

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

ADDRESS (number and street) 5915 Eastman Avenue
Suite 100
 Check if different than previously reported. (ACC) Midland MI 48640-6824

2. **FEC IDENTIFICATION NUMBER** ▼ C C00561530 CITY ▲ STATE ▲ ZIP CODE ▲
STATE ▼ DISTRICT
 IS THIS REPORT NEW (N) OR AMENDED (A) MI 04

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)
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on M M / D D / Y Y Y Y in the State of
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on M M / D D / Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y through M M / D D / Y Y Y Y
07 / 01 / 2015 through 09 / 30 / 2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer Gwen Lang
Signature of Treasurer Gwen Lang *[Electronically Filed]* Date M M / D D / Y Y Y Y
10 / 15 / 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Moolenaar for Congress

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	62390.00	304422.10
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	62390.00	304422.10
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	87585.05	303224.34
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	101.18
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	87585.05	303123.16
8. Cash on Hand at Close of Reporting Period (from Line 27).....	89938.74	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	229753.30	

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 3 (Revised 12/2003)

Write or Type Committee Name

Moolenaar for Congress

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	6000.00	51903.30
(ii) Unitemized.....	2140.00	13883.80
(iii) TOTAL of contributions from individuals ▶	8140.00	65787.10
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	54250.00	238635.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	62390.00	304422.10
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	18251.41
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	101.18
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	57.54
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	62390.00	322832.23

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	87585.05	303224.34
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(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 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	2350.00	7350.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	89935.05	310574.34

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	117483.79
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	62390.00
25. SUBTOTAL (add Line 23 and Line 24).....	179873.79
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	89935.05
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	89938.74

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 75
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Larry E. Smith

Mailing Address 4515 Sangamore Road
Apt. 303

City Bethesda State MD Zip Code 20816-2537

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

Name of Employer Legislative Strategies, Inc. Occupation Principal

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 21 / 2015

Transaction ID : A67AEC16E4E7C414893B

Amount of Each Receipt this Period
500.00

Donation

B. Full Name (Last, First, Middle Initial)
Ms. Lisa M. Ferden

Mailing Address 1113 Kent Drive

City Mt Pleasant State MI Zip Code 48858-3369

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

Name of Employer Vice President Occupation Information Database Systems, Inc.

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 11 / 2015

Transaction ID : A282848DB89714A2F9E1

Amount of Each Receipt this Period
250.00

Donation

C. Full Name (Last, First, Middle Initial)
Mr. Ryan Bohannon

Mailing Address 2443 Hillendale Drive

City Rochester Hills State MI Zip Code 48309-2025

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

Name of Employer Kienbaum Opperwall Hardy & Pelton, PLC Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 04 / 2015

Transaction ID : A62D1521C67FF4050AB2

Amount of Each Receipt this Period
400.00

Donation

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

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

1150.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 75
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

A. Full Name (Last, First, Middle Initial)
Ms. Rhonda K. Grant

Mailing Address 6830 Holmes Highway

City Eaton Rapids State MI Zip Code 48827-9561

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

Name of Employer Grant Consulting Group LLC Occupation Consultant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 17 / 2015

Transaction ID : AEE2426AACF7F46C0A48

Amount of Each Receipt this Period
250.00

Donation

B. Full Name (Last, First, Middle Initial)
Mr. Kenneth P. Nobis

Mailing Address 1513 N Lowell Road

City Saint Johns State MI Zip Code 48879-9519

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

Name of Employer Self-Employed Occupation Farmer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 25 / 2015

Transaction ID : A5421704002CC47DF9E1

Amount of Each Receipt this Period
1000.00

Donation

C. Full Name (Last, First, Middle Initial)
Mr. Scott A. Hummel

Mailing Address 14464 Turner Road

City Dewitt State MI Zip Code 48820-9024

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

Name of Employer MI Assn of Insurance Agents Occupation SVP of Government Affairs

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 17 / 2015

Transaction ID : A9061B9D475C64B75833

Amount of Each Receipt this Period
300.00

Donation

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

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

1550.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 75
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Gary Elza

Mailing Address 2020 N Pinesboro Drive

City Sanford State MI Zip Code 48657-9279

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

Name of Employer G.E. Insulation Company Occupation President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 29 / 2015

Transaction ID : AC8BB7B9D4AB9424FB47

Amount of Each Receipt this Period
250.00

Donation

B. Full Name (Last, First, Middle Initial)
Ms. Catherine Reynolds

Mailing Address 864 Meadows Drive

City Jackson State MI Zip Code 49203-6361

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

Name of Employer CMS Energy Corporation Occupation Senior Vice President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 30 / 2015

Transaction ID : AF79E9B5D76B84F4090F

Amount of Each Receipt this Period
250.00

Donation

C. Full Name (Last, First, Middle Initial)
Mr. Doyle Bartlett

Mailing Address 439 New Jersey Avenue, SE

City Washington State DC Zip Code 20003-4034

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

Name of Employer Eris Group Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 21 / 2015

Transaction ID : AF48F2CE25DA346E893A

Amount of Each Receipt this Period
300.00

In-kind:Townhouse rental for event - i

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

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

800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 75
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Craig A. Borr

Mailing Address 629 White Pine Drive

City State Zip Code
Cadillac MI 49601-8515

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

Name of Employer Occupation
MI Electric Cooperative Assn President & CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 23 / 2015

Transaction ID : ABFC727D50CA8423E82D

Amount of Each Receipt this Period
250.00

Donation

B. Full Name (Last, First, Middle Initial)
Mr. Noel LaPorte

Mailing Address 6300 Heathfield Drive

City State Zip Code
East Lansing MI 48823-9675

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

Name of Employer Occupation
Infinity Capital Partners President

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 23 / 2015

Transaction ID : A20C8C0B2A5694D34B61

Amount of Each Receipt this Period
250.00

Donation

C. Full Name (Last, First, Middle Initial)
Mr. William E. Kring

Mailing Address 9543 Peterson Drive

City State Zip Code
Cadillac MI 49601-9758

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

Name of Employer Occupation
Heritage Broadcasting General Manager

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 17 / 2015

Transaction ID : A4146780100FC4729BD5

Amount of Each Receipt this Period
1500.00

Donation

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

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

2000.00

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

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

FOR LINE NUMBER: PAGE 9 OF 75
(check only one)
 11a 12
 11b 13a
 11c 13b
 11d 14
 15

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Richard White

Mailing Address 101 Primrose Street

City State Zip Code
Chevy Chase MD 20815-3324

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

Name of Employer Occupation
Thorn Run Partners Consultant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2015

Transaction ID : AB1BCA28412244677BD1

Amount of Each Receipt this Period
500.00

Donation

B. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

500.00

6000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 75
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

A. Full Name (Last, First, Middle Initial)
Ernst & Young PAC

Mailing Address 1101 New York Avenue NW

City Washington State DC Zip Code 20005-4269

FEC ID number of contributing federal political committee. **C C00227744**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 27 / 2015

Transaction ID : A79899B46E6DC401C8F7

Amount of Each Receipt this Period
1000.00

Donation

B. Full Name (Last, First, Middle Initial)
General Dynamics Corporation PAC (GDC PAC)

Mailing Address 2941 Fairview Park Dr Ste 100

City Falls Church State VA Zip Code 22042-4541

FEC ID number of contributing federal political committee. **C C00078451**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 29 / 2015

Transaction ID : A29213113A11243FF81E

Amount of Each Receipt this Period
1000.00

Donation

C. Full Name (Last, First, Middle Initial)
American Assn of Crop Insurers PAC (AACI PAC)

Mailing Address 1 Massachusetts Avenue NW Suite 800

City Washington State DC Zip Code 20001-1401

FEC ID number of contributing federal political committee. **C C00172833**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2015

Transaction ID : A38D9259141844C0C9D4

Amount of Each Receipt this Period
1000.00

Donation

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 75
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

A. General Motors Corp. PAC (GM PAC)
 Full Name (Last, First, Middle Initial)
 Mailing Address 25 Massachusetts Ave NW
 Ste 400
 City Washington State DC Zip Code 20001-1427
 FEC ID number of contributing federal political committee. **C C00076810**
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 10 / 2015
Transaction ID : A43B227B0AA4F47CC882
 Amount of Each Receipt this Period
 1000.00
 Donation

B. Nestle Waters North America Inc. PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 900 Long Ridge Rd
 Bldg 2
 City Stamford State CT Zip Code 06902-1140
 FEC ID number of contributing federal political committee. **C C00302943**
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 17 / 2015
Transaction ID : A12FFDBDF5EBF4928962
 Amount of Each Receipt this Period
 1000.00
 Donation

C. American Society of Anesthesiologists PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1061 American Ln
 City Schaumburg State IL Zip Code 60173-4973
 FEC ID number of contributing federal political committee. **C C00255752**
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 28 / 2015
Transaction ID : A31C12C28E3F34CE8BA0
 Amount of Each Receipt this Period
 1500.00
 Donation

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

3500.00

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

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

FOR LINE NUMBER: PAGE 12 OF 75
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

A. Full Name (Last, First, Middle Initial)
AFLAC Incorporated PAC

Mailing Address 1932 Wynnton Rd

City Columbus State GA Zip Code 31999-0001

FEC ID number of contributing federal political committee. **C C00034157**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2015

Transaction ID : A37C2B53ABC8940E683C

Amount of Each Receipt this Period
 1000.00

Donation

B. Full Name (Last, First, Middle Initial)
Huntington Bancshares Inc. PAC (HBI-PAC)

Mailing Address 41 S High St

City Columbus State OH Zip Code 43215-3406

FEC ID number of contributing federal political committee. **C C00165589**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2015

Transaction ID : A12D84DC634B34B8D89C

Amount of Each Receipt this Period
 1000.00

Donation

C. Full Name (Last, First, Middle Initial)
Syngenta Corporation Employee PAC

Mailing Address 1775 Pennsylvania Ave NW Ste 600

City Washington State DC Zip Code 20006-4602

FEC ID number of contributing federal political committee. **C C00363945**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2015

Transaction ID : A6C1969CA1C6944959F1

Amount of Each Receipt this Period
 2500.00

Donation

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 75
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

