



**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name  
**Moolenaar for Congress**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e))....	0.00	3600.00
(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)).....	0.00	3600.00
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	24697.09	190064.04
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	24697.09	190064.04
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	37623.85	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	35946.71	

**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 05/2016)

Write or Type Committee Name

Moolenaar for Congress

Report Covering the Period: From:   /   2016 To:   /   2016

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).....	0.00	3500.00
(ii) Unitemized.....	0.00	100.00
(iii) TOTAL of contributions from individuals ▶	0.00	3600.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	0.00	3600.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
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	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.) .....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	0.00	3600.00

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	24697.09	190064.04
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 .....	40.00	40.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	24737.09	190104.04

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	62360.94
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	0.00
25. SUBTOTAL (add Line 23 and Line 24).....	62360.94
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	24737.09
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	37623.85

**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 5 OF 18			
	<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) <b>A. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2016
Mailing Address PO Box 15062		FEC Identification Number C
City Albany	State NY	Zip Code 12212-5062
Purpose of Disbursement Cell phones	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 145.87	
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:	Transaction ID : BA2ED20D253784F46B85 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Kroczaleski, Adam, J., Mr.,</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2016
Mailing Address 5082 Lincoln Road		FEC Identification Number C
City Standish	State MI	Zip Code 48658-9437
Purpose of Disbursement Wages	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 449.81	
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:	Transaction ID : B590EB6E19BEF485D8CF <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. MacArthur, Christopher, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2016
Mailing Address 6030 Stonegate Drive		FEC Identification Number C
City Brighton	State MI	Zip Code 48116-5181
Purpose of Disbursement Wages	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 1347.21	
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:	Transaction ID : B1A19B58AF1574615AB9 <input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1942.89
<b>TOTAL</b> 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 6 OF 18			
	<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) <b>A. Midland Postmaster</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2016		
Mailing Address 2900 Rodd Street			FEC Identification Number C		
City Midland	State MI	Zip Code 48640-4483	Amount of Each Disbursement this Period 634.50		
Purpose of Disbursement Postage stamps		Category/ Type 001	Transaction ID : B0C809517845648C8931		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Arena Communications</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2016		
Mailing Address 1780 W Sequoia Vista Circle			FEC Identification Number C		
City Salt Lake City	State UT	Zip Code 84104-5102	Amount of Each Disbursement this Period 1774.00		
Purpose of Disbursement Printing - brochures		Category/ Type 004	Transaction ID : BB201BBCDE0D4427AA53		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Cardmember Service</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2016		
Mailing Address PO Box 94014			FEC Identification Number C		
City Palatine	State IL	Zip Code 60094-4014	Amount of Each Disbursement this Period 2033.63		
Purpose of Disbursement Debt Repayment: Credit card payment		Category/ Type 001	Transaction ID : B9285EAB3B47C4A72B00		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	4442.13
<b>TOTAL</b> 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 7 OF 18			
	<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) <b>A. Kroger</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2016
Mailing Address 2808 Ashman Street		FEC Identification Number C
City Midland	State MI	Zip Code 48640-4409
Purpose of Disbursement Supplies	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 27.23
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. iHeartMedia Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2016
Mailing Address 77 Monroe Center Street NW		FEC Identification Number C
City Grand Rapids	State MI	Zip Code 49503
Purpose of Disbursement Radio ads	Category/ Type 004	
Candidate Name		Amount of Each Disbursement this Period 752.45
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2016
Mailing Address 1517 Joe Mann Boulevard		FEC Identification Number C
City Midland	State MI	Zip Code 48642-8902
Purpose of Disbursement Supplies	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 63.11
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> 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 8 OF 18			
	<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) <b>A. Timbers Bar &amp; Grill</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2016		
Mailing Address 6415 State Street			FEC Identification Number C		
City Saginaw	State MI	Zip Code 48603-3487	Amount of Each Disbursement this Period 74.61		
Purpose of Disbursement Staff meals		Category/ Type 001	Transaction ID : BC30F2A635BDF48A5AE6		
Candidate Name		Memo Item <input checked="" type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Townsquare Media Lansing</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2016		
Mailing Address 3420 Pinetree Road			FEC Identification Number C		
City Lansing	State MI	Zip Code 48911-4207	Amount of Each Disbursement this Period 940.00		
Purpose of Disbursement Radio ads		Category/ Type 004	Transaction ID : B662FAFDFF763400D9E7		
Candidate Name		Memo Item <input checked="" type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Amazing Deli</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2016		
Mailing Address 134 E Main Street			FEC Identification Number C		
City Midland	State MI	Zip Code 48640-5154	Amount of Each Disbursement this Period 13.85		
Purpose of Disbursement Staff meals		Category/ Type 001	Transaction ID : B2A03772969294E4C904		
Candidate Name		Memo Item <input checked="" type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> 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 9 OF 18	
	<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) <b>A. MacDonald Garber Broadcasting</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2016
Mailing Address 2095 US 131		FEC Identification Number C
City Petoskey	State MI	Zip Code 49770-9216
Purpose of Disbursement Radio ads	Category/ Type 004	
Candidate Name		Amount of Each Disbursement this Period 44.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2016
Mailing Address PO Box 15062		FEC Identification Number C
City Albany	State NY	Zip Code 12212-5062
Purpose of Disbursement Cell phones	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 24.20
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Beer &amp; Brats Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 09 / 2016
Mailing Address 4562 North Eastman		FEC Identification Number C
City Midland	State MI	Zip Code 48642-8260
Purpose of Disbursement Staff meals	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 94.18
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> 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 10 OF 18			
	<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) <b>A. United States Treasury</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2016		
Mailing Address 1500 Pennsylvania Avenue NW					
City Washington	State DC	Zip Code 20220-0001	FEC Identification Number C		
Purpose of Disbursement Payroll taxes		Category/ Type 001	Amount of Each Disbursement this Period 519.62		
Candidate Name		Transaction ID : B747F0E3F37F145BCBDF			
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) ▼		<input type="checkbox"/> Memo Item		
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. Verizon Wireless</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2016		
Mailing Address PO Box 15062					
City Albany	State NY	Zip Code 12212-5062	FEC Identification Number C		
Purpose of Disbursement Cell phones		Category/ Type 001	Amount of Each Disbursement this Period 158.47		
Candidate Name		Transaction ID : B16D71715C34A41919B9			
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) ▼		<input type="checkbox"/> Memo Item		
State:	District:				

