code 49757

Purpose of Disbursement
Food/Beverage

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
09 / 24 / 2019

FEC Identification Number

Transaction ID : B8D2F69D72
Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
TEAM HUIZENGA

A. District Taco

Full Name (Last, First, Middle Initial)

Mailing Address 656 Pennsylvania Avenue SE

City Washington State DC Zip Code 20003-4304

Purpose of Disbursement Catering

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 25 / 2019

FEC Identification Number: C

Transaction ID : BA31DE7321

Amount of Each Disbursement this Period: 1017.50

Memo Item

B. Fairfield Inn

Full Name (Last, First, Middle Initial)

Mailing Address 21 West 37th Street

City New York State NY Zip Code 10018-6201

Purpose of Disbursement Lodging

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 08 / 2019

FEC Identification Number: C

Transaction ID : BEE7526B30f

Amount of Each Disbursement this Period: 544.04

Memo Item

C. Lustre Cleaners

Full Name (Last, First, Middle Initial)

Mailing Address 311 Pennsylvania Avenue SE

City Washington State DC Zip Code 20003-1148

Purpose of Disbursement Event Supplies

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 10 / 2019

FEC Identification Number: C

Transaction ID : B32C113EB2

Amount of Each Disbursement this Period: 300.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
TEAM HUIZENGA

A. American Express

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 1270

City Newark State NJ Zip Code 07101

Purpose of Disbursement See Below

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 22 / 2019

FEC Identification Number: C

Transaction ID : B6A4B60A4A

Amount of Each Disbursement this Period: 5564.40

Memo Item

B. DeKlomp Wooden Shoe

Full Name (Last, First, Middle Initial)
Mailing Address 12755 Quincy Street

City Holland State MI Zip Code 49424-8285

Purpose of Disbursement Event Supplies

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 24 / 2019

FEC Identification Number: C

Transaction ID : BB2FE99B92I

Amount of Each Disbursement this Period: 297.63

Memo Item

C. Delta Air Lines

Full Name (Last, First, Middle Initial)
Mailing Address 5235 Portage Road

City Portage State MI Zip Code 49002-1766

Purpose of Disbursement Airfare

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 11 / 2019

FEC Identification Number: C

Transaction ID : BB528CEFB

Amount of Each Disbursement this Period: 1929.10

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 5564.40

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
TEAM HUIZENGA

A. The House Gift Shop

Full Name (Last, First, Middle Initial)

Mailing Address Longworth HOB

City Washington State DC Zip Code 20003

Purpose of Disbursement Gifts

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 12 / 2019

FEC Identification Number: C

Transaction ID : B447F9F97B!

Amount of Each Disbursement this Period: 900.00

Memo Item

B. Delta Air Lines

Full Name (Last, First, Middle Initial)

Mailing Address 5235 Portage Road

City Portage State MI Zip Code 49002-1766

Purpose of Disbursement Airfare

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 14 / 2019

FEC Identification Number: C

Transaction ID : B13E3A3546/

Amount of Each Disbursement this Period: 1494.90

Memo Item

C. American Express

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 1270

City Newark State NJ Zip Code 07101

Purpose of Disbursement See Below

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 26 / 2019

FEC Identification Number: C

Transaction ID : BD176776F5

Amount of Each Disbursement this Period: 5000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

5000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
TEAM HUIZENGA

| | | | | |
|---|--|---|--|--|
| Full Name (Last, First, Middle Initial) A. Alpenrose Restaurant | | | Date of Disbursement MM / DD / YYYY 12 / 26 / 2019 | |
| Mailing Address 4 E 8th St | | | FEC Identification Number C [REDACTED] | |
| City Holland | State MI | Zip Code 49423-3502 | Transaction ID : B23532FF9A' | |
| Purpose of Disbursement Food/Beverage | | Category/ Type 003 | Amount of Each Disbursement this Period [REDACTED] 326.20 | |
| Candidate Name | | Memo Item <input checked="" type="checkbox"/> | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: District: | | | | |

| | | | | |
|---|--|---|---|--|
| Full Name (Last, First, Middle Initial) B. Delta Air Lines | | | Date of Disbursement MM / DD / YYYY 12 / 26 / 2019 | |
| Mailing Address 5235 Portage Road | | | FEC Identification Number C [REDACTED] | |
| City Portage | State MI | Zip Code 49002-1766 | Transaction ID : B468931A2Af | |
| Purpose of Disbursement Airfare | | Category/ Type 002 | Amount of Each Disbursement this Period [REDACTED] 3562.60 | |
| Candidate Name | | Memo Item <input checked="" type="checkbox"/> | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: District: | | | | |

| | | | | |
|---|--|---|--|--|
| Full Name (Last, First, Middle Initial) C. American Airlines | | | Date of Disbursement MM / DD / YYYY 12 / 26 / 2019 | |
| Mailing Address 4333 Amon Carter Boulevard | | | FEC Identification Number C [REDACTED] | |
| City Fort Worth | State TX | Zip Code 76155-2605 | Transaction ID : BB5594B22F | |
| Purpose of Disbursement Airfare | | Category/ Type 002 | Amount of Each Disbursement this Period [REDACTED] 302.80 | |
| Candidate Name | | Memo Item <input checked="" type="checkbox"/> | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: District: | | | | |

| | |
|--|-----------------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | [REDACTED] 0.00 |
| TOTAL This Period (last page this line number only).....▶ | [REDACTED] |