A. Michigan Milk Producers PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 41310 Bridge St
 City State Zip Code
 Novi MI 48375-1302
 FEC ID number of contributing federal political committee. **C C00096594**
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date
3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 25 / 2015
Transaction ID : A8B91F4523512438C8E7
 Amount of Each Receipt this Period
 1000.00
 Donation

B. United Parcel Service PAC (UPSPAC)
 Full Name (Last, First, Middle Initial)
 Mailing Address 55 Glenlake Parkway
 City State Zip Code
 Atlanta GA 30328-3474
 FEC ID number of contributing federal political committee. **C C00064766**
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 23 / 2015
Transaction ID : A0284FF83E1FF4EDAA3F
 Amount of Each Receipt this Period
 1000.00
 Donation

C. Rural America Counts PAC (RAC PAC)
 Full Name (Last, First, Middle Initial)
 Mailing Address 228 S Washington St
 Ste 115
 City State Zip Code
 Alexandria VA 22314-5404
 FEC ID number of contributing federal political committee. **C C00570770**
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 23 / 2015
Transaction ID : ABA338AE441EB481F85D
 Amount of Each Receipt this Period
 2000.00

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 75
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

A. Sugar Cane Growers Cooperative of Florida PAC

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 666

City Belle Glade State FL Zip Code 33430-0666

FEC ID number of contributing federal political committee. **C C00254656**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 31 / 2015

Transaction ID : AE054F4D8C2A54168A6F

Amount of Each Receipt this Period
 1000.00

Donation

B. Build PAC Of The Natl Assn Of Home Builders (Build PAC)

Full Name (Last, First, Middle Initial)
Mailing Address 1201 15th St NW

City Washington State DC Zip Code 20005-2899

FEC ID number of contributing federal political committee. **C C00000901**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 28 / 2015

Transaction ID : A55E01EE651FE4DD0BED

Amount of Each Receipt this Period
 1000.00

Donation

C. Reclaim America PAC

Full Name (Last, First, Middle Initial)
Mailing Address 228 S Washington St Ste 115

City Alexandria State VA Zip Code 22314-5404

FEC ID number of contributing federal political committee. **C C00500025**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2015

Transaction ID : AD5424F64665C48C48CC

Amount of Each Receipt this Period
 5000.00

Donation

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

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

7000.00

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

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

FOR LINE NUMBER: PAGE 15 OF 75
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

A. National Association of Realtors PAC (Realtors PAC)
 Full Name (Last, First, Middle Initial)
 Mailing Address 430 N Michigan Avenue
 City State Zip Code
 Chicago IL 60611-4011
 FEC ID number of contributing federal political committee. **C** C00030718
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date
 3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 23 / 2015
Transaction ID : A8D01F580C958457C8C5
 Amount of Each Receipt this Period
 1000.00
 Donation

B. GCSI 21st Century PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 3711 Beech Tree Ln
 City State Zip Code
 Okemos MI 48864-3871
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 28 / 2015
Transaction ID : ACFD8A6D4BCB64FB0BCF
 Amount of Each Receipt this Period
 250.00
 Donation

C. Altria Group, Inc. PAC (ALTRIAPAC)
 Full Name (Last, First, Middle Initial)
 Mailing Address 101 Constitution Ave NW
 Ste 400W
 City State Zip Code
 Washington DC 20001-2155
 FEC ID number of contributing federal political committee. **C** C00089136
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 03 / 2015
Transaction ID : AE5BA42C93FD24750925
 Amount of Each Receipt this Period
 1000.00
 Donation

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 75
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

A. Michigan Association of Theatre Owners PAC

Full Name (Last, First, Middle Initial)
Mailing Address 121 W Allegan St

City: Lansing State: MI Zip Code: 48933-1702

FEC ID number of contributing federal political committee: C

Name of Employer: Occupation:

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 07 / 14 / 2015

Transaction ID : A3CD1CF2C2BB4C1FBFA

Amount of Each Receipt this Period: 250.00

Donation

B. Independent Community Bankers PAC

Full Name (Last, First, Middle Initial)
Mailing Address 1615 L St NW Ste 900

City: Washington State: DC Zip Code: 20036-5623

FEC ID number of contributing federal political committee: C C00032698

Name of Employer: Occupation:

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 3000.00

Date of Receipt: 09 / 30 / 2015

Transaction ID : A3400903E6DA54081AFA

Amount of Each Receipt this Period: 2000.00

Donation

C. Dow Corning Legislative Action Team

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 994

City: Midland State: MI Zip Code: 48686-0001

FEC ID number of contributing federal political committee: C C00386672

Name of Employer: Occupation:

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 1500.00

Date of Receipt: 07 / 14 / 2015

Transaction ID : AA96B826F7A184769850

Amount of Each Receipt this Period: 1500.00

Donation

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

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

3750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 75
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

A. Full Name (Last, First, Middle Initial)
Blue Cross & Blue Shield of MI PAC

Mailing Address 232 S Capitol Ave
MCL10A

City State Zip Code
Lansing MI 48933-1536

FEC ID number of contributing federal political committee. **C C00084061**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 10 / 2015

Transaction ID : ACEB60DFA99DB482E812

Amount of Each Receipt this Period
2000.00

Donation

B. Full Name (Last, First, Middle Initial)
American Congress of Ob-Gyns PAC (OB-GYN PAC)

Mailing Address 409 12th St SW

City State Zip Code
Washington DC 20024-2125

FEC ID number of contributing federal political committee. **C C00364158**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 29 / 2015

Transaction ID : ACE688DE9A95E475E945

Amount of Each Receipt this Period
1000.00

Donation

C. Full Name (Last, First, Middle Initial)
UnitedHealth Group Inc. PAC

Mailing Address 9900 Bren Rd E

City State Zip Code
Hopkins MN 55343-9664

FEC ID number of contributing federal political committee. **C C00274431**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 28 / 2015

Transaction ID : A4E720A4E21DF40BAA93

Amount of Each Receipt this Period
2500.00

Donation

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

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

5500.00

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

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

FOR LINE NUMBER: PAGE 18 OF 75
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

A. Full Name (Last, First, Middle Initial)
Land O'Lakes PAC

Mailing Address PO Box 64101

City State Zip Code
Saint Paul MN 55164-0101

FEC ID number of contributing federal political committee. **C C00009423**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 10 / 2015

Transaction ID : A30C650C13A914E11BB8

Amount of Each Receipt this Period
 2500.00

Donation

B. Full Name (Last, First, Middle Initial)
National Propane Gas Association PAC

Mailing Address 1899 L Street NW
Suite 350

City State Zip Code
Washington DC 20036-3870

FEC ID number of contributing federal political committee. **C C00079681**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 23 / 2015

Transaction ID : A570721711D924EFDA9C

Amount of Each Receipt this Period
 400.00

Donation

C. Full Name (Last, First, Middle Initial)
Quicken Loans Inc PAC

Mailing Address 101 S Washington Square
Suite 620

City State Zip Code
Lansing MI 48933-1708

FEC ID number of contributing federal political committee. **C C00388827**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 15 / 2015

Transaction ID : AC82DAF7213284D9B997

Amount of Each Receipt this Period
 1000.00

Donation

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

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

3900.00

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

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

FOR LINE NUMBER: PAGE 19 OF 75
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

A. Full Name (Last, First, Middle Initial)
Poet PAC

Mailing Address 4615 N Lewis Ave

City State Zip Code
Sioux Falls SD 57104-7116

FEC ID number of contributing federal political committee. **C** C00450692

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 28 / 2015

Transaction ID : AB926D9CAEA0848FAAAA

Amount of Each Receipt this Period
 1000.00

Donation

B. Full Name (Last, First, Middle Initial)
CULAC The PAC of Credit Union National Assn

Mailing Address 601 Pennsylvania Ave NW
South Building, Suite #600

City State Zip Code
Washington DC 20004-2601

FEC ID number of contributing federal political committee. **C** C00007880

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 26 / 2015

Transaction ID : A957BD78757704B258C1

Amount of Each Receipt this Period
 2500.00

Donation

C. Full Name (Last, First, Middle Initial)
Independent Insurance Agents & Brokers of America PAC

Mailing Address 20 F St NW
Ste 610

City State Zip Code
Washington DC 20001-6707

FEC ID number of contributing federal political committee. **C** C00022343

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 17 / 2015

Transaction ID : AF0564CF71BE943D596D

Amount of Each Receipt this Period
 500.00

Donation

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 75
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

A. Comcast Corp & NBC Universal PAC

Full Name (Last, First, Middle Initial)
Mailing Address 1701 JFK Blvd.
49th Floor

City Philadelphia State PA Zip Code 19103-2855

FEC ID number of contributing federal political committee. **C C00248716**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 10 / 2015

Transaction ID : A48AED5AC2C2741E28C8

Amount of Each Receipt this Period
 1000.00

Donation

B. Longhorn PAC

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 30844

City Bethesda State MD Zip Code 20824-0844

FEC ID number of contributing federal political committee. **C C00402602**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 10 / 2015

Transaction ID : A74670B31056749D4997

Amount of Each Receipt this Period
 2000.00

Donation

C. LaFarge North America Inc Employees PAC

Full Name (Last, First, Middle Initial)
Mailing Address 13450 Sunrise Valley Dr
Ste 220

City Herndon State VA Zip Code 20191-3276

FEC ID number of contributing federal political committee. **C C00431007**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 03 / 2015

Transaction ID : A14F962EE1B154CA99E1

Amount of Each Receipt this Period
 1000.00

Donation

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

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

4000.00

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

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

FOR LINE NUMBER: PAGE 21 OF 75
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

A. CMS Energy Employees for Better Government
 Full Name (Last, First, Middle Initial)
 Mailing Address 1 Energy Plaza Dr
 City Jackson State MI Zip Code 49201-2357
 FEC ID number of contributing federal political committee. **C** C00075473
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 4100.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2015
Transaction ID : A3EC18C9025DA4B06A37
 Amount of Each Receipt this Period
 1600.00
 Donation

B. Voice For Freedom PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 2700 Cumberland Pkwy SE Ste 150
 City Atlanta State GA Zip Code 30339-3321
 FEC ID number of contributing federal political committee. **C** C00409805
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 21 / 2015
Transaction ID : A35F8EB2783644E86A7C
 Amount of Each Receipt this Period
 1000.00
 Donation

