

48-HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

1. NAME OF COMMITTEE IN FULL Moolenaar for Congress			
ADDRESS (number and street) 5915 Eastman Avenue Suite 100			
CITY Midland	STATE MI	ZIP CODE 48640-6824	
2. NAME OF CANDIDATE Moolenaar, John, , Mr.,		3. OFFICE SOUGHT (State and District) House MI 04	
		4. FEC IDENTIFICATION NUMBER C00561530	
5. IS THIS AN AMENDMENT? <input checked="" type="checkbox"/> NO, THIS IS A NEW FILING <input type="checkbox"/> YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____			
A. FULL NAME Barrett, Edward, J., Mr.,			
MAILING ADDRESS 8601 W Lakeshore Drive		Name of Employer None	
CITY Perry	STATE MI	ZIP CODE 48872-9778	Date (month, day, year) 10/20/2016
		Amount 1000.00	
		Transaction ID : 613A455D780664B2E	
		Occupation Retired	
B. FULL NAME Taylor, Clifford, W., Honorable,			
MAILING ADDRESS 9760 Sunny Point Drive		Name of Employer None	
CITY Laingsburg	STATE MI	ZIP CODE 48848-9745	Date (month, day, year) 10/20/2016
		Amount 1000.00	
		Transaction ID : 6ED882F18043244F6.	
		Occupation Retired	
C. FULL NAME McPharlin, Patrick, M., Mr.,			
MAILING ADDRESS 8920 W Lake Pointe Drive		Name of Employer MI Dept of Insurance & Financial Serv	
CITY Laingsburg	STATE MI	ZIP CODE 48848-9378	Date (month, day, year) 10/20/2016
		Amount 1000.00	
		Transaction ID : 6927701A5FB3476E	
		Occupation Director	
D. FULL NAME Hoisington, Thomas, J., Mr.,			
MAILING ADDRESS 2575 Oxford Road		Name of Employer Public Affairs Associates Inc	
CITY Lansing	STATE MI	ZIP CODE 48911-1036	Date (month, day, year) 10/20/2016
		Amount 1000.00	
		Transaction ID : 6FA3EA52625BD4A4	
		Occupation President / Lobbyist	
E. FULL NAME Michigan Independent PAC			
MAILING ADDRESS 150 W Jefferson Ave Ste 2500		Name of Employer	
CITY Detroit	STATE MI	ZIP CODE 48226-4415	Date (month, day, year) 10/20/2016
		Amount 1000.00	
		Transaction ID : 6CE02ED8160094793	
		Occupation	
SIGNATURE (optional) Lang, Gwen, , ,		DATE 10/22/2016	For further information contact: Federal Election Commission 999 E Street, NW, Washington, DC 20463 Toll Free 800-424-9530, Local 202-694-1100
		[Electronically Filed]	

--	--	--

Any information copied from reports and statements filed under the Federal Election Campaign Act 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.

FEC FORM 6
(Revised 03/2016)

48 HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

1. NAME OF COMMITTEE IN FULL Moolenaar for Congress			continuation page
ADDRESS (number and street) 5915 Eastman Avenue Suite 100			
CITY, STATE, and ZIP CODE Midland MI 48640-6824			
2. NAME OF CANDIDATE Moolenaar, John, , Mr.,	3. OFFICE SOUGHT (State and District) House MI 04	4. FEC IDENTIFICATION NUMBER C00561530	

5. IS THIS AN AMENDMENT?
 NO, THIS IS A NEW FILING
 YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____

A. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month, day, year)	Amount
American Hospital Association PAC 800 Tenth Street, NW Two City Center, Suite 400 Washington DC 20001-2801	Occupation Transaction ID : 626F0CE9F9FC94648B21	10/20/2016	2500.00
B. FULL NAME, MAILING ADDRESS AND ZIP CODE Farm Credit PAC 50 F Street NW Suite 900 Washington DC 20001-1530	Occupation Transaction ID : 62D63CC39F6E64B1B85C	10/20/2016	1000.00
C. FULL NAME, MAILING ADDRESS AND ZIP CODE CMS Energy Employees for Better Government 1 Energy Plaza Dr Jackson MI 49201-2357	Occupation Transaction ID : 667B2A4AEF40844F0BE2	10/20/2016	2400.00
D. FULL NAME, MAILING ADDRESS AND ZIP CODE Kelly Services Inc PAC 999 W Big Beaver Road Troy MI 48084-4716	Occupation Transaction ID : 6EAAE569E3C124D47AAA	10/20/2016	1000.00
E. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer Occupation	Date (month, day, year)	Amount