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
TEAM HUIZENGA

A. Aristotle

Full Name (Last, First, Middle Initial)

Mailing Address 205 Pennsylvania Avenue SE

City Washington State DC Zip Code 20003-1164

Purpose of Disbursement Database Software

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 26 / 2019

FEC Identification Number: C

Transaction ID : **BB799A139C**

Amount of Each Disbursement this Period: 600.00

Memo Item

B. Aristotle

Full Name (Last, First, Middle Initial)

Mailing Address 205 Pennsylvania Avenue SE

City Washington State DC Zip Code 20003-1164

Purpose of Disbursement Compliance Software

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 22 / 2019

FEC Identification Number: C

Transaction ID : **B3D32629782**

Amount of Each Disbursement this Period: 600.00

Memo Item

C. Chaser Rewards/Chaser Apparel

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 141246

City Grand Rapids State MI Zip Code 49514-1246

Purpose of Disbursement Event Supplies

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 12 / 2019

FEC Identification Number: C

Transaction ID : **B65AF11F0C**

Amount of Each Disbursement this Period: 2605.63

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 3805.63

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
TEAM HUIZENGA

Full Name (Last, First, Middle Initial)

A. Concentric Office

Mailing Address PO Box 2485

City
Springfield

State
VA

Zip Code
22152

Purpose of Disbursement
Compliance Services

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 30 / 2019

FEC Identification Number

C
Transaction ID : B444D64F0D!
Amount of Each Disbursement this Period
1543.45

Memo Item

Full Name (Last, First, Middle Initial)

B. DeVette, Tom, , ,

Mailing Address 50 Ransom Ave NE
Apt 308

City
Grand Rapids

State
MI

Zip Code
49503-3239

Purpose of Disbursement
Event Photography

007

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 25 / 2019

FEC Identification Number

C
Transaction ID : B4D4BCAFD!
Amount of Each Disbursement this Period
300.00

Memo Item

Full Name (Last, First, Middle Initial)

C. HUIZENGA FOR CONGRESS

Mailing Address PO Box 254

City
Zeeland

State
MI

Zip Code
49464-1509

Purpose of Disbursement
Reimb.-CC Payment

001

Category/
Type

Candidate Name

Huizenga, William, P, ,

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: MI District: 02

Date of Disbursement

MM / DD / YYYY
12 / 31 / 2019

FEC Identification Number

C C00459297
Transaction ID : B3270D67EF
Amount of Each Disbursement this Period
12406.35

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

14249.80

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
TEAM HUIZENGA

| | | | |
|---|---------------------|--|------------------------------------|
| Full Name (Last, First, Middle Initial) A. Huntington Bank | | Date of Disbursement MM / DD / YYYY 11 / 15 / 2019 | |
| Mailing Address 101 E. Main Street | | FEC Identification Number C [REDACTED] Transaction ID : BFDC90F16C Amount of Each Disbursement this Period 25.00 | |
| City Zeeland | State MI | Zip Code 49464 | Memo Item <input type="checkbox"/> |
| Purpose of Disbursement Bank Fee | | Category/ Type 001 | |
| Candidate Name | | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | State: District: | | |

| | | | |
|---|---------------------|--|------------------------------------|
| Full Name (Last, First, Middle Initial) B. Huntington Bank | | Date of Disbursement MM / DD / YYYY 12 / 15 / 2019 | |
| Mailing Address 101 E. Main Street | | FEC Identification Number C [REDACTED] Transaction ID : B01BCC2B3E Amount of Each Disbursement this Period 25.00 | |
| City Zeeland | State MI | Zip Code 49464 | Memo Item <input type="checkbox"/> |
| Purpose of Disbursement Bank Fee | | Category/ Type 001 | |
| Candidate Name | | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | State: District: | | |

| | | | |
|---|---------------------|---|------------------------------------|
| Full Name (Last, First, Middle Initial) C. Lifiable Media Inc | | Date of Disbursement MM / DD / YYYY 10 / 18 / 2019 | |
| Mailing Address 41810 N Venture Dr Bldg F | | FEC Identification Number C [REDACTED] Transaction ID : B02A935955 Amount of Each Disbursement this Period 2500.00 | |
| City Anthem | State AZ | Zip Code 85086-3169 | Memo Item <input type="checkbox"/> |
| Purpose of Disbursement Digital Media | | Category/ Type 004 | |
| Candidate Name | | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | State: District: | | |