C. AT&T Federal PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 208 S Akard St Ste 2701
 City Dallas State TX Zip Code 75202-4206
 FEC ID number of contributing federal political committee. **C** C00109017
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 4500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 17 / 2015
Transaction ID : A40A77175C8DE4722B7C
 Amount of Each Receipt this Period
 1500.00
 Donation

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

4100.00

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

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

FOR LINE NUMBER: PAGE 22 OF 75
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

A. Friends of CMU
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 1174
 City State Zip Code
 Mount Pleasant MI 48804-1174
 FEC ID number of contributing federal political committee. **C** C00429241
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 10 / 2015
Transaction ID : A9A9B4F97CAAF45459DD
 Amount of Each Receipt this Period
 250.00
 Donation

B. American Bankers Association PAC (BankPAC)
 Full Name (Last, First, Middle Initial)
 Mailing Address 1120 Connecticut Ave NW
 Ste 600
 City State Zip Code
 Washington DC 20036-3971
 FEC ID number of contributing federal political committee. **C** C00004275
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 17 / 2015
Transaction ID : AED2C7CC5023E40FCAA4
 Amount of Each Receipt this Period
 1500.00
 Donation

C. The Dow Chemical Company Employees PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 2030 Dow Ctr
 City State Zip Code
 Midland MI 48674-1500
 FEC ID number of contributing federal political committee. **C** C00074096
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 27 / 2015
Transaction ID : A8B3FD336B5458F80B
 Amount of Each Receipt this Period
 1500.00
 Donation

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

3250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 75
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

A. Full Name (Last, First, Middle Initial)
Action Committee For Rural Electrification (ACRE)

Mailing Address 4301 Wilson Blvd

City State Zip Code
Arlington VA 22203-1867

FEC ID number of contributing federal political committee. **C** C00002972

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
6000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 17 / 2015

Transaction ID : AE06D9BC60BAD4E36B90

Amount of Each Receipt this Period
1500.00

Donation

B. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

1500.00

54250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 24 OF 75	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

Full Name (Last, First, Middle Initial) A. Mr. Doyle Bartlett		Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2015
Mailing Address 439 New Jersey Avenue, SE		Amount of Each Disbursement this Period 300.00 Transaction ID : BF48F2CE25DA346E893A
City Washington State DC Zip Code 20003-4034	Purpose of Disbursement In-kind:Townhouse rental for event - i	
Candidate Name	Category/Type	
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. Altria Client Services, Inc.		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2015
Mailing Address 101 Constitution Avenue NW Suite 400W		Amount of Each Disbursement this Period 3000.00 Transaction ID : BD0B3D9124EBE40818D4
City Washington State DC Zip Code 20001-2155	Purpose of Disbursement Suite for event	
Candidate Name	Category/Type 003	
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. Sam's Club		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2015
Mailing Address 5656 Bay Road		Amount of Each Disbursement this Period 675.36 Transaction ID : BF8C323DD9A764D26A8D
City Saginaw State MI Zip Code 48604-2510	Purpose of Disbursement Parade supplies	
Candidate Name	Category/Type 001	
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).....	3975.36
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 25 OF 75	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

Full Name (Last, First, Middle Initial) A. Mr. Adam J. Kroczaleski		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2015
Mailing Address 5082 Lincoln Road		Amount of Each Disbursement this Period 454.67 Transaction ID : BB90E49C4E53C4BE484B
City Standish State MI Zip Code 48658-9437	Purpose of Disbursement Wages Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Mrs. Sarah Brooks		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2015
Mailing Address 210 Maple View Court		Amount of Each Disbursement this Period 623.25 Transaction ID : B71592BAF1E084368BCF
City Hemlock State MI Zip Code 48626-8455	Purpose of Disbursement Mileage Candidate Name Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. Aristotle International, Inc.		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2015
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 1500.00 Transaction ID : BDD1EF21A392440C6BE4
City Washington State DC Zip Code 20003-1164	Purpose of Disbursement Campaign reporting software Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	2577.92
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 26 OF 75	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

Full Name (Last, First, Middle Initial) A. A & A Storage		Date of Disbursement MM / DD / YYYY 07 / 15 / 2015
Mailing Address PO Box 55		Amount of Each Disbursement this Period 50.00 Transaction ID : B094E983D029647B980B
City Midland	State MI	
Zip Code 48640-0055	Purpose of Disbursement Storage unit rental	Category/ Type 001
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. United States Treasury		Date of Disbursement MM / DD / YYYY 07 / 20 / 2015
Mailing Address 1500 Pennsylvania Avenue NW		Amount of Each Disbursement this Period 76.50 Transaction ID : BE15E54CCFA994BE1AB4
City Washington	State DC	
Zip Code 20220-0001	Purpose of Disbursement Payroll taxes	Category/ Type 001
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. Ms. Ashton Bortz		Date of Disbursement MM / DD / YYYY 07 / 20 / 2015
Mailing Address 4118 Perrine Pointe		Amount of Each Disbursement this Period 405.00 Transaction ID : B2CDA4EC26E814435A82
City Midland	State MI	
Zip Code 48640-2392	Purpose of Disbursement Mileage	Category/ Type 002
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).....	531.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 75			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

Full Name (Last, First, Middle Initial) A. Mr. Ryan Tarrant		Date of Disbursement M M / D D / Y Y Y Y 07 / 20 / 2015
Mailing Address 2116 7th Street		Amount of Each Disbursement this Period 82.35 Transaction ID : BC2218828CCAA42B9882
City Bay City	State MI	
Zip Code 48708-6805	Purpose of Disbursement Mileage	Category/ Type 002
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. State of Michigan - UIA		Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2015
Mailing Address PO Box 33598		Amount of Each Disbursement this Period 57.80 Transaction ID : B09248E264E2C43F5B2B
City Detroit	State MI	
Zip Code 48232-5598	Purpose of Disbursement Unemployment insurance	Category/ Type 001
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. Sam's Club		Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2015
Mailing Address 5656 Bay Road		Amount of Each Disbursement this Period 199.54 Transaction ID : BD2DDDE5142054642933
City Saginaw	State MI	
Zip Code 48604-2510	Purpose of Disbursement Supplies for event	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:	

SUBTOTAL of Disbursements This Page (optional).....	339.69
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 75			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

Full Name (Last, First, Middle Initial) A. A & A Storage		Date of Disbursement MM / DD / YYYY 08 / 03 / 2015
Mailing Address PO Box 55		Amount of Each Disbursement this Period \$ 50.00 Transaction ID : BCDAE8C0EFE8F40BDB89
City Midland	State MI	
Zip Code 48640-0055	Purpose of Disbursement Storage unit rental	Category/ Type 001
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. Mr. Adam J. Kroczaleski		Date of Disbursement MM / DD / YYYY 08 / 05 / 2015
Mailing Address 5082 Lincoln Road		Amount of Each Disbursement this Period \$ 510.75 Transaction ID : BE2E2102A1F124CBB9F6
City Standish	State MI	
Zip Code 48658-9437	Purpose of Disbursement Mileage	Category/ Type 002
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. Verizon Wireless		Date of Disbursement MM / DD / YYYY 08 / 12 / 2015
Mailing Address PO Box 15062		Amount of Each Disbursement this Period \$ 259.18 Transaction ID : B381536FA89A54F8CBA8
City Albany	State NY	
Zip Code 12212-5062	Purpose of Disbursement Cell phones	Category/ Type 001
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).....	\$ 819.93
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 75			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

Full Name (Last, First, Middle Initial) A. Verizon Wireless		Date of Disbursement MM / DD / YYYY 08 / 12 / 2015
Mailing Address PO Box 15062		Amount of Each Disbursement this Period 182.97 Transaction ID : B37AE328CBF2C414EA17
City Albany State NY Zip Code 12212-5062	Purpose of Disbursement Cell phones Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Mr. Adam J. Kroczaleski		Date of Disbursement MM / DD / YYYY 08 / 14 / 2015
Mailing Address 5082 Lincoln Road		Amount of Each Disbursement this Period 454.67 Transaction ID : B1B84CCB7A6AE41998A3
City Standish State MI Zip Code 48658-9437	Purpose of Disbursement Wages Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Mrs. Sarah Brooks		Date of Disbursement MM / DD / YYYY 08 / 17 / 2015
Mailing Address 210 Maple View Court		Amount of Each Disbursement this Period 670.50 Transaction ID : BD1AF841F97BC48D985F
City Hemlock State MI Zip Code 48626-8455	Purpose of Disbursement Mileage Candidate Name Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	1308.14
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 75			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

Full Name (Last, First, Middle Initial) A. Sam's Club		Date of Disbursement MM / DD / YYYY 08 / 17 / 2015
Mailing Address 5656 Bay Road		Amount of Each Disbursement this Period 630.40 Transaction ID : BD7C86FD9E6194454A0F
City Saginaw	State MI	
Purpose of Disbursement Parade supplies		Category/ Type 001
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. KB Graphics, Inc.		Date of Disbursement MM / DD / YYYY 08 / 18 / 2015
Mailing Address 401 West Commercial Street		Amount of Each Disbursement this Period 4030.50 Transaction ID : BFB263C117FF14EF6BA2
City East Rochester	State NY	
Purpose of Disbursement Printing - Event Items		Category/ Type 004
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. QRP, Inc.		Date of Disbursement MM / DD / YYYY 08 / 18 / 2015
Mailing Address 94 Ashman Circle		Amount of Each Disbursement this Period 300.19 Transaction ID : BA494184FB4E4441AA18
City Midland	State MI	
Purpose of Disbursement Printing - Event Items		Category/ Type 004
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).....	4961.09
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 75			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

Full Name (Last, First, Middle Initial) A. United States Treasury		Date of Disbursement MM / DD / YYYY 08 / 19 / 2015
Mailing Address 1500 Pennsylvania Avenue NW		Amount of Each Disbursement this Period 76.50 Transaction ID : B89AA7C026AB44C1789D
City Washington State DC Zip Code 20220-0001	Purpose of Disbursement Payroll taxes 001 Category/Type	
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. Mr. Ryan Tarrant		Date of Disbursement MM / DD / YYYY 08 / 20 / 2015
Mailing Address 2116 7th Street		Amount of Each Disbursement this Period 301.95 Transaction ID : BA9673806663A4989B8F
City Bay City State MI Zip Code 48708-6805	Purpose of Disbursement Mileage 002 Category/Type	
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. Midland Postmaster		Date of Disbursement MM / DD / YYYY 08 / 20 / 2015
Mailing Address 2900 Rodd Street		Amount of Each Disbursement this Period 257.25 Transaction ID : BF2A546C77AC04AB4AAE
City Midland State MI Zip Code 48640-4483	Purpose of Disbursement Postage 001 Category/Type	
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).....	635.70
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 75			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

