

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Moolenaar for Congress

ADDRESS (number and street)

5915 Eastman Avenue

Suite 100

Check if different than previously reported. (ACC)

Midland

MI

48640-6824

2. FEC IDENTIFICATION NUMBER ▼

C C00561530

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

MI

04

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

MM / DD / YYYY
11 / 04 / 2014

DD / YYYY

YYYY

in the State of

MI

(c) 30-Day POST-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

MM / DD / YYYY

DD / YYYY

YYYY

in the State of

5. Covering Period

MM / DD / YYYY
10 / 01 / 2014

DD / YYYY

YYYY

through

MM / DD / YYYY
10 / 15 / 2014

DD / YYYY

YYYY

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Gwen Lang

Signature of Treasurer Gwen Lang

[Electronically Filed]

Date

MM / DD / YYYY
10 / 23 / 2014

DD / YYYY

YYYY

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

Office Use Only

FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Moolenaar for Congress

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	49050	1022508.33
(b) Total Contribution Refunds (from Line 20(d))	0	7800
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	49050	1014708.33
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	26152.43	778941.62
(b) Total Offsets to Operating Expenditures (from Line 14).....	0	0
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	26152.43	778941.62
8. Cash on Hand at Close of Reporting Period (from Line 27).....	235766.71	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	232390.33	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Moolenaar for Congress

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	17925	594925.65
(ii) Unitemized.....	2075	39252.81
(iii) TOTAL of contributions from individuals ▶	20000	634178.46
(b) Political Party Committees.....	1300	6700
(c) Other Political Committees (such as PACs).....	27750	381629.87
(d) The Candidate.....	0	0
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	49050	1022508.33
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0	0
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0	0
(b) All Other Loans.....	0	0
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0	0
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0	0
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0	0
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	49050	1022508.33

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	26152.43	778941.62
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0	0
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0	0
(b) Of All Other Loans	0	0
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0	0
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0	7800
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0	7800
21. OTHER DISBURSEMENTS	0	0
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	26152.43	786741.62

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	212869.14
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	49050
25. SUBTOTAL (add Line 23 and Line 24).....	261919.14
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	26152.43
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	235766.71

**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 37
	<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	

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

A. Full Name (Last, First, Middle Initial)
Eric Brubaker

Mailing Address 5024 Foxpoint Circle

City Midland State MI Zip Code 48642-3384

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

Name of Employer Members First Credit Union Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 03 / 2014

Transaction ID : A-CF1533

Amount of Each Receipt this Period
500

Donation

B. Full Name (Last, First, Middle Initial)
George S. Dillon Jr.

Mailing Address 527 Hillcrest Road

City Midland State MI Zip Code 48640-3337

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

Name of Employer n/a Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **700**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 03 / 2014

Transaction ID : A-CF1515

Amount of Each Receipt this Period
200

Donation

C. Full Name (Last, First, Middle Initial)
Morrall M. Claramunt

Mailing Address 325 Mayer Road

City Frankenmuth State MI Zip Code 48734-9503

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

Name of Employer Frankenmuth Mutual Ins. Co. Occupation Insurance sales

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 07 / 2014

Transaction ID : A-CF1521

Amount of Each Receipt this Period
500

Donation

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

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

1200.00

**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 37
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

A. Full Name (Last, First, Middle Initial)
R. Matt Davis

Mailing Address 6110 Peachtree Circle

City Midland State MI Zip Code 48642-7041

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

Name of Employer The Dow Chemical Co. Occupation Corporate VP

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3500**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 09 / 2014

Transaction ID : A-CF1534

Amount of Each Receipt this Period
 1000

Donation

B. Full Name (Last, First, Middle Initial)
Florence G DeShano

Mailing Address 4339 Round Lake Road

City Gladwin State MI Zip Code 48624-9211

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

Name of Employer DeShano Construction Company Occupation Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

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

Transaction ID : A-CF1539

Amount of Each Receipt this Period
 500

Donation

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

Mailing Address 1329 N 9 Mile Road

City Sanford State MI Zip Code 48657-9613

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

Name of Employer Dow Chemical Employees CU Occupation President/CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 13 / 2014

Transaction ID : A-CF1586

Amount of Each Receipt this Period
 500

Donation

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

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

2000.00

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

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

FOR LINE NUMBER: PAGE 7 OF 37
(check only one)
 11a 12
 11b 13a
 11c 13b
 11d 14
 15

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

A. Full Name (Last, First, Middle Initial)
Lee A Johnston

Mailing Address 624 S Poseyville Road

City Midland State MI Zip Code 48640-8901

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

Name of Employer Johnston Contracting Inc. Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **4000**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 14 / 2014

