

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
VANDERSTELT FOR CONGRESS

ADDRESS (number and street) PO BOX 492
Check if different than previously reported. (ACC) SPRING LAKE MI 49456

2. FEC IDENTIFICATION NUMBER C C00556688
3. IS THIS REPORT NEW (N) OR AMENDED (A) MI 02

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 11 / 04 / 2014 in the State of MI
(c) 30-Day POST-Election Report for the:
General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period 10 / 01 / 2014 through 10 / 15 / 2014

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 Deanna Taylor

Signature of Treasurer Deanna Taylor [Electronically Filed] Date 10 / 20 / 2014

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  
**VANDERSTELT 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))....	8151.00	41538.78
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	510.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	8151.00	41028.78
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	1943.79	42360.35
(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)).....	1943.79	42360.35
8. Cash on Hand at Close of Reporting Period (from Line 27).....	11170.43	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	12500.00	

**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

**VANDERSTELT 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).....	2111.00	21066.66
(ii) Unitemized.....	0.00	0.00
(iii) TOTAL of contributions from individuals ▶	2111.00	21066.66
(b) Political Party Committees.....	4000.00	13562.12
(c) Other Political Committees (such as PACs).....	2040.00	6910.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	8151.00	41538.78
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....		
	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	12500.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	12500.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....		
	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....		
	0.00	2.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶		
	8151.00	54040.78

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	1943.79	42360.35
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	10.00
(b) Political Party Committees.....	0.00	500.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	510.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	1943.79	42870.35

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	4963.22
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	8151.00
25. SUBTOTAL (add Line 23 and Line 24).....	13114.22
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	1943.79
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	11170.43

**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 29
	<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)  
**VANDERSTELT FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**David E Aikens**

Mailing Address 555 Cherry Ln

City Holland State MI Zip Code 49424-6487

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **70.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 15 / 2014

**Transaction ID : SA11AI.5305**

Amount of Each Receipt this Period  
**20.00**  
 ActBlue ck 3000182173

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

Mailing Address NA

City NA State MI Zip Code 00000

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

Name of Employer NA Occupation NA

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **231.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 06 / 2014

**Transaction ID : SA11AI.5281**

Amount of Each Receipt this Period  
**20.00**  
 Cash

**C.** Full Name (Last, First, Middle Initial)  
**Jeff Beegle**

Mailing Address 6019 Zellar Rd

City Whitehall State MI Zip Code 49461

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

Name of Employer UAW Occupation Service Rep

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **25.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 06 / 2014

**Transaction ID : SA11AI.5252**

Amount of Each Receipt this Period  
**25.00**  
 ActBlue ck 3000179809

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

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

**65.00**

**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 29
	<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)  
**VANDERSTELT FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Jason Buxbaum**

Mailing Address 415 W Madison

City State Zip Code  
Ann Arbor MI 48104

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

Name of Employer Occupation  
Blue Cross Blue Shield of Michigan Senior Analyst

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**15.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 06 / 2014

**Transaction ID : SA11AI.5253**

Amount of Each Receipt this Period  
**5.00**  
 ActBlue ck 3000179809

**B.** Full Name (Last, First, Middle Initial)  
**Virginia Chester**

Mailing Address 13335 Winding Creek Dr

City State Zip Code  
Grand Haven MI 49417-9268

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

Name of Employer Occupation  
None None

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**85.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 06 / 2014

**Transaction ID : SA11AI.5261**

Amount of Each Receipt this Period  
**10.00**  
 ActBlue ck 3000179809

**C.** Full Name (Last, First, Middle Initial)  
**Robert W Collins**

Mailing Address PO Box 293

City State Zip Code  
Spring Lake MI 49456-0293

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

Name of Employer Occupation  
Robert W. Collins, PhD, PC Psychologist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**150.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 15 / 2014

**Transaction ID : SA11AI.5319**

Amount of Each Receipt this Period  
**50.00**  
 ActBlue ck 3000181146

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

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

**65.00**

**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 29
	<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)  
**VANDERSTELT FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Sherron Collins**