Full Name (Last, First, Middle Initial) A. PayPal			Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2015
Mailing Address 2145 Hamilton Avenue			Amount of Each Disbursement this Period 30.00 Transaction ID : BE10B77B651DE4738A2B
City San Jose	State CA	Zip Code 95125-5905	
Purpose of Disbursement Credit card processing fee		Category/ Type 001	
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. PayPal			Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2015
Mailing Address 2145 Hamilton Avenue			Amount of Each Disbursement this Period 21.20 Transaction ID : BF3EE84E0BF3D4745972
City San Jose	State CA	Zip Code 95125-5905	
Purpose of Disbursement Credit card processing fee		Category/ Type 001	
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. PayPal			Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2015
Mailing Address 2145 Hamilton Avenue			Amount of Each Disbursement this Period 30.00 Transaction ID : BDD501680F9CF458FB77
City San Jose	State CA	Zip Code 95125-5905	
Purpose of Disbursement Credit card processing fee		Category/ Type 001	
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).....	81.20
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 33 OF 75	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

Full Name (Last, First, Middle Initial) A. Mr. John R. Moolenaar		Date of Disbursement M M / D D / Y Y Y Y 08 / 24 / 2015
Mailing Address 4410 Linden Drive		Amount of Each Disbursement this Period 158.85 Transaction ID : BEF1770B298F84B6791D
City Midland	State MI	
Zip Code 48640-2614	Purpose of Disbursement Mileage	Category/ Type 002
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. Bucks Run Golf Club		Date of Disbursement M M / D D / Y Y Y Y 08 / 26 / 2015
Mailing Address 1559 S Chippewa Road		Amount of Each Disbursement this Period 6396.58 Transaction ID : B383C0C39A075444392C
City Mt Pleasant	State MI	
Zip Code 48858-8705	Purpose of Disbursement Room rental, catering, greens fees for event	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:	

Full Name (Last, First, Middle Initial) c. PayPal		Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2015
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 30.00 Transaction ID : BF63F643324E043F0921
City San Jose	State CA	
Zip Code 95125-5905	Purpose of Disbursement Credit card processing fee	Category/ Type 001
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).....	6585.43
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 75			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

Full Name (Last, First, Middle Initial) A. Ms. Ashton Bortz		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2015
Mailing Address 4118 Perrine Pointe		Amount of Each Disbursement this Period 252.00 Transaction ID : B10703BF40F2C4F0FAEB
City Midland	State MI	
Zip Code 48640-2392	Purpose of Disbursement Mileage	Category/ Type 002
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. Mr. Adam J. Kroczaleski		Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2015
Mailing Address 5082 Lincoln Road		Amount of Each Disbursement this Period 825.75 Transaction ID : BCE6733D1AFCC44B0BD6
City Standish	State MI	
Zip Code 48658-9437	Purpose of Disbursement Mileage	Category/ Type 002
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. A & A Storage		Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2015
Mailing Address PO Box 55		Amount of Each Disbursement this Period 50.00 Transaction ID : BA2EBD743B8474B33A2C
City Midland	State MI	
Zip Code 48640-0055	Purpose of Disbursement Storage unit rental	Category/ Type 001
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).....	1127.75
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 75			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

Full Name (Last, First, Middle Initial) A. North Country Aviation, Inc.		Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2015
Mailing Address 1097 Beechcraft Blvd.		Amount of Each Disbursement this Period 1389.00 Transaction ID : B53D0001DFD194704B53
City Gaylord State MI Zip Code 49735-7233	Purpose of Disbursement Air travel Candidate Name Category/Type 002	
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. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2015
Mailing Address PO Box 15062		Amount of Each Disbursement this Period 232.40 Transaction ID : B6086837761C14DB4AC4
City Albany State NY Zip Code 12212-5062	Purpose of Disbursement Cell phones Candidate Name Category/Type 001	
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. Mr. Adam J. Kroczaleski		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2015
Mailing Address 5082 Lincoln Road		Amount of Each Disbursement this Period 454.67 Transaction ID : BEEC6DCAC0643445E84C
City Standish State MI Zip Code 48658-9437	Purpose of Disbursement Wages Candidate Name Category/Type 001	
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).....	2076.07
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 75			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

Full Name (Last, First, Middle Initial) A. PayPal		Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2015
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 19.66 Transaction ID : B225DDA96B4CD4CB8A20
City San Jose State CA Zip Code 95125-5905	Purpose of Disbursement Credit card processing fee 001 Category/Type	
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. United States Treasury		Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2015
Mailing Address 1500 Pennsylvania Avenue NW		Amount of Each Disbursement this Period 76.50 Transaction ID : B7EC6B0ACDB1A421DAE9
City Washington State DC Zip Code 20220-0001	Purpose of Disbursement Payroll taxes 001 Category/Type	
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. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2015
Mailing Address PO Box 15062		Amount of Each Disbursement this Period 173.58 Transaction ID : B6B8A124EDD05445B841
City Albany State NY Zip Code 12212-5062	Purpose of Disbursement Cell phones 001 Category/Type	
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).....	269.74
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 75			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

Full Name (Last, First, Middle Initial) A. Ms. Ashton Bortz		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2015
Mailing Address 4118 Perrine Pointe		Amount of Each Disbursement this Period 261.00 Transaction ID : BEEAE47BDA25B47EEB3F
City Midland	State MI	
Zip Code 48640-2392	Purpose of Disbursement Mileage	Category/ Type 002
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. QRP, Inc.		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2015
Mailing Address 94 Ashman Circle		Amount of Each Disbursement this Period 330.41 Transaction ID : BCE5405A34FDE4A3586B
City Midland	State MI	
Zip Code 48640-4627	Purpose of Disbursement Printing - yard signs	Category/ Type 004
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. KB Graphics, Inc.		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2015
Mailing Address 401 West Commercial Street		Amount of Each Disbursement this Period 1584.00 Transaction ID : B6983D2A039D641EEAFB
City East Rochester	State NY	
Zip Code 14445	Purpose of Disbursement Printing - Event Items	Category/ Type 004
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).....	2175.41
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 75			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

Full Name (Last, First, Middle Initial) A. QRP, Inc.		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2015
Mailing Address 94 Ashman Circle		Amount of Each Disbursement this Period 307.77 Transaction ID : B30F3E62A0189456AB13
City Midland	State MI	
Zip Code 48640-4627	Purpose of Disbursement Printing - Invitations For Event	Category/ Type 004
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. PayPal		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2015
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 42.54 Transaction ID : BE9A5AFB7213F4B48B45
City San Jose	State CA	
Zip Code 95125-5905	Purpose of Disbursement Credit card processing fee	Category/ Type 001
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. QRP, Inc.		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2015
Mailing Address 94 Ashman Circle		Amount of Each Disbursement this Period 113.38 Transaction ID : B9EC1BAE0749C4841ADA
City Midland	State MI	
Zip Code 48640-4627	Purpose of Disbursement Printing - placards	Category/ Type 004
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).....	463.69
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 75			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

Full Name (Last, First, Middle Initial) A. Mr. Adam J. Kroczaleski		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2015
Mailing Address 5082 Lincoln Road		Amount of Each Disbursement this Period 342.00 Transaction ID : B438D7FA4268246B0BA2
City Standish State MI Zip Code 48658-9437	Purpose of Disbursement Mileage 002 Category/Type	
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. Mrs. Sarah Brooks		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2015
Mailing Address 210 Maple View Court		Amount of Each Disbursement this Period 339.75 Transaction ID : BEBD1BACD164B4800A34
City Hemlock State MI Zip Code 48626-8455	Purpose of Disbursement Mileage 002 Category/Type	
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. Stamas Properties		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2015
Mailing Address 102 W. Main Street		Amount of Each Disbursement this Period 600.00 Transaction ID : B7C0BD27202494D8B8E8
City Midland State MI Zip Code 48640-5156	Purpose of Disbursement Office space rent 001 Category/Type	
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).....	1281.75
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 75			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

Full Name (Last, First, Middle Initial) A. The Catalyst Group		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2015
Mailing Address 600 Pennsylvania Avenue SE Suite 330		Amount of Each Disbursement this Period 1900.00 Transaction ID : B47DC229DFE8C4306AE3
City Washington State DC Zip Code 20003-6300	Purpose of Disbursement Catering for event - itemized 003 Category/Type	
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. Charlie Palmer Steak		Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2015
Mailing Address 101 Constitution Ave NW		Amount of Each Disbursement this Period 1900.00 Transaction ID : BCC2EDBA8782C4C2BAD1 [MEMO ITEM]
City Washington State DC Zip Code 20001-2133	Purpose of Disbursement Catering for event 003 Category/Type	
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. Mr. Ryan Tarrant		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2015
Mailing Address 2116 7th Street		Amount of Each Disbursement this Period 184.82 Transaction ID : B1A96A288D43F4AC08BE
City Bay City State MI Zip Code 48708-6805	Purpose of Disbursement Mileage, meals - itemized 002 Category/Type	
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).....	2084.82
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 75			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

Full Name (Last, First, Middle Initial) A. Andrews Hooper Pavlik, PLC		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2015
Mailing Address 5915 Eastman Avenue Suite 100		Amount of Each Disbursement this Period 2489.00 Transaction ID : B83D0DCD005CD4F38AF7
City Midland State MI Zip Code 48640-6824	Purpose of Disbursement Debt Repayment: Accounting services Category/Type 001	
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. The Catalyst Group		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2015
Mailing Address 600 Pennsylvania Avenue SE Suite 330		Amount of Each Disbursement this Period 1000.00 Transaction ID : B8ADF50A7E85245BAB27
City Washington State DC Zip Code 20003-6300	Purpose of Disbursement Debt Repayment: Fundraising coordination 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:		