Transaction ID : A-CF1576

Amount of Each Receipt this Period
 2000

Donation

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

Mailing Address 139 Ashman Street # 500

City Midland State MI Zip Code 48640-5103

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

Name of Employer Dow Chemical Employees CU Occupation Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **225**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 14 / 2014

Transaction ID : A-CF1588

Amount of Each Receipt this Period
 125

Donation

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

Mailing Address 1771 S Graham Road

City Saginaw State MI Zip Code 48609-9459

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

Name of Employer Rifkin Scrap Iron & Metal Co Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 14 / 2014

Transaction ID : A-CF1578

Amount of Each Receipt this Period
 250

Donation

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

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

2375.00

**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 37
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

A. Full Name (Last, First, Middle Initial)
Herbert L. Wybenga

Mailing Address 3609 Buck Drive

City Mt Pleasant State MI Zip Code 48858-8820

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

Name of Employer Boge Wybenga, CPA's Occupation CPA

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3000**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 14 / 2014

Transaction ID : A-CF1577

Amount of Each Receipt this Period
 1000

Donation

B. Full Name (Last, First, Middle Initial)
Michael D. Young Sr.

Mailing Address 6630 Maple Road

City Frankenmuth State MI Zip Code 48734-9587

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

Name of Employer Mike Young Buick GMC Occupation Auto Dealer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1750**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 14 / 2014

Transaction ID : A-CF1580

Amount of Each Receipt this Period
 500

Donation

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

Mailing Address 6505 4 Mile Road

City Bay City State MI Zip Code 48706-9097

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

Name of Employer Wildfire Credit Union Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1500**

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

Transaction ID : A-CF1601

Amount of Each Receipt this Period
 500

Donation

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 37
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

A. Full Name (Last, First, Middle Initial)
Glen D. Blystone

Mailing Address 606 Meadowbrook Drive

City Mt Pleasant State MI Zip Code 48858-8622

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

Name of Employer Blystone & Bailey, CPA's Occupation CPA

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

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

Transaction ID : A-CF1592

Amount of Each Receipt this Period
 1000

Donation

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

Mailing Address 19 W Hannum Boulevard

City Saginaw State MI Zip Code 48602-1938

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

Name of Employer n/a Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

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

Transaction ID : A-CF1603

Amount of Each Receipt this Period
 250

Donation

C. Full Name (Last, First, Middle Initial)
Lyle G. Davis Jr.

Mailing Address 9710 E Townline Road

City Frankenmuth State MI Zip Code 48734-8500

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

Name of Employer DML Management, Inc. Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

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

Transaction ID : A-CF1604

Amount of Each Receipt this Period
 1000

Donation

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

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 37
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

A. Full Name (Last, First, Middle Initial)
Tim R. Feagan

Mailing Address 4349 Sho Sho Nie Beach Road

City State Zip Code
Boyne City MI 49712-9241

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

Name of Employer Occupation
IHeartMedia Management

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		15		2014

Transaction ID : A-CF1585

Amount of Each Receipt this Period
250

Donation

B. Full Name (Last, First, Middle Initial)
Joanne J. Golden

Mailing Address PO Box 428

City State Zip Code
Mount Pleasant MI 48804-0428

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

Name of Employer Occupation
KMG Prestige Property Management

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		15		2014

Transaction ID : A-CF1593

Amount of Each Receipt this Period
1000

Donation

C. Full Name (Last, First, Middle Initial)
John R Harkins

Mailing Address 806 Ashland Drive

City State Zip Code
Mt Pleasant MI 48858-1210

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

Name of Employer Occupation
Lease Management, Inc. President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		15		2014

Transaction ID : A-CF1594

Amount of Each Receipt this Period
500

Donation

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

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

1750.00

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

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

FOR LINE NUMBER: PAGE 11 OF 37
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

A. Full Name (Last, First, Middle Initial)
Robert J. Long

Mailing Address **PO Box 365**

City **Mt Pleasant** State **MI** Zip Code **48804-0365**

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

Name of Employer **Summit Petroleum Corp** Occupation **President**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3600**

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

Transaction ID : A-CF1595

Amount of Each Receipt this Period
1000

Donation

B. Full Name (Last, First, Middle Initial)
Dianne C. Morey

Mailing Address **4570 W Remus Road**

City **Mt Pleasant** State **MI** Zip Code **48858-9672**

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

Name of Employer **Bandit Industries** Occupation **Business Owner**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2150**

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

Transaction ID : A-CF1596

Amount of Each Receipt this Period
1000

Donation

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

Mailing Address **7350 E River Road**

City **Mt Pleasant** State **MI** Zip Code **48858-9447**

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

Name of Employer **Morbark, Inc.** Occupation **President & CEO**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3500**