Full Name (Last, First, Middle Initial) <b>C. Kroczaleski, Adam, J., Mr.,</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2016		
Mailing Address 5082 Lincoln Road					
City Standish	State MI	Zip Code 48658-9437	FEC Identification Number C		
Purpose of Disbursement Mileage, expenses - itemized		Category/ Type 002	Amount of Each Disbursement this Period 335.10		
Candidate Name		Transaction ID : B8D4AE83A4BFD45DC809			
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) ▼		<input type="checkbox"/> Memo Item		
State:	District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1013.19
<b>TOTAL</b> This Period (last page this line number only).....	(Empty field)

**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 11 OF 18			
	<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) <b>A. Sam's Club</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2016		
Mailing Address 5656 Bay Road			FEC Identification Number C		
City Saginaw	State MI	Zip Code 48604-2510	Amount of Each Disbursement this Period 263.10		
Purpose of Disbursement Parade supplies		Category/ Type 001	Transaction ID : B606D1C33374741758CF		
Candidate Name		Memo Item <input checked="" type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Kroczaleski, Adam, J., Mr.,</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2016		
Mailing Address 5082 Lincoln Road			FEC Identification Number C		
City Standish	State MI	Zip Code 48658-9437	Amount of Each Disbursement this Period 1441.74		
Purpose of Disbursement Mileage, expenses - itemized		Category/ Type 002	Transaction ID : B57D1AC8E55F6475786C		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. Holiday Inn</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2016		
Mailing Address 810 Cinema Drive			FEC Identification Number C		
City Midland	State MI	Zip Code 48642-7290	Amount of Each Disbursement this Period 159.84		
Purpose of Disbursement Lodging		Category/ Type 002	Transaction ID : B68D7E4BDABA349AA8B2		
Candidate Name		Memo Item <input checked="" type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1441.74
<b>TOTAL</b> 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 12 OF 18			
	<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) <b>A. Bortz, Ashton, , Ms.,</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2016
Mailing Address 4118 Perrine Pointe		FEC Identification Number C
City Midland	State MI	Zip Code 48640-2392
Purpose of Disbursement Mileage	002	
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:	Amount of Each Disbursement this Period 166.50 Transaction ID : BBCBF265DC97E4BC5864 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Brooks, Sarah, , Mrs.,</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2016
Mailing Address 210 Maple View Court		FEC Identification Number C
City Hemlock	State MI	Zip Code 48626-8455
Purpose of Disbursement Mileage	002	
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:	Amount of Each Disbursement this Period 270.00 Transaction ID : B796AD4F453D444B5B70 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>c. GSL Solutions, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2016
Mailing Address 1411 N West Shore Boulevard Suite 204		FEC Identification Number C
City Tampa	State FL	Zip Code 33607-4529
Purpose of Disbursement Website hosting & support, email distribution	001	
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:	Amount of Each Disbursement this Period 440.89 Transaction ID : B3692D24D492C4854B35 <input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	877.39
<b>TOTAL</b> 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 13 OF 18			
	<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) <b>A. I360, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2016
Mailing Address PO Box 37046		FEC Identification Number C
City Baltimore	State MD	Zip Code 21297-3046
Purpose of Disbursement Data subscription	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 1500.00
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:	Transaction ID : BF5CB394027F44FB6A59 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Aristotle International, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2016
Mailing Address 205 Pennsylvania Avenue SE		FEC Identification Number C
City Washington	State DC	Zip Code 20003-1164
Purpose of Disbursement Campaign reporting software	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 500.00
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:	Transaction ID : B83F960B1FAF54674B21 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Kroczaleski, Adam, J., Mr.,</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2016
Mailing Address 5082 Lincoln Road		FEC Identification Number C
City Standish	State MI	Zip Code 48658-9437
Purpose of Disbursement Wages	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 454.67
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:	Transaction ID : B4A90835FEE7B4B24A6F <input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2454.67
<b>TOTAL</b> 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 14 OF 18	
	<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) <b>A. Andrews Hooper Pavlik, PLC</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2016	
Mailing Address 5915 Eastman Avenue Suite 100			FEC Identification Number <b>C</b>	
City Midland	State MI	Zip Code 48640-6824	Amount of Each Disbursement this Period 10153.00	
Purpose of Disbursement Debt Repayment: Accounting services		Category/ Type 001	Transaction ID : <b>BF2E91DDA12AA4955BCB</b>	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. LCM Strategies</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2016	
Mailing Address PO Box 158513			FEC Identification Number <b>C</b>	
City Nashville	State TN	Zip Code 37215-8513	Amount of Each Disbursement this Period 1500.00	
Purpose of Disbursement Online marketing and management		Category/ Type 004	Transaction ID : <b>BC1128537853B4048AAD</b>	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Tarrant, Ryan, , Mr.,</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2016	
Mailing Address 2116 7th Street			FEC Identification Number <b>C</b>	
City Bay City	State MI	Zip Code 48708-6805	Amount of Each Disbursement this Period 152.62	
Purpose of Disbursement Mileage, expenses - itemized		Category/ Type 002	Transaction ID : <b>B5A5D0BA504664E9D874</b>	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	11805.62
<b>TOTAL</b> 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 15 OF 18	
	<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) <b>A. United States Treasury</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2016
Mailing Address 1500 Pennsylvania Avenue NW		FEC Identification Number C
City Washington	State DC	Zip Code 20220-0001
Purpose of Disbursement Payroll taxes	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 76.50
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2016
Mailing Address PO Box 15062		FEC Identification Number C
City Albany	State NY	Zip Code 12212-5062
Purpose of Disbursement Cell phones	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 145.87
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	222.37
<b>TOTAL</b> This Period (last page this line number only).....▶	24200.00