Full Name (Last, First, Middle Initial) c. The Catalyst Group		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2015
Mailing Address 600 Pennsylvania Avenue SE Suite 330		Amount of Each Disbursement this Period 1500.00 Transaction ID : B515795B09EA748DBAAB
City Washington State DC Zip Code 20003-6300	Purpose of Disbursement Debt Repayment: Fundraising coordination 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:		

SUBTOTAL of Disbursements This Page (optional).....	4989.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 75			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

Full Name (Last, First, Middle Initial) A. The Catalyst Group		Date of Disbursement MM / DD / YYYY 07 / 17 / 2015
Mailing Address 600 Pennsylvania Avenue SE Suite 330		Amount of Each Disbursement this Period 1600.00 Transaction ID : B839944AD42464A2CB05
City Washington State DC Zip Code 20003-6300	Purpose of Disbursement Debt Repayment: Fundraising coordination 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:		

Full Name (Last, First, Middle Initial) B. Mrs. Sarah Brooks		Date of Disbursement MM / DD / YYYY 09 / 23 / 2015
Mailing Address 210 Maple View Court		Amount of Each Disbursement this Period 689.25 Transaction ID : B46645C4D959A41C0977
City Hemlock State MI Zip Code 48626-8455	Purpose of Disbursement Mileage, parking - itemized Category/Type 002	
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. Andrews Hooper Pavlik, PLC		Date of Disbursement MM / DD / YYYY 07 / 20 / 2015
Mailing Address 5915 Eastman Avenue Suite 100		Amount of Each Disbursement this Period 2899.00 Transaction ID : B945425FD79BA4170A61
City Midland State MI Zip Code 48640-6824	Purpose of Disbursement Debt Repayment: Accounting services Category/Type 001	
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).....	5188.25
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 75			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

Full Name (Last, First, Middle Initial) A. Andrews Hooper Pavlik, PLC		Date of Disbursement MM / DD / YYYY 07 / 20 / 2015
Mailing Address 5915 Eastman Avenue Suite 100		Amount of Each Disbursement this Period 3549.00 Transaction ID : BEE396D92F32A415F963
City Midland State MI Zip Code 48640-6824	Purpose of Disbursement Debt Repayment: Accounting services Category/Type 001	
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. The Catalyst Group		Date of Disbursement MM / DD / YYYY 08 / 18 / 2015
Mailing Address 600 Pennsylvania Avenue SE Suite 330		Amount of Each Disbursement this Period 1362.62 Transaction ID : BD689E2B9B3EB43AFB96
City Washington State DC Zip Code 20003-6300	Purpose of Disbursement Catering for events - itemized 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:		

Full Name (Last, First, Middle Initial) c. Levy Restaurants		Date of Disbursement MM / DD / YYYY 07 / 21 / 2015
Mailing Address 601 F NW Street		Amount of Each Disbursement this Period 799.52 Transaction ID : B0AA36F7BAE8B4DBE8E9 [MEMO ITEM]
City Washington State DC Zip Code 20004-1605	Purpose of Disbursement Catering for event 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:		

SUBTOTAL of Disbursements This Page (optional).....	4911.62
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 75			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

Full Name (Last, First, Middle Initial) A. Capitol Hill Club		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2015
Mailing Address 300 1st Street SE		Amount of Each Disbursement this Period 563.10
City Washington State DC Zip Code 20003-1801	Purpose of Disbursement Catering for event	
Candidate Name	003 Category/Type	Transaction ID : BFA10C9489FE341D0BE6 [MEMO ITEM]
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. Cardmember Service		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2015
Mailing Address PO Box 94014		Amount of Each Disbursement this Period 4384.31
City Palatine State IL Zip Code 60094-4014	Purpose of Disbursement Debt Repayment: Credit card payment - itemized	
Candidate Name	001 Category/Type	Transaction ID : B46F7292473F94588A29
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. Best Buy		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2015
Mailing Address 4406 Bay Road		Amount of Each Disbursement this Period 1605.87
City Saginaw State MI Zip Code 48603-1208	Purpose of Disbursement Computer equipment	
Candidate Name	001 Category/Type	Transaction ID : BF87E20D8890B4DB0A76 [MEMO ITEM]
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).....	4384.31
TOTAL This Period (last page this line number only).....	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 75			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

Full Name (Last, First, Middle Initial) A. Delta Airlines		Date of Disbursement MM / DD / YYYY 05 / 29 / 2015
Mailing Address 1030 Delta Boulevard		Amount of Each Disbursement this Period 583.60
City Atlanta	State GA Zip Code 30354-1989	
Purpose of Disbursement Airfare	Category/Type 002	Transaction ID : B04938F3C88B749C38EF
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. Michigan Republican Party		Date of Disbursement MM / DD / YYYY 06 / 01 / 2015
Mailing Address 520 Seymour Ave		Amount of Each Disbursement this Period 240.00
City Lansing	State MI Zip Code 48933-1118	
Purpose of Disbursement Conference registration	Category/Type 001	Transaction ID : B5A0496EA88224F3B912
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) c. United Parcel Service - UPS		Date of Disbursement MM / DD / YYYY 06 / 12 / 2015
Mailing Address 316 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 128.64
City Washington	State DC Zip Code 20003-1146	
Purpose of Disbursement Shipping	Category/Type 001	Transaction ID : B56F949212A554BA2A4A
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)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 75			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

Full Name (Last, First, Middle Initial) A. Tortilla Coast		Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2015
Mailing Address 400 1st Street SE		Amount of Each Disbursement this Period 111.68
City Washington	State DC	
Zip Code 20003-1826	Purpose of Disbursement Meals	Transaction ID : B0E0692A9813C46D5865
Candidate Name	002 Category/Type	
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. Capitol Hill Club		Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2015
Mailing Address 300 1st Street SE		Amount of Each Disbursement this Period 202.13
City Washington	State DC	
Zip Code 20003-1801	Purpose of Disbursement Catering for event	Transaction ID : B066A1AD730C244C482E
Candidate Name	003 Category/Type	
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) c. Hayes Specialties Corp.		Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2015
Mailing Address 1761 E Genesee Avenue		Amount of Each Disbursement this Period 24.33
City Saginaw	State MI	
Zip Code 48601-2407	Purpose of Disbursement Games for event	Transaction ID : B17B9E6087ED84DDA9F3
Candidate Name	003 Category/Type	
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)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 75			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

Full Name (Last, First, Middle Initial) A. Bull Feathers		Date of Disbursement M M / D D / Y Y Y Y 06 / 24 / 2015
Mailing Address 410 1st Street SE		Amount of Each Disbursement this Period 107.55
City Washington State DC Zip Code 20003-1819	Purpose of Disbursement Meals	
Candidate Name	Category/Type 002	Transaction ID : B631211CE55FB48978BA [MEMO ITEM]
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. Mr. Ryan Tarrant		Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2015
Mailing Address 2116 7th Street		Amount of Each Disbursement this Period 343.10
City Bay City State MI Zip Code 48708-6805	Purpose of Disbursement Mileage, meals, parking - itemized	
Candidate Name	Category/Type 002	Transaction ID : BB4BDC09BF2324CCFB72
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. GSL Solutions, Inc.		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2015
Mailing Address 1411 N West Shore Boulevard Suite 204		Amount of Each Disbursement this Period 665.00
City Tampa State FL Zip Code 33607-4529	Purpose of Disbursement Debt Repayment: Website hosting & support, email distribution	
Candidate Name	Category/Type 001	Transaction ID : B48E7AFDC5AC6401EB80
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).....	1008.10
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 75			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

Full Name (Last, First, Middle Initial) A. Mr. Ryan Tarrant		Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2015
Mailing Address 2116 7th Street		Amount of Each Disbursement this Period 174.61 Transaction ID : B702FE829B70F4464A4A
City Bay City	State MI Zip Code 48708-6805	
Purpose of Disbursement Mileage, meals - itemized	Category/Type 002	
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. LCM Strategies		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2015
Mailing Address PO Box 158513		Amount of Each Disbursement this Period 1500.00 Transaction ID : BEB5A3006DF3C4A8AAC3
City Nashville	State TN Zip Code 37215-8513	
Purpose of Disbursement Debt Repayment: Online marketing and management	Category/Type 001	
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. The Catalyst Group		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2015
Mailing Address 600 Pennsylvania Avenue SE Suite 330		Amount of Each Disbursement this Period 2500.00 Transaction ID : B627A5F60BD7B42F1900
City Washington	State DC Zip Code 20003-6300	
Purpose of Disbursement Debt Repayment: Fundraising coordination	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:		

SUBTOTAL of Disbursements This Page (optional).....	4174.61
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 75			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

Full Name (Last, First, Middle Initial) A. GSL Solutions, Inc.		Date of Disbursement <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>08</td> <td></td> <td>25</td> <td></td> <td>2015</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	08		25		2015
M M	/	D D	/	Y Y Y Y								
08		25		2015								
Mailing Address 1411 N West Shore Boulevard Suite 204		Amount of Each Disbursement this Period <table border="1"> <tr> <td>665.00</td> </tr> </table> Transaction ID : BB8703C0DDF6D44488DA	665.00									
665.00												
City Tampa State FL Zip Code 33607-4529	Purpose of Disbursement Debt Repayment: Website hosting & support, email distribution <table border="1"> <tr> <td>001</td> </tr> </table>	001										
001												
Candidate Name	Category/Type											
Office Sought: House Senate President	Disbursement For: Primary General Other (specify)											
State: District:												

Full Name (Last, First, Middle Initial) B. GSL Solutions, Inc.		Date of Disbursement <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>08</td> <td></td> <td>25</td> <td></td> <td>2015</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	08		25		2015
M M	/	D D	/	Y Y Y Y								
08		25		2015								
Mailing Address 1411 N West Shore Boulevard Suite 204		Amount of Each Disbursement this Period <table border="1"> <tr> <td>815.00</td> </tr> </table> Transaction ID : B108FC5D2B99C43A2B5D	815.00									
815.00												
City Tampa State FL Zip Code 33607-4529	Purpose of Disbursement Debt Repayment: Website hosting & support, email distribution <table border="1"> <tr> <td>001</td> </tr> </table>	001										
001												
Candidate Name	Category/Type											
Office Sought: House Senate President	Disbursement For: Primary General Other (specify)											
State: District:												