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

Transaction ID : A-CF1597

Amount of Each Receipt this Period
1000

Donation

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 37
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

A. Full Name (Last, First, Middle Initial)
William C. Myler, Jr.

Mailing Address 547 W Blue Grass Road

City State Zip Code
Mount Pleasant MI 48858-9566

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

Name of Employer Occupation
The Muskegon Dev. Company President & CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3600

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

Transaction ID : A-CF1598

Amount of Each Receipt this Period
 1000

Donation

B. Full Name (Last, First, Middle Initial)
Charles H. Sassone

Mailing Address 400 W Tuscola Street

City State Zip Code
Frankenmuth MI 48734-1551

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

Name of Employer Occupation
Delta Airlines Pilot

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

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

Transaction ID : A-CF1610

Amount of Each Receipt this Period
 500

Donation

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

Mailing Address 239 Block Street

City State Zip Code
Frankenmuth MI 48734-1158

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

Name of Employer Occupation
Frankenmuth Credit Union Financial Management

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

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

Transaction ID : A-CF1611

Amount of Each Receipt this Period
 500

Donation

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 37
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

A. Full Name (Last, First, Middle Initial)
Naomi R. Stark

Mailing Address 2887 Buckthorn Street

City Mt Pleasant State MI Zip Code 48858-7517

FEC ID number of contributing federal political committee.

Name of Employer Self-Employed Occupation Oil & Gas Exploration

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : A-CF1599

Amount of Each Receipt this Period

Donation

B. Full Name (Last, First, Middle Initial)
Dyck E. Van Koevering

Mailing Address 13640 Juniper Drive

City Dewitt State MI Zip Code 48820-9078

FEC ID number of contributing federal political committee.

Name of Employer Insurance Institute of MI Occupation General Counsel

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : A-CF1612

Amount of Each Receipt this Period

Donation

C. Full Name (Last, First, Middle Initial)
Robert G. Weisenburger

Mailing Address 1008 Highland Street

City Mt Pleasant State MI Zip Code 48858-3325

FEC ID number of contributing federal political committee.

Name of Employer General Financial Services Occupation Financial Advisor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : A-CF1600

Amount of Each Receipt this Period

Donation

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 14 OF 37
	<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)
Moolenaar for Congress

A. Full Name (Last, First, Middle Initial)
Gladwin County Republican Party

Mailing Address 5842 Arnold Lake Road

City Gladwin State MI Zip Code 48624-8908

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **800**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 07 / 2014

Transaction ID : A-CF1524

Amount of Each Receipt this Period
800

Donation

B. Full Name (Last, First, Middle Initial)
Osceola Co Republican Party

Mailing Address 3748 170th Avenue

City Hersey State MI Zip Code 49639-8783

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 14 / 2014

Transaction ID : A-CF1574

Amount of Each Receipt this Period
500

Donation

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).....

1300.00

1300.00

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

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

FOR LINE NUMBER: PAGE 15 OF 37
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

A. Full Name (Last, First, Middle Initial)
The Dow Chemical Company Employees PAC

Mailing Address 2030 Dow Center

City Midland State MI Zip Code 48674-1500

FEC ID number of contributing federal political committee. **C C00074096**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5000**

Date of Receipt
M M / D D / Y Y Y Y
10 / 02 / 2014

Transaction ID : A-CF1482

Amount of Each Receipt this Period
2500

Donation

B. Full Name (Last, First, Middle Initial)
American Hospital Association PAC

Mailing Address 325 7th Street NW Suite 700

City Washington State DC Zip Code 20004-2801

FEC ID number of contributing federal political committee. **C C00106146**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3000**

Date of Receipt
M M / D D / Y Y Y Y
10 / 07 / 2014

Transaction ID : A-CF1523

Amount of Each Receipt this Period
1000

Donation

C. Full Name (Last, First, Middle Initial)
Great Lakes Bay Regional Alliance Federal PAC

Mailing Address 5915 Eastman Avenue Suite 100

City Midland State MI Zip Code 48640-6824

FEC ID number of contributing federal political committee. **C C00566877**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
M M / D D / Y Y Y Y
10 / 07 / 2014

Transaction ID : A-CF1525

Amount of Each Receipt this Period
1000

Donation

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 37
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