Mailing Address PO Box 293

City Spring Lake State MI Zip Code 49456

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

Name of Employer None Occupation Not employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **10.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 06 / 2014

**Transaction ID : SA11AI.5245**

Amount of Each Receipt this Period  
**10.00**  
 ActBlue ck 3000179809

**B.** Full Name (Last, First, Middle Initial)  
**Sherron Collins**

Mailing Address PO Box 293

City Spring Lake State MI Zip Code 49456

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

Name of Employer None Occupation Not employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **25.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 06 / 2014

**Transaction ID : SA11AI.5270**

Amount of Each Receipt this Period  
**15.00**  
 ActBlue ck 3000179809

**C.** Full Name (Last, First, Middle Initial)  
**Mary DeRidder**

Mailing Address 16515 New Holland St

City Holland State MI Zip Code 49424-5556

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

Name of Employer None Occupation Not employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **35.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 15 / 2014

**Transaction ID : SA11AI.5303**

Amount of Each Receipt this Period  
**15.00**  
 ActBlue ck 3000182173

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

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

**40.00**

**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 29
	<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)  
**VANDERSTELT FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Mary DeRidder**

Mailing Address 16515 New Holland St

City: Holland State: MI Zip Code: 49424-5556

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

Name of Employer: None Occupation: Not employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **45.00**

Date of Receipt: 10 / 15 / 2014

**Transaction ID : SA11AI.5306**

Amount of Each Receipt this Period: **10.00**

ActBlue ck 3000182173

**B.** Full Name (Last, First, Middle Initial)  
**Connie DeVries**

Mailing Address 2552 Wedgewood Ct

City: Wyoming State: MI Zip Code: 49519

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

Name of Employer: None Occupation: Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **25.00**

Date of Receipt: 10 / 15 / 2014

**Transaction ID : SA11AI.5302**

Amount of Each Receipt this Period: **25.00**

ActBlue ck 3000182173

**C.** Full Name (Last, First, Middle Initial)  
**Steve Frazee**

Mailing Address 16301 Heron Drive

City: Spring Lake State: MI Zip Code: 49456

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

Name of Employer: WhizBang! Training Occupation: Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **25.00**

Date of Receipt: 10 / 06 / 2014

**Transaction ID : SA11AI.5255**

Amount of Each Receipt this Period: **25.00**

ActBlue ck 3000179809

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

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

**60.00**



**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 9 OF 29
	<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)  
**VANDERSTELT FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Denise M Garn**

Mailing Address 2143 Sandcrest St

City Jenison State MI Zip Code 49428

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

Name of Employer: Floral View Memorial Gardens  
Occupation: Office Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **510.00**

Date of Receipt: **10 / 06 / 2014**

**Transaction ID : SA11AI.5259**

Amount of Each Receipt this Period: **10.00**  
ActBlue ck 3000179809

**B.** Full Name (Last, First, Middle Initial)  
**Mary Jane Giesey**

Mailing Address 4530 Connecticut Ave NW Apt 212

City Washington State DC Zip Code 20008

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

Name of Employer: NORC at the Univ of Chicago  
Occupation: Research Analyst

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **10.00**

Date of Receipt: **10 / 06 / 2014**

**Transaction ID : SA11AI.5262**

Amount of Each Receipt this Period: **10.00**  
ActBlue ck 3000179809

**C.** Full Name (Last, First, Middle Initial)  
**Eric C. Grimm**

Mailing Address 1330 W Summit Ave

City Muskegon State MI Zip Code 49441-3826

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

Name of Employer: Williams | Hughes, PLLC  
Occupation: Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **150.00**

Date of Receipt: **10 / 06 / 2014**

**Transaction ID : SA11AI.5263**

Amount of Each Receipt this Period: **50.00**  
ActBlue ck 3000179809

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

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

**70.00**

**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 29
	<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)  
**VANDERSTELT FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Amy Guarr**