Full Name (Last, First, Middle Initial) c. LCM Strategies		Date of Disbursement <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>08</td> <td></td> <td>25</td> <td></td> <td>2015</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	08		25		2015
M M	/	D D	/	Y Y Y Y								
08		25		2015								
Mailing Address PO Box 158513		Amount of Each Disbursement this Period <table border="1"> <tr> <td>1500.00</td> </tr> </table> Transaction ID : B6C7B75BD14314BCAB3D	1500.00									
1500.00												
City Nashville State TN Zip Code 37215-8513	Purpose of Disbursement Debt Repayment: Online marketing and management <table border="1"> <tr> <td>001</td> </tr> </table>	001										
001												
Candidate Name	Category/Type											
Office Sought: House Senate President	Disbursement For: Primary General Other (specify)											
State: District:												

SUBTOTAL of Disbursements This Page (optional).....	<table border="1"> <tr> <td>2980.00</td> </tr> </table>	2980.00
2980.00		
TOTAL This Period (last page this line number only).....	<table border="1"> <tr> <td></td> </tr> </table>	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 75			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

Full Name (Last, First, Middle Initial) A. The Catalyst Group		Date of Disbursement MM / DD / YYYY 07 / 17 / 2015
Mailing Address 600 Pennsylvania Avenue SE Suite 330		Amount of Each Disbursement this Period 2500.00 Transaction ID : B4CE181F1D558413B9B6
City Washington State DC Zip Code 20003-6300	Purpose of Disbursement Debt Repayment: Fundraising coordination 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:		

Full Name (Last, First, Middle Initial) B. Cardmember Service		Date of Disbursement MM / DD / YYYY 07 / 30 / 2015
Mailing Address PO Box 94014		Amount of Each Disbursement this Period 639.06 Transaction ID : B857DB36BC62441D18F0
City Palatine State IL Zip Code 60094-4014	Purpose of Disbursement Credit card payment - itemized Category/Type 001	
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. Olive Garden		Date of Disbursement MM / DD / YYYY 06 / 30 / 2015
Mailing Address 6803 Eastman Avenue		Amount of Each Disbursement this Period 220.30 Transaction ID : B37777B9ECBF4494BBAD [MEMO ITEM]
City Midland State MI Zip Code 48642-7895	Purpose of Disbursement Catering for event 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:		

SUBTOTAL of Disbursements This Page (optional).....	3139.06
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 75			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

Full Name (Last, First, Middle Initial) A. Michigan Republican Party		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2015
Mailing Address 520 Seymour Ave		Amount of Each Disbursement this Period 200.00 Transaction ID : BD129C5FE2D6A4BE88A6
City Lansing	State MI	
Zip Code 48933-1118	Purpose of Disbursement Conference registration	[MEMO ITEM]
Candidate Name	001 Category/ Type	
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. Andrews Hooper Pavlik, PLC		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2015
Mailing Address 5915 Eastman Avenue Suite 100		Amount of Each Disbursement this Period 3082.00 Transaction ID : B31CCAD0BE2E54D198DE
City Midland	State MI	
Zip Code 48640-6824	Purpose of Disbursement Debt Repayment: Accounting services	[MEMO ITEM]
Candidate Name	001 Category/ Type	
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. LCM Strategies		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2015
Mailing Address PO Box 158513		Amount of Each Disbursement this Period 500.00 Transaction ID : B237A91824BF044BC978
City Nashville	State TN	
Zip Code 37215-8513	Purpose of Disbursement Debt Repayment: Online marketing and management	[MEMO ITEM]
Candidate Name	001 Category/ Type	
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).....	3582.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 75			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

Full Name (Last, First, Middle Initial) A. LCM Strategies		Date of Disbursement MM / DD / YYYY 08 / 25 / 2015
Mailing Address PO Box 158513		Amount of Each Disbursement this Period 1000.00 Transaction ID : B40AE6313157E48EDA16
City Nashville	State TN Zip Code 37215-8513	
Purpose of Disbursement Debt Repayment: Online marketing and management		Category/ Type 001
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. Strategic National LLC		Date of Disbursement MM / DD / YYYY 08 / 25 / 2015
Mailing Address 190 Monroe Avenue NW Suite 500		Amount of Each Disbursement this Period 2535.95 Transaction ID : B50726902596B464784E
City Grand Rapids	State MI Zip Code 49503-2628	
Purpose of Disbursement Debt Repayment: Political consulting		Category/ Type 001
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. LCM Strategies		Date of Disbursement MM / DD / YYYY 07 / 17 / 2015
Mailing Address PO Box 158513		Amount of Each Disbursement this Period 1500.00 Transaction ID : B209D68A4B9244BA5A38
City Nashville	State TN Zip Code 37215-8513	
Purpose of Disbursement Debt Repayment: Online marketing and management		Category/ Type 001
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).....	5035.95
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 75			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

Full Name (Last, First, Middle Initial) A. The Catalyst Group		Date of Disbursement MM / DD / YYYY 07 / 17 / 2015
Mailing Address 600 Pennsylvania Avenue SE Suite 330		Amount of Each Disbursement this Period 2400.00 Transaction ID : B1B6E5283B242445B8D9
City Washington State DC Zip Code 20003-6300	Purpose of Disbursement Debt Repayment: Fundraising coordination Candidate Name Category/Type 003	
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. Andrews Hooper Pavlik, PLC		Date of Disbursement MM / DD / YYYY 07 / 20 / 2015
Mailing Address 5915 Eastman Avenue Suite 100		Amount of Each Disbursement this Period 3567.00 Transaction ID : B31B6A0341A1F4CA99E5
City Midland State MI Zip Code 48640-6824	Purpose of Disbursement Debt Repayment: Accounting services Candidate Name Category/Type 001	
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. The Catalyst Group		Date of Disbursement MM / DD / YYYY 08 / 25 / 2015
Mailing Address 600 Pennsylvania Avenue SE Suite 330		Amount of Each Disbursement this Period 2500.00 Transaction ID : BAAE0C4AC30884E07A80
City Washington State DC Zip Code 20003-6300	Purpose of Disbursement Debt Repayment: Fundraising coordination Candidate Name Category/Type 003	
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).....	8467.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 75			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

Full Name (Last, First, Middle Initial) A. Cardmember Service		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2015
Mailing Address PO Box 94014		Amount of Each Disbursement this Period 4000.00 Transaction ID : BDF00840E07E40D3AA2
City Palatine	State IL	
Zip Code 60094-4014	Purpose of Disbursement Credit card payment - itemized	Category/ Type 001
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. R A Rayburn		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2015
Mailing Address 45 Independence Avenue SW		Amount of Each Disbursement this Period 32.25 Transaction ID : B8BDD4565B8374E458E8 [MEMO ITEM]
City Washington	State DC	
Zip Code 20515-0001	Purpose of Disbursement Meals	Category/ Type 002
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. Delta Airlines		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2015
Mailing Address 1030 Delta Boulevard		Amount of Each Disbursement this Period 1155.89 Transaction ID : B118FD5D85D08421089C [MEMO ITEM]
City Atlanta	State GA	
Zip Code 30354-1989	Purpose of Disbursement Airfare	Category/ Type 002
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).....	4000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 75			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

Full Name (Last, First, Middle Initial) A. Capitol Hill Club		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2015
Mailing Address 300 1st Street SE		Amount of Each Disbursement this Period 206.03
City Washington State DC Zip Code 20003-1801	Purpose of Disbursement Meals 002 Category/Type	
Candidate Name		Transaction ID : BCA5247AD614B49AEA77 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. House Gift Shop		Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2015
Mailing Address 701 15th Street NW		Amount of Each Disbursement this Period 271.70
City Washington State DC Zip Code 20005-2118	Purpose of Disbursement Office Decor supplies 001 Category/Type	
Candidate Name		Transaction ID : BE5F854081E994E95BE0 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Hole In One International		Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2015
Mailing Address 6195 Ridgeview Court Suite A		Amount of Each Disbursement this Period 391.00
City Reno State NV Zip Code 89519-6341	Purpose of Disbursement Insurance 001 Category/Type	
Candidate Name		Transaction ID : B2D19404EC9FF4A9AABD [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 56 OF 75	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

Full Name (Last, First, Middle Initial) A. Best Buy		Date of Disbursement MM / DD / YYYY 08 / 01 / 2015
Mailing Address 4406 Bay Road		Amount of Each Disbursement this Period 178.05
City Saginaw	State MI	
Zip Code 48603-1208	Purpose of Disbursement Supplies for event	Transaction ID : BD55CB9D68344465A9EF
Candidate Name	Category/ Type 003	
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. Enterprise Rent-A-Car Company		Date of Disbursement MM / DD / YYYY 08 / 01 / 2015
Mailing Address 600 Corporate Park Drive		Amount of Each Disbursement this Period 151.21
City Saint Louis	State MO	
Zip Code 63105-4204	Purpose of Disbursement Car rental	Transaction ID : BFB0421FE725448F89E9
Candidate Name	Category/ Type 002	
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) c. Siniikaung Steak House		Date of Disbursement MM / DD / YYYY 08 / 02 / 2015
Mailing Address 6800 East Soaring Eagle Blvd.		Amount of Each Disbursement this Period 253.63
City Mount Pleasant	State MI	
Zip Code 48858-8432	Purpose of Disbursement Catering for event	Transaction ID : BA6EEE47F9FC3418FB20
Candidate Name	Category/ Type 003	
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)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 75			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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)
Moolenaar for Congress

Full Name (Last, First, Middle Initial) A. Bucks Run Golf Club			Date of Disbursement MM / DD / YYYY 08 / 03 / 2015
Mailing Address 1559 S Chippewa Road			Amount of Each Disbursement this Period 000.00 Transaction ID : B1C99C0ABE9324C6D8D4
City Mt Pleasant	State MI	Zip Code 48858-8705	
Purpose of Disbursement Prizes for event		Category/ Type 003	[MEMO ITEM]
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. Bucks Run Golf Club			Date of Disbursement MM / DD / YYYY 08 / 03 / 2015
Mailing Address 1559 S Chippewa Road			Amount of Each Disbursement this Period 11.79 Transaction ID : B6CE268AADBA949C9BFB
City Mt Pleasant	State MI	Zip Code 48858-8705	
Purpose of Disbursement Meals		Category/ Type 002	[MEMO ITEM]
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. Treetops Golf Resort			Date of Disbursement MM / DD / YYYY 08 / 06 / 2015
Mailing Address 3962 Wilkinson Road			Amount of Each Disbursement this Period 260.00 Transaction ID : B4DE10A6A3219441391B
City Treetops Village	State MI	Zip Code 49735-9800	
Purpose of Disbursement Prizes for event		Category/ Type 003	[MEMO ITEM]
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).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 58 OF 75	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
Moolenaar for Congress