**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 <b>Strategic National LLC</b>			Nature of Debt (Purpose): Political consulting
Mailing Address 190 Monroe Avenue NW Suite 500			
City Grand Rapids	State MI	Zip Code 49503-2628	

Outstanding Balance Beginning This Period 10000.00	Transaction ID : D3750D0DB592440E0905	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 10000.00

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

Outstanding Balance Beginning This Period 12809.18	Transaction ID : D58388DB0DCB04B50820	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 12809.18

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Andrews Hooper Pavlik, PLC</b>			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 10153.00	Transaction ID : DB299D367656A48C3A40	
Amount Incurred This Period 0.00	Payment This Period 10153.00	Outstanding Balance at Close of This Period 0.00

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	▶	22809.18
2) <b>TOTALS</b> This Period (last page this line number only) .....	▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	▶	
4) <b>ADD 2) and 3)</b> 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 <b>Cardmember Service</b>			Nature of Debt (Purpose): Credit card payment - itemized
Mailing Address PO Box 94014			
City Palatine	State IL	Zip Code 60094-4014	

Outstanding Balance Beginning This Period 2033.63		Transaction ID : D2C31CA1685CB47BFA13	
Amount Incurred This Period 0.00	Payment This Period 2033.63	Outstanding Balance at Close of This Period 0.00	

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

Outstanding Balance Beginning This Period 0.00		Transaction ID : DAFF6FCAEBF944E6ABD5	
Amount Incurred This Period 4166.49	Payment This Period 0.00	Outstanding Balance at Close of This Period 4166.49	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>QRP, Inc.</b>			Nature of Debt (Purpose): Holiday cards
Mailing Address 94 Ashman Circle			
City Midland	State MI	Zip Code 48640-4627	

Outstanding Balance Beginning This Period 0.00		Transaction ID : D6B7C22E947344929A79	
Amount Incurred This Period 1580.40	Payment This Period 0.00	Outstanding Balance at Close of This Period 1580.40	

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	▶	5746.89
2) <b>TOTALS</b> This Period (last page this line number only) .....	▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	▶	
4) <b>ADD 2) and 3)</b> 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 <b>Andrews Hooper Pavlik, PLC</b>			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 0.00		Transaction ID : DCA2028F688D9446BB03	
Amount Incurred This Period 4731.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 4731.00	

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

Outstanding Balance Beginning This Period 0.00		Transaction ID : D77ABCECD54CA4CD7B5E	
Amount Incurred This Period 2659.64	Payment This Period 0.00	Outstanding Balance at Close of This Period 2659.64	

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		Outstanding Balance at Close of This Period	
Amount Incurred This Period	Payment This Period		

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	7390.64
2) <b>TOTALS</b> This Period (last page this line number only) .....	35946.71
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	35946.71