Mailing Address 14190 Deer Cove Dr

City: Holland State: MI Zip Code: 49424

FEC ID number of contributing federal political committee: C

Name of Employer: Black River Public School Occupation: Paraprofessional

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 25.00

Date of Receipt: 10 / 06 / 2014

**Transaction ID : SA11AI.5266**

Amount of Each Receipt this Period: 25.00

ActBlue ck 3000179809

**B.** Full Name (Last, First, Middle Initial)  
**Deborah Havens**

Mailing Address 2449 Omega Dr, NE

City: Grand Rapids State: MI Zip Code: 49525

FEC ID number of contributing federal political committee: C

Name of Employer: None Occupation: Not employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 25.00

Date of Receipt: 10 / 06 / 2014

**Transaction ID : SA11AI.5257**

Amount of Each Receipt this Period: 25.00

ActBlue ck 3000179809

**C.** Full Name (Last, First, Middle Initial)  
**John B. Hills**

Mailing Address 1450 S. Ferry St #104

City: Grand Haven State: MI Zip Code: 49417

FEC ID number of contributing federal political committee: C

Name of Employer: None Occupation: Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 50.00

Date of Receipt: 10 / 15 / 2014

**Transaction ID : SA11AI.5312**

Amount of Each Receipt this Period: 50.00

ActBlue ck 3000182173

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

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

100.00

**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 29
	<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)  
**VANDERSTELT FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Susan Holkeboer</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 06 / 2014	
Mailing Address 1527 Seventh St		<b>Transaction ID : SA11AI.5279</b>	
City Muskegon	State MI	Zip Code 49441	Amount of Each Receipt this Period _____ 25.00
FEC ID number of contributing federal political committee. <b>C</b>		Check 8794	
Name of Employer None	Occupation Retired	Election Cycle-to-Date _____ 25.00	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>B. Steve Keglovitz</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 15 / 2014	
Mailing Address 4187 S Quarterline Rd		<b>Transaction ID : SA11AI.5317</b>	
City Muskegon	State MI	Zip Code 49444-4236	Amount of Each Receipt this Period _____ 125.00
FEC ID number of contributing federal political committee. <b>C</b>		Check 2543	
Name of Employer None	Occupation Retired	Election Cycle-to-Date _____ 175.00	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>C. Oscar Lee Kent</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 06 / 2014	
Mailing Address 6635 Lau Rd		<b>Transaction ID : SA11AI.5282</b>	
City Montague	State MI	Zip Code 49437	Amount of Each Receipt this Period _____ 300.00
FEC ID number of contributing federal political committee. <b>C</b>		Check 3196	
Name of Employer None	Occupation Retired	Election Cycle-to-Date _____ 300.00	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 450.00
<b>TOTAL</b> This Period (last page this line number only).....	_____

**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 12 OF 29
	<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)  
**VANDERSTELT FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>Ingram Kleaveland</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 15 / 2014	
Mailing Address 1634 Sunset Dr		<b>Transaction ID : SA11AI.5313</b>	
City N. Muskegon	State MI	Zip Code 49445	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00 ActBlue ck 3000182173	
Name of Employer None	Occupation Not employed		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) <b>Elizabeth Klooster</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 15 / 2014	
Mailing Address 3701 Pillon Rd		<b>Transaction ID : SA11AI.5314</b>	
City Muskegon	State MI	Zip Code 49445	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00 Cash	
Name of Employer Information requested	Occupation Information requested		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 20.00		

Full Name (Last, First, Middle Initial) <b>Rachel Klooster</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 15 / 2014	
Mailing Address 3701 Pillon Rd		<b>Transaction ID : SA11AI.5315</b>	
City Muskegon	State MI	Zip Code 49445	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00 Cash	
Name of Employer Information requested	Occupation Information requested		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 20.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	290.00
<b>TOTAL</b> This Period (last page this line number only).....	290.00

**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 29
	<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)  
**VANDERSTELT FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Norma Koopman**

Mailing Address 1625 Barbara Ct

City State Zip Code  
Grand Haven MI 49417

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

Name of Employer Occupation  
None Not employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 15 / 2014