Full Name (Last, First, Middle Initial) A. LCM Strategies		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2015
Mailing Address PO Box 158513		Amount of Each Disbursement this Period 1500.00 Transaction ID : BAA7A2770B78A4C039FB
City Nashville	State TN Zip Code 37215-8513	
Purpose of Disbursement Debt Repayment: Online marketing and management		Category/Type 001
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. Victory Phones Live		Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2015
Mailing Address 2900 Wilson Avenue SW Suite 101		Amount of Each Disbursement this Period 2464.05 Transaction ID : B6DADBDEB02264BC083E
City Grandville	State MI Zip Code 49418-1286	
Purpose of Disbursement Debt Repayment: Phone calls to voters		Category/Type 004
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.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement		Category/Type
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).....	3964.05
TOTAL This Period (last page this line number only).....	87119.14

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 75
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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)
Moolenaar for Congress

Full Name (Last, First, Middle Initial) A. Midland County 4H Small Animal Auction		Date of Disbursement MM / DD / YYYY 08 / 24 / 2015
Mailing Address P O Box 231		Amount of Each Disbursement this Period 300.00 Transaction ID : BDFC380DE9E3742E8A38
City Midland	State MI	
Zip Code 48640-0231	Purpose of Disbursement Livestock Auction Donation	Category/ Type 012
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Marco Rubio For President		Date of Disbursement MM / DD / YYYY 09 / 30 / 2015
Mailing Address PO Box 558701		Amount of Each Disbursement this Period 1500.00 Transaction ID : B89AACD018D49429091D
City Miami	State FL	
Zip Code 33255-8701	Purpose of Disbursement Contribution to Federal Candidate committee	Category/ Type 011
Candidate Name Marco Rubio	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District: 00	

Full Name (Last, First, Middle Initial) c. The Island House		Date of Disbursement MM / DD / YYYY 09 / 17 / 2015
Mailing Address 6966 Main Street		Amount of Each Disbursement this Period 500.00 Transaction ID : BAD3B67A5A4414AD9A5C
City Mackinac Island	State MI	
Zip Code 49757	Purpose of Disbursement In-Kind contribution - catering	Category/ Type 011
Candidate Name Marco Rubio	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District: 00	

SUBTOTAL of Disbursements This Page (optional).....	2300.00
TOTAL This Period (last page this line number only).....	2300.00

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

Moolenaar for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Strategic National LLC

Mailing Address 190 Monroe Avenue NW
Suite 500

City State Zip Code
Grand Rapids MI 49503-2628

Nature of Debt (Purpose):
Direct mailings

Outstanding Balance Beginning This Period **49011.75** Transaction ID : **D59ED6AEB40924188B69**

Amount Incurred This Period **0.00** Payment This Period **0.00** Outstanding Balance at Close of This Period **49011.75**

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Victory Phones Live

Mailing Address 2900 Wilson Avenue SW
Suite 101

City State Zip Code
Grandville MI 49418-1286

Nature of Debt (Purpose):
Phone calls to voters

Outstanding Balance Beginning This Period **13742.50** Transaction ID : **DBA5739D7950F4181B50**

Amount Incurred This Period **0.00** Payment This Period **2464.05** Outstanding Balance at Close of This Period **11278.45**

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Victory Phones LLC

Mailing Address 190 Monroe Avenue NW
Suite 5

City State Zip Code
Grand Rapids MI 49503-2628

Nature of Debt (Purpose):
Political consulting services

Outstanding Balance Beginning This Period **28272.31** Transaction ID : **DC46C9F4222A34D42B78**

Amount Incurred This Period **0.00** Payment This Period **0.00** Outstanding Balance at Close of This Period **28272.31**

1) SUBTOTALS This Period This Page (optional)	88562.51
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 61 OF 75
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

Moolenaar for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Strategic National LLC		Nature of Debt (Purpose): Polical consulting fee
Mailing Address 190 Monroe Avenue NW Suite 500		
City State	Zip Code	
Grand Rapids MI	49503-2628	

Outstanding Balance Beginning This Period	Transaction ID : D3750D0DB592440E0905	
50000.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	50000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Pulse Red Communications, LLC		Nature of Debt (Purpose): Digital/Social Media Advertising
Mailing Address 190 Monroe Avenue NW Suite 5		
City State	Zip Code	
Grand Rapids MI	49503-2628	

Outstanding Balance Beginning This Period	Transaction ID : DEAD8943F6C634506BD7	
6948.25		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	6948.25

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Strategic National LLC		Nature of Debt (Purpose): Political consulting
Mailing Address 190 Monroe Avenue NW Suite 500		
City State	Zip Code	
Grand Rapids MI	49503-2628	

Outstanding Balance Beginning This Period	Transaction ID : D65083149529342E2944	
9000.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	2535.95	6464.05

1) SUBTOTALS This Period This Page (optional)	63412.30
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 62 OF 75
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

Moolenaar for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Strategic National LLC		Nature of Debt (Purpose): Political consulting
Mailing Address 190 Monroe Avenue NW Suite 500		
City State	Zip Code	
Grand Rapids MI	49503-2628	

Outstanding Balance Beginning This Period	Transaction ID : D4F5D09E4F7CE4471986	
5000.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	5000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Strategic National LLC		Nature of Debt (Purpose): Political consulting
Mailing Address 190 Monroe Avenue NW Suite 500		
City State	Zip Code	
Grand Rapids MI	49503-2628	

Outstanding Balance Beginning This Period	Transaction ID : D58388DB0DCB04B50820	
25000.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	25000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Andrews Hooper Pavlik, PLC		Nature of Debt (Purpose): Accounting services
Mailing Address 5915 Eastman Avenue Suite 100		
City State	Zip Code	
Midland MI	48640-6824	

Outstanding Balance Beginning This Period	Transaction ID : D308AF00637FF4F65AE3	
3567.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	3567.00	0.00

1) SUBTOTALS This Period This Page (optional)	30000.00
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)

Moolenaar for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor LCM Strategies		Nature of Debt (Purpose): Online marketing and management
Mailing Address PO Box 158513		
City	State	Zip Code
Nashville	TN	37215-8513

Outstanding Balance Beginning This Period	Transaction ID : DB18076B5EAB54E428F6	
<input type="text" value="1500.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="1500.00"/>	<input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Catalyst Group		Nature of Debt (Purpose): Fundraising coordination
Mailing Address 600 Pennsylvania Avenue SE Suite 330		
City	State	Zip Code
Washington	DC	20003-6300

Outstanding Balance Beginning This Period	Transaction ID : DDFC935C45239443EAE7	
<input type="text" value="2400.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="2400.00"/>	<input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Catalyst Group		Nature of Debt (Purpose): Fundraising coordination
Mailing Address 600 Pennsylvania Avenue SE Suite 330		
City	State	Zip Code
Washington	DC	20003-6300

Outstanding Balance Beginning This Period	Transaction ID : D16735FCE543E4143B34	
<input type="text" value="2500.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="2500.00"/>	<input type="text" value="0.00"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="0.00"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
Moolenaar for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Catalyst Group	Nature of Debt (Purpose): Fundraising coordination
Mailing Address 600 Pennsylvania Avenue SE Suite 330	
City State Zip Code Washington DC 20003-6300	

Outstanding Balance Beginning This Period 1600.00	Transaction ID : DFB8A5DFE802F4680B80	
Amount Incurred This Period 0.00	Payment This Period 1600.00	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor LCM Strategies	Nature of Debt (Purpose): Online marketing and management
Mailing Address PO Box 158513	
City State Zip Code Nashville TN 37215-8513	

Outstanding Balance Beginning This Period 1500.00	Transaction ID : D5EC43DB01572491EA92	
Amount Incurred This Period 0.00	Payment This Period 1500.00	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Andrews Hooper Pavlik, PLC	Nature of Debt (Purpose): Accounting services
Mailing Address 5915 Eastman Avenue Suite 100	
City State Zip Code Midland MI 48640-6824	

Outstanding Balance Beginning This Period 3549.00	Transaction ID : DEF1D81287845409BAA4	
Amount Incurred This Period 0.00	Payment This Period 3549.00	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional)	0.00
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)

Moolenaar for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Catalyst Group		Nature of Debt (Purpose): Fundraising coordination
Mailing Address 600 Pennsylvania Avenue SE Suite 330		
City State	Zip Code	
Washington	DC 20003-6300	

Outstanding Balance Beginning This Period	Transaction ID : DF0F9286DD78E4074B67	
<input type="text" value="2500.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="2500.00"/>	<input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor GSL Solutions, Inc.		Nature of Debt (Purpose): Website hosting & support, email distribution
Mailing Address 1411 N West Shore Boulevard Suite 204		
City State	Zip Code	
Tampa	FL 33607-4529	

Outstanding Balance Beginning This Period	Transaction ID : D6C9DFED2772444519D8	
<input type="text" value="815.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="815.00"/>	<input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor LCM Strategies		Nature of Debt (Purpose): Online marketing and management
Mailing Address PO Box 158513		
City State	Zip Code	
Nashville	TN 37215-8513	

Outstanding Balance Beginning This Period	Transaction ID : D826A6D78FAF340F9A90	
<input type="text" value="1500.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="1500.00"/>	<input type="text" value="0.00"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="0.00"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 66 OF 75
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Moolenaar for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Andrews Hooper Pavlik, PLC	Nature of Debt (Purpose): Accounting services
Mailing Address 5915 Eastman Avenue Suite 100	
City State Zip Code Midland MI 48640-6824	

Outstanding Balance Beginning This Period 2489.00	Transaction ID : D2E9ABA84AC864BC2823	
Amount Incurred This Period 0.00	Payment This Period 2489.00	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Catalyst Group	Nature of Debt (Purpose): Fundraising coordination
Mailing Address 600 Pennsylvania Avenue SE Suite 330	
City State Zip Code Washington DC 20003-6300	