A. Full Name (Last, First, Middle Initial)
Political Action Committee of the AAOS

Mailing Address 317 Massachusetts Avenue NE

City Washington State DC Zip Code 20002-5769

FEC ID number of contributing federal political committee. **C** C00343137

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 07 / 2014

Transaction ID : A-CF1526

Amount of Each Receipt this Period
2500

Donation

B. Full Name (Last, First, Middle Initial)
American Council of Engineering Companies PAC (ACEC/PAC)

Mailing Address 1015 15th Street NW

City Washington State DC Zip Code 20005-2605

FEC ID number of contributing federal political committee. **C** C00010868

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 08 / 2014

Transaction ID : A-CF1518

Amount of Each Receipt this Period
2000

Donation

C. Full Name (Last, First, Middle Initial)
Michigan Farm Bureau PAC

Mailing Address PO Box 30960

City Lansing State MI Zip Code 48909-8460

FEC ID number of contributing federal political committee. **C** C00096362

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5250

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 08 / 2014

Transaction ID : A-CF1519

Amount of Each Receipt this Period
250

Donation

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

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

4750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 37
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

A. Full Name (Last, First, Middle Initial)
Verizon Communications Inc. Good Government Club

Mailing Address 1300 I Street NW
Lower 4

City Washington State DC Zip Code 20005-3314

FEC ID number of contributing federal political committee. **C C00186288**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 08 / 2014

Transaction ID : A-CF1520

Amount of Each Receipt this Period
 2500

Donation

B. Full Name (Last, First, Middle Initial)
American Medical Association PAC

Mailing Address 25 Massachusetts Avenue NW
Suite 600

City Washington State DC Zip Code 20001-7400

FEC ID number of contributing federal political committee. **C C00000422**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **7500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 14 / 2014

Transaction ID : A-CF1570

Amount of Each Receipt this Period
 2500

Donation

C. Full Name (Last, First, Middle Initial)
American Society of Anesthesiologists PAC

Mailing Address 520 N Northwest Highway

City Park Ridge State IL Zip Code 60068-2538

FEC ID number of contributing federal political committee. **C C00255752**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **10000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 14 / 2014

Transaction ID : A-CF1571

Amount of Each Receipt this Period
 2500

Donation

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

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

7500.00

**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 37
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

A. Full Name (Last, First, Middle Initial)
American Society of Anesthesiologists PAC

Mailing Address 520 N Northwest Highway

City Park Ridge State IL Zip Code 60068-2538

FEC ID number of contributing federal political committee. **C C00255752**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000

Date of Receipt
 M M / D D / Y Y Y Y
10 / 14 / 2014

Transaction ID : A-CF1572

Amount of Each Receipt this Period
2500

Donation

B. Full Name (Last, First, Middle Initial)
Dealers Election Action Committee of The Nat'l Automobile Dealers Assn

Mailing Address 8400 Westpark Drive

City Mc Lean State VA Zip Code 22102-5116

FEC ID number of contributing federal political committee. **C C00040998**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000

Date of Receipt
 M M / D D / Y Y Y Y
10 / 14 / 2014

Transaction ID : A-CF1573

Amount of Each Receipt this Period
5000

Donation

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

Mailing Address 430 Ferdinand Day Drive

City Alexandria State VA Zip Code 22304-8701

FEC ID number of contributing federal political committee. **C C00541078**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

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

Transaction ID : A-CF1625

Amount of Each Receipt this Period
500

Donation

SUBTOTAL of Receipts This Page (optional).....	8000.00
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 19 OF 37	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

A. National Cable & Television Association PAC (NCTAPAC)

Full Name (Last, First, Middle Initial)
Mailing Address 25 Massachusetts Avenue NW
Suite 100
City Washington State DC Zip Code 20001-1434

FEC ID number of contributing federal political committee. **C** C00010082

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000

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

Transaction ID : A-CF1584

Amount of Each Receipt this Period
2000
Donation

B. Precision Metalforming Association Voice of The Industry Committee

Full Name (Last, First, Middle Initial)
Mailing Address 6363 Oak Tree Boulevard
City Independence State OH Zip Code 44131-2556

FEC ID number of contributing federal political committee. **C** C00082271

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

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

Transaction ID : A-CF1583

Amount of Each Receipt this Period
1000
Donation

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).....

3000.00

27750.00

**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 20 OF 37	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

Full Name (Last, First, Middle Initial) A. Midland Postmaster		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2014
Mailing Address 2900 Rodd Street		Amount of Each Disbursement this Period 245 Transaction ID : B-E-1557
City Midland State MI Zip Code 48640-4483	Purpose of Disbursement Postage Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Sam's Club		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2014
Mailing Address 5656 Bay Road		Amount of Each Disbursement this Period 799.34 Transaction ID : B-E-1542
City Saginaw State MI Zip Code 48604-2510	Purpose of