**Transaction ID : SA11AI.5301**

Amount of Each Receipt this Period  
300.00  
ActBlue ck 3000182173

**B.** Full Name (Last, First, Middle Initial)  
**Denise Krbez**

Mailing Address 1510 Goody Rd

City State Zip Code  
Norton Shores MI 49441-5732

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

Name of Employer Occupation  
None Not employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
306.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 06 / 2014

**Transaction ID : SA11AI.5267**

Amount of Each Receipt this Period  
10.00  
ActBlue ck 3000179809

**C.** Full Name (Last, First, Middle Initial)  
**Matthew Krbez**

Mailing Address 1510 Goody Rd

City State Zip Code  
Norton Shores MI 49441

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

Name of Employer Occupation  
None Not employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
10.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 06 / 2014

**Transaction ID : SA11AI.5268**

Amount of Each Receipt this Period  
10.00  
ActBlue ck 3000179809

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

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

320.00

**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 29
	<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)  
**VANDERSTELT FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Walter Krbez Jr.**

Mailing Address 1510 Goody Rd

City Norton Shores State MI Zip Code 49441

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

Name of Employer None Occupation Not employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **25.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 06 / 2014

**Transaction ID : SA11AI.5256**

Amount of Each Receipt this Period  
**25.00**  
 ActBlue ck 3000179809

**B.** Full Name (Last, First, Middle Initial)  
**Rev. Vince Lavieri**

Mailing Address 297 W. Clay #212

City Muskegon State MI Zip Code 49440

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

Name of Employer Self Occupation Clergy

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **10.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 06 / 2014

**Transaction ID : SA11AI.5265**

Amount of Each Receipt this Period  
**10.00**  
 ActBlue ck 3000179809

**C.** Full Name (Last, First, Middle Initial)  
**Phil Leech**

Mailing Address 17122 Arthur Court

City Spring Lake State MI Zip Code 49456

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

Name of Employer None Occupation Not employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **25.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 06 / 2014

**Transaction ID : SA11AI.5247**

Amount of Each Receipt this Period  
**25.00**  
 ActBlue ck 3000179809

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

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

**60.00**

**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 15 OF 29
	<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)  
**VANDERSTELT FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Mary Loftis</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 06 / 2014
Mailing Address 6301 Greenway Dr, SE		<b>Transaction ID : SA11AI.5250</b>
City Grand Rapids	State MI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer Metro Health	Occupation Librarian	ActBlue ck 3000179809
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 10.00	

Full Name (Last, First, Middle Initial) <b>B. Daniel Magennis</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 06 / 2014
Mailing Address 2456 Rudgate Dr NW		<b>Transaction ID : SA11AI.5251</b>
City Grand Rapids	State MI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 14.00
Name of Employer None	Occupation Not employed	ActBlue ck 3000179809
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 29.00	

Full Name (Last, First, Middle Initial) <b>C. Daniel Magennis</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 15 / 2014
Mailing Address 2456 Rudgate Dr NW		<b>Transaction ID : SA11AI.5307</b>
City Grand Rapids	State MI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 14.00
Name of Employer None	Occupation Not employed	ActBlue ck 3000182173
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 43.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	38.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 16 OF 29  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**VANDERSTELT FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Steven L Markel**

Mailing Address 6635 Zellar Rd

City State Zip Code  
Whitehall MI 49461-9772

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt

**Transaction ID : SA11AI.5260**

Amount of Each Receipt this Period  
  
 ActBlue ck 3000179809

**B.** Full Name (Last, First, Middle Initial)  
**Ellen McDonald**

Mailing Address 112 Glendale Dr

City State Zip Code  
Ann Arbor MI 48103

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
Univeristy of Michigan Adminstration

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt

**Transaction ID : SA11AI.5258**

Amount of Each Receipt this Period  
  
 ActBlue ck 3000179809

**C.** Full Name (Last, First, Middle Initial)  
**Chrysteen Moelter-Gray**

Mailing Address 101 Washington Ave

City State Zip Code  
Grand Haven MI 49417-1354

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt

**Transaction ID : SA11AI.5254**

Amount of Each Receipt this Period  
  
 ActBlue ck 3000179809

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

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



**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 29
	<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)  
**VANDERSTELT FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Robert Ortman**