Outstanding Balance Beginning This Period 2500.00	Transaction ID : DFBD771C024154B2C921	
Amount Incurred This Period 0.00	Payment This Period 2500.00	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor GSL Solutions, Inc.	Nature of Debt (Purpose): Website hosting & support, email distribution
Mailing Address 1411 N West Shore Boulevard Suite 204	
City State Zip Code Tampa FL 33607-4529	

Outstanding Balance Beginning This Period 665.00	Transaction ID : DC4CD6257A6484F19954	
Amount Incurred This Period 0.00	Payment This Period 665.00	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional)	0.00
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 67 OF 75
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Moolenaar for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor LCM Strategies	Nature of Debt (Purpose): Online marketing and management
Mailing Address PO Box 158513	
City State Zip Code Nashville TN 37215-8513	

Outstanding Balance Beginning This Period 1500.00	Transaction ID : D3F8B83B1916046DFA93	
Amount Incurred This Period 0.00	Payment This Period 1500.00	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Andrews Hooper Pavlik, PLC	Nature of Debt (Purpose): Accounting services
Mailing Address 5915 Eastman Avenue Suite 100	
City State Zip Code Midland MI 48640-6824	

Outstanding Balance Beginning This Period 2899.00	Transaction ID : DEEA914F55E6F41F1838	
Amount Incurred This Period 0.00	Payment This Period 2899.00	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Andrews Hooper Pavlik, PLC	Nature of Debt (Purpose): Accounting services
Mailing Address 5915 Eastman Avenue Suite 100	
City State Zip Code Midland MI 48640-6824	

Outstanding Balance Beginning This Period 3082.00	Transaction ID : DEDCB9170627A4D95924	
Amount Incurred This Period 0.00	Payment This Period 3082.00	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional)	0.00
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 68 OF 75
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

Moolenaar for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Catalyst Group		Nature of Debt (Purpose): Fundraising coordination
Mailing Address 600 Pennsylvania Avenue SE Suite 330		
City State	Zip Code	
Washington DC	20003-6300	

Outstanding Balance Beginning This Period	Transaction ID : DE5C0C19FC1E949FD8AB	
2500.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	2500.00	0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor GSL Solutions, Inc.		Nature of Debt (Purpose): Website hosting & support, email distribution
Mailing Address 1411 N West Shore Boulevard Suite 204		
City State	Zip Code	
Tampa FL	33607-4529	

Outstanding Balance Beginning This Period	Transaction ID : D9555E1825BA447E8967	
665.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	665.00	0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor LCM Strategies		Nature of Debt (Purpose): Online marketing and management
Mailing Address PO Box 158513		
City State	Zip Code	
Nashville TN	37215-8513	

Outstanding Balance Beginning This Period	Transaction ID : D47A00C3CA5DD4C788DA	
1500.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	1500.00	0.00

1) SUBTOTALS This Period This Page (optional)	0.00
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 69 OF 75
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

Moolenaar for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Andrews Hooper Pavlik, PLC		Nature of Debt (Purpose): Accounting services
Mailing Address 5915 Eastman Avenue Suite 100		
City Midland	State MI	Zip Code 48640-6824

Outstanding Balance Beginning This Period 4507.00	Transaction ID : DCBD70A71E5AA47D88E4	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 4507.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Catalyst Group		Nature of Debt (Purpose): Fundraising coordination
Mailing Address 600 Pennsylvania Avenue SE Suite 330		
City Washington	State DC	Zip Code 20003-6300

Outstanding Balance Beginning This Period 2500.00	Transaction ID : DC7970799EDCE4C5298F	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor LCM Strategies		Nature of Debt (Purpose): Online marketing and management
Mailing Address PO Box 158513		
City Nashville	State TN	Zip Code 37215-8513

Outstanding Balance Beginning This Period 1500.00	Transaction ID : D5FB50EC619964908B6E	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1500.00

1) SUBTOTALS This Period This Page (optional)	8507.00
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
Moolenaar for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor GSL Solutions, Inc.	Nature of Debt (Purpose): Website hosting & support, email distribution
Mailing Address 1411 N West Shore Boulevard Suite 204	
City State Zip Code Tampa FL 33607-4529	

Outstanding Balance Beginning This Period <input type="text" value="765.00"/>	Transaction ID : D1DF888E2973A411893F	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="765.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Andrews Hooper Pavlik, PLC	Nature of Debt (Purpose): Accounting services
Mailing Address 5915 Eastman Avenue Suite 100	
City State Zip Code Midland MI 48640-6824	

Outstanding Balance Beginning This Period <input type="text" value="2985.00"/>	Transaction ID : D75797E6A714D47A5A2F	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2985.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Catalyst Group	Nature of Debt (Purpose): Fundraising coordination
Mailing Address 600 Pennsylvania Avenue SE Suite 330	
City State Zip Code Washington DC 20003-6300	

Outstanding Balance Beginning This Period <input type="text" value="2500.00"/>	Transaction ID : D10E98C53D1374BD1A82	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2500.00"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="6250.00"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 71 OF 75
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Moolenaar for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor GSL Solutions, Inc.	Nature of Debt (Purpose): Website hosting & support, email distribution
Mailing Address 1411 N West Shore Boulevard Suite 204	
City State Zip Code Tampa FL 33607-4529	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D58D3D8A6ABE34E58B57	
Amount Incurred This Period 665.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 665.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor LCM Strategies	Nature of Debt (Purpose): Online marketing and management
Mailing Address PO Box 158513	
City State Zip Code Nashville TN 37215-8513	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D607346AF71A44373B79	
Amount Incurred This Period 1500.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Andrews Hooper Pavlik, PLC	Nature of Debt (Purpose): Accounting services
Mailing Address 5915 Eastman Avenue Suite 100	
City State Zip Code Midland MI 48640-6824	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D7194A741AA624ED5989	
Amount Incurred This Period 6344.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 6344.00

1) SUBTOTALS This Period This Page (optional)	8509.00
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 72 OF 75
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

Moolenaar for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Cardmember Service		Nature of Debt (Purpose): Credit card payment - itemized
Mailing Address PO Box 94014		
City	State	Zip Code
Palatine	IL	60094-4014

Outstanding Balance Beginning This Period	Transaction ID : D05F59AF062EA45AEBD8	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="4384.31"/>	<input type="text" value="4384.31"/>	<input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Catalyst Group		Nature of Debt (Purpose): Fundraising coordination
Mailing Address 600 Pennsylvania Avenue SE Suite 330		
City	State	Zip Code
Washington	DC	20003-6300

Outstanding Balance Beginning This Period	Transaction ID : D0F6B65344E9C46CFA4E	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="2500.00"/>	<input type="text" value="0.00"/>	<input type="text" value="2500.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor GSL Solutions, Inc.		Nature of Debt (Purpose): Website hosting & support, email distribution
Mailing Address 1411 N West Shore Boulevard Suite 204		
City	State	Zip Code
Tampa	FL	33607-4529

Outstanding Balance Beginning This Period	Transaction ID : DFA0FAF220A4F4C469C2	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="744.43"/>	<input type="text" value="0.00"/>	<input type="text" value="744.43"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="3244.43"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 73 OF 75
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Moolenaar for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor LCM Strategies	Nature of Debt (Purpose): Online marketing and management
Mailing Address PO Box 158513	
City State Zip Code Nashville TN 37215-8513	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D8C696F2F1288441AB51	
Amount Incurred This Period 1500.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Andrews Hooper Pavlik, PLC	Nature of Debt (Purpose): Accounting services
Mailing Address 5915 Eastman Avenue Suite 100	
City State Zip Code Midland MI 48640-6824	

Outstanding Balance Beginning This Period 0.00	Transaction ID : DA8DECBA3FD3B4DF88A3	
Amount Incurred This Period 4126.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 4126.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Catalyst Group	Nature of Debt (Purpose): Fundraising coordination
Mailing Address 600 Pennsylvania Avenue SE Suite 330	
City State Zip Code Washington DC 20003-6300	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D35FF881884E54D20B7B	
Amount Incurred This Period 2500.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2500.00

1) SUBTOTALS This Period This Page (optional)	8126.00
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
Moolenaar for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor LCM Strategies	Nature of Debt (Purpose): Online marketing and management
Mailing Address PO Box 158513	
City State Zip Code Nashville TN 37215-8513	

Outstanding Balance Beginning This Period 0.00	Transaction ID : DE2E2D3C7EF3F4D47975	
Amount Incurred This Period 1500.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor GSL Solutions, Inc.	Nature of Debt (Purpose): Website hosting & support, email distribution
Mailing Address 1411 N West Shore Boulevard Suite 204	
City State Zip Code Tampa FL 33607-4529	

Outstanding Balance Beginning This Period 0.00	Transaction ID : DA0A57E5953E14EC190B	
Amount Incurred This Period 665.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 665.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Andrews Hooper Pavlik, PLC	Nature of Debt (Purpose): Accounting services
Mailing Address 5915 Eastman Avenue Suite 100	
City State Zip Code Midland MI 48640-6824	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D9CC49B9CF54A4740972	
Amount Incurred This Period 3504.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3504.00

1) SUBTOTALS This Period This Page (optional)	5669.00
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)

Moolenaar for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Catalyst Group		Nature of Debt (Purpose): Fundraising coordination
Mailing Address 600 Pennsylvania Avenue SE Suite 330		
City State	Zip Code	
Washington DC	20003-6300	

Outstanding Balance Beginning This Period	Transaction ID : D64C773B49AC54E6BA9C	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="2500.00"/>	<input type="text" value="0.00"/>	<input type="text" value="2500.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Cardmember Service		Nature of Debt (Purpose): Credit card payment
Mailing Address PO Box 94014		
City State	Zip Code	
Palatine IL	60094-4014	

Outstanding Balance Beginning This Period	Transaction ID : D8FB03B27067E4F08A02	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="4973.06"/>	<input type="text" value="0.00"/>	<input type="text" value="4973.06"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City	State	Zip Code

Outstanding Balance Beginning This Period		
<input type="text"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text"/>	<input type="text"/>	<input type="text"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="7473.06"/>
2) TOTALS This Period (last page this line number only)	<input type="text" value="229753.30"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="229753.30"/>