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

| |
|------------|
| 2550.00 |
| [REDACTED] |

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
TEAM HUIZENGA

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. MicrGraphics Printing | | Date of Disbursement MM / DD / YYYY 08 / 26 / 2019 |
| Mailing Address 2637 Emerson Boulevard | | FEC Identification Number C Transaction ID : BDF3242104I Amount of Each Disbursement this Period 313.60 |
| City Norton Shores | State MI Zip Code 49441-3503 | |
| Purpose of Disbursement Printing | Category/Type 004 | Memo Item <input type="checkbox"/> |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. MicrGraphics Printing | | Date of Disbursement MM / DD / YYYY 08 / 30 / 2019 |
| Mailing Address 2637 Emerson Boulevard | | FEC Identification Number C Transaction ID : B8344E51A8I Amount of Each Disbursement this Period 1225.25 |
| City Norton Shores | State MI Zip Code 49441-3503 | |
| Purpose of Disbursement Printing | Category/Type 004 | Memo Item <input type="checkbox"/> |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Unisource Direct LLC | | Date of Disbursement MM / DD / YYYY 07 / 16 / 2019 |
| Mailing Address PO Box 82 | | FEC Identification Number C Transaction ID : B3BF71C7FI Amount of Each Disbursement this Period 8100.69 |
| City Watertown | State WI Zip Code 53094-0082 | |
| Purpose of Disbursement Fundraising Mailing | Category/Type 003 | Memo Item <input type="checkbox"/> |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

SUBTOTAL of Disbursements This Page (optional)..... ▶

9639.54

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
TEAM HUIZENGA

| | | | |
|---|--|--|--------------------------|
| Full Name (Last, First, Middle Initial) A. Unisource Direct LLC | | Date of Disbursement MM / DD / YYYY 10 / 22 / 2019 | |
| Mailing Address PO Box 82 | | FEC Identification Number C [] Transaction ID : BFD7E0F187 Amount of Each Disbursement this Period 4442.31 | |
| City Watertown | State WI | Zip Code 53094-0082 | Category/ Type 003 |
| Purpose of Disbursement Fundraising Mailing | | Candidate Name | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: District: | <input type="checkbox"/> Memo Item | | |

| | | | |
|---|--|---|--------------------------|
| Full Name (Last, First, Middle Initial) B. Unisource Direct LLC | | Date of Disbursement MM / DD / YYYY 11 / 14 / 2019 | |
| Mailing Address PO Box 82 | | FEC Identification Number C [] Transaction ID : B052E4BF59/ Amount of Each Disbursement this Period 4442.31 | |
| City Watertown | State WI | Zip Code 53094-0082 | Category/ Type 003 |
| Purpose of Disbursement Fundraising Mailing | | Candidate Name | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: District: | <input type="checkbox"/> Memo Item | | |

| | | | |
|---|--|---|-------------------|
| Full Name (Last, First, Middle Initial) C. | | Date of Disbursement MM / DD / YYYY | |
| Mailing Address | | FEC Identification Number C [] Amount of Each Disbursement this Period | |
| City | State | Zip Code | Category/ Type |
| Purpose of Disbursement | | Candidate Name | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: District: | <input type="checkbox"/> Memo Item | | |

| | |
|--|----------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 8884.62 |
| TOTAL This Period (last page this line number only).....▶ | 68552.96 |

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

| | | | | |
|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input checked="" type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
TEAM HUIZENGA

A. HUIZENGA FOR CONGRESS

Full Name (Last, First, Middle Initial)
Zeeland

Mailing Address PO Box 254

City Zeeland State MI Zip Code 49464-1509

Purpose of Disbursement JFC Distribution-G2020

Candidate Name Huizenga, William, P, ,

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: MI District: 02

Date of Disbursement: 09 / 30 / 2019

FEC Identification Number: C00459297
Transaction ID : BFA46CECB

Amount of Each Disbursement this Period: 766.41

Memo Item

B. HUIZENGA FOR CONGRESS

Full Name (Last, First, Middle Initial)
Zeeland

Mailing Address PO Box 254

City Zeeland State MI Zip Code 49464-1509

Purpose of Disbursement JFC Distribution-P2020

Candidate Name Huizenga, William, P, ,

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: MI District: 02

Date of Disbursement: 09 / 30 / 2019

FEC Identification Number: C00459297
Transaction ID : B35163DE182

Amount of Each Disbursement this Period: 19714.75

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: / /

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

| | |
|--|----------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 20481.16 |
| TOTAL This Period (last page this line number only).....▶ | 20481.16 |

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

| | | | | |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27 |
| <input checked="" type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
TEAM HUIZENGA

A. Rohs, Henry, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 59 Naples Court

City Kalamazoo State MI Zip Code 49009-9381

Purpose of Disbursement CHARGEBACK

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 19 / 2019

FEC Identification Number: C

Transaction ID : B15E9FCA5C

Amount of Each Disbursement this Period: 50.00

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

| | |
|--|-------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 50.00 |
| TOTAL This Period (last page this line number only).....▶ | 50.00 |