Mailing Address 1627 S. Shore Dr

City: Holland State: MI Zip Code: 49423

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

Name of Employer: Coldwell Banker Commercial Occupation: Sales

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **350.00**

Date of Receipt: 10 / 06 / 2014

**Transaction ID : SA11AI.5246**

Amount of Each Receipt this Period: **100.00**  
ActBlue ck 3000179809

**B.** Full Name (Last, First, Middle Initial)  
**Pamela Park**

Mailing Address 1168 152nd St.

City: West Olive State: MI Zip Code: 49460

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

Name of Employer: None Occupation: Not employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **50.00**

Date of Receipt: 10 / 06 / 2014

**Transaction ID : SA11AI.5264**

Amount of Each Receipt this Period: **25.00**  
ActBlue ck 3000179809

**C.** Full Name (Last, First, Middle Initial)  
**Rebecca L Riggs**

Mailing Address 316 N. Lewis St

City: Ludington State: MI Zip Code: 49431

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

Name of Employer: Information requested Occupation: Information requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **25.00**

Date of Receipt: 10 / 06 / 2014

**Transaction ID : SA11AI.5280**

Amount of Each Receipt this Period: **25.00**  
Check 4175

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

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

**150.00**

**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 18 OF 29
	<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)  
**VANDERSTELT FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Jennifer Rossing**

Mailing Address 136 Summer St

City State Zip Code  
Franklin MA 02038

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

Name of Employer Occupation  
Bluefin Robotics Software Engineer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
100.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 06 / 2014

**Transaction ID : SA11AI.5248**

Amount of Each Receipt this Period  
100.00  
ActBlue ck 3000179809

**B.** Full Name (Last, First, Middle Initial)  
**Edith Stubbs**

Mailing Address 125 Pinicrest Rd

City State Zip Code  
Whitehall MI 49461-1923

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
100.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 06 / 2014

**Transaction ID : SA11AI.5249**

Amount of Each Receipt this Period  
10.00  
ActBlue ck 3000179809

**C.** Full Name (Last, First, Middle Initial)  
**Norm Swier**

Mailing Address 11530 Pond Rd

City State Zip Code  
Montague MI 49437

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

Name of Employer Occupation  
None Not employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
30.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 15 / 2014

**Transaction ID : SA11AI.5304**

Amount of Each Receipt this Period  
30.00  
ActBlue ck 3000182173

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

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

140.00

**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 19 OF 29
	<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)  
**VANDERSTELT FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Deanna Taylor**

Mailing Address 1565 Porter Rd

City Norton Shores State MI Zip Code 49441-5763

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

Name of Employer Structural Concepts Corp Occupation AR Invoice Coordinator

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **362.98**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 06 / 2014

**Transaction ID : SA11AI.5269**

Amount of Each Receipt this Period  
 10.00  
 ActBlue ck 3000179809

**B.** Full Name (Last, First, Middle Initial)  
**Terry L Vanderstelt**

Mailing Address 2866 Riverwood Dr.

City Twin Lake State MI Zip Code 49457

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **140.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 15 / 2014

**Transaction ID : SA11AI.5308**

Amount of Each Receipt this Period  
 100.00  
 ActBlue ck 30000182173

**C.** Full Name (Last, First, Middle Initial)  
**Susan Welsford**

Mailing Address 642 Wendover Blvd

City Norton Shores State MI Zip Code 49441-5050

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

Name of Employer L3 Combat Propulsion Systems Occupation Operations Coordinator

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **50.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 06 / 2014

**Transaction ID : SA11AI.5271**

Amount of Each Receipt this Period  
 50.00  
 ActBlue ck 3000179809

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

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

**160.00**

**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 29
	<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)  
**VANDERSTELT FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**James Winslow**

Mailing Address 2050 Eastern Ave NE

City Grand Rapids State MI Zip Code 49505-4211

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
170.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 15 / 2014

**Transaction ID : SA11A1.5300**

Amount of Each Receipt this Period  
50.00

ActBlue ck 3000182173

**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 / 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 / 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).....

50.00

2111.00

**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 21 OF 29
	<input type="checkbox"/> 11a 12 <input checked="" 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)  
**VANDERSTELT FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**NEWAYGO COUNTY DEMOCRATIC EXECUTIVE COMMITTEE**

Mailing Address PO BOX 146

City: NEWAYGO      State: MI      Zip Code: 49337

FEC ID number of contributing federal political committee: **C** C00452854

Name of Employer: \_\_\_\_\_ Occupation: \_\_\_\_\_

Receipt For: 2014  
 Primary     General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date: \_\_\_\_\_ 7200.00

Date of Receipt: 10 / 15 / 2014

**Transaction ID : SA11B.5316**

Amount of Each Receipt this Period: 3000.00

Check 1235

**B.** Full Name (Last, First, Middle Initial)  
**OTTAWA COUNTY DEMOCRATIC PARTY**

Mailing Address PO Box 1792

City: Holland      State: MI      Zip Code: 49422-1792

FEC ID number of contributing federal political committee: **C** C00246348

Name of Employer: \_\_\_\_\_ Occupation: \_\_\_\_\_

Receipt For: 2014  
 Primary     General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date: \_\_\_\_\_ 1562.12

Date of Receipt: 10 / 15 / 2014

**Transaction ID : SA11B.5318**

Amount of Each Receipt this Period: 1000.00

Check 2325

**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

Amount of Each Receipt this Period

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

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

4000.00

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 22 OF 29
	<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)  
**VANDERSTELT FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Committee to Elect Sarah Howard to State Senate**

Mailing Address PO Box 911

City Grand Haven State MI Zip Code 49417-0911

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
160.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 06 / 2014

**Transaction ID : SA11C.5273**

Amount of Each Receipt this Period  
40.00

Check 2063

**B.** Full Name (Last, First, Middle Initial)  
**NEA FUND FOR CHILDREN AND PUBLIC EDUCATION**

Mailing Address 1201 16TH STREET NW STE 418

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00003251

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 06 / 2014

**Transaction ID : SA11C.5283**

Amount of Each Receipt this Period  
2000.00

Check 23940

**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 / 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).....

2040.00

2040.00

**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 23 OF 29	
	<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)  
**VANDERSTELT FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. ActBlue Technical Services</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2014
Mailing Address 366 Summer Street		Amount of Each Disbursement this Period 26.25 <b>Transaction ID : SB17.5272</b>
City Somerville State MA Zip Code 02144-3132	Purpose of Disbursement Bank fees - ActBlue ck 3000179809	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ActBlue Technical Services</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2014
Mailing Address 366 Summer Street		Amount of Each Disbursement this Period 34.17 <b>Transaction ID : SB17.5328</b>
City Somerville State MA Zip Code 02144-3132	Purpose of Disbursement Bank fees - ActBlue ck 3000182173	
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. ActBlue Technical Services</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2014
Mailing Address 366 Summer Street		Amount of Each Disbursement this Period 1.98 <b>Transaction ID : SB17.5329</b>
City Somerville State MA Zip Code 02144-3132	Purpose of Disbursement Bank fees - ActBlue ck 3000181146	
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	62.40
<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 24 OF 29	
	<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)  
**VANDERSTELT FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Allied Media</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2014
Mailing Address 240 N Fenway Dr		Amount of Each Disbursement this Period 463.65 <b>Transaction ID : SB17.5321</b>
City Fenton State MI Zip Code 48430-2699	Purpose of Disbursement Rack cards Candidate Name Category/Type 006	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Charter Communications</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2014
Mailing Address 8413 Excelsior Dr Ste 120		Amount of Each Disbursement this Period 80.00 <b>Transaction ID : SB17.5331</b>
City Madison State WI Zip Code 53717-1970	Purpose of Disbursement Internet Service - Oct Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. City of Grand Rapids</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address 300 Monroe Avenue		Amount of Each Disbursement this Period 3.00 <b>Transaction ID : SB17.5326</b>
City Grand Rapids State MI Zip Code 49503	Purpose of Disbursement Parking Candidate Name Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	546.65
<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 25 OF 29	
	<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)  
**VANDERSTELT FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Michael Horecki</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2014
Mailing Address 1512 Bluebird Rd Apt 01		Amount of Each Disbursement this Period 1200.00 <b>Transaction ID : SB17.5332</b>
City Grand Haven	State MI	
Zip Code 49417-9021	Purpose of Disbursement Consulting	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Leppink's Food Center</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2014
Mailing Address 17717 174th Ave		Amount of Each Disbursement this Period 17.28 <b>Transaction ID : SB17.5320</b>
City Spring Lake	State MI	
Zip Code 49456-8879	Purpose of Disbursement Food & beverage for volunteer rally	Category/ Type 006
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Spring Lake Post Office</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2014
Mailing Address 211 W Exchange St		Amount of Each Disbursement this Period 49.00 <b>Transaction ID : SB17.5330</b>
City Spring Lake	State MI	
Zip Code 49456-5024	Purpose of Disbursement Postage	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1266.28
<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 26 OF 29	
	<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)  
**VANDERSTELT FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address PO Box 25505		Amount of Each Disbursement this Period 48.56
City Lehigh Valley	State PA	
Zip Code 18002-5505	Purpose of Disbursement Mobile phone	<b>Transaction ID : SB17.5323</b>
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. WIX.com</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2014
Mailing Address PO Box 40190		Amount of Each Disbursement this Period 19.90
City San Francisco	State CA	
Zip Code 94140	Purpose of Disbursement Website service - Oct	<b>Transaction ID : SB17.5327</b>
Candidate Name	006 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C.</b>		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	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	68.46
<b>TOTAL</b> This Period (last page this line number only).....	1943.79

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4318

**VANDERSTELT FOR CONGRESS**

LOAN SOURCE Full Name (Last, First, Middle Initial)

**[PERSONAL FUNDS]**

Election: 2014

**DEAN VANDERSTELT**

Primary

General

Other (specify) ▼

Mailing Address

17996 HATHAWAY COURT

City

State

ZIP Code

SPRING LAKE

MI

49456

Original Amount of Loan

1500.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

1500.00

**TERMS**

Date Incurred

01 / 30 / 2014

Date Due

/ / 09/30/14

Interest Rate

0.00 % (apr)

Secured:

Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

**SUBTOTALS** This Period This Page (optional)..... ▶

1500.00

**TOTALS** This Period (last page in this line only)..... ▶

**Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.**

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **VANDERSTELT FOR CONGRESS** Transaction ID : **SC/10.4319**

**LOAN SOURCE** Full Name (Last, First, Middle Initial) **DEAN VANDERSTELT** *[PERSONAL FUNDS]* Election: 2014  
 Primary  
 General  
 Other (specify) ▼

Mailing Address  
17996 HATHAWAY COURT

City State ZIP Code  
SPRING LAKE MI 49456

Original Amount of Loan 10000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 10000.00
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**TERMS**

Date Incurred M 02 / D 20 / Y 2014	Date Due M / D / Y 09/30/14	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....	▶	[ ] 10000.00
<b>TOTALS</b> This Period (last page in this line only).....	▶	[ ]

**Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.**

# SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **VANDERSTELT FOR CONGRESS** Transaction ID : **SC/10.4947**

**LOAN SOURCE** Full Name (Last, First, Middle Initial) **DEAN VANDERSTELT** *[PERSONAL FUNDS]* Election: 2014  
 Primary  
 General  
 Other (specify) ▼

Mailing Address  
 17996 HATHAWAY COURT

City State ZIP Code  
 SPRING LAKE MI 49456

Original Amount of Loan 1000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 1000.00
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**TERMS**

Date Incurred M 05 / D 14 / Y 2014	Date Due M / D / Y 09/30/14	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....	[ ] 1000.00
<b>TOTALS</b> This Period (last page in this line only).....	[ ] 12500.00

**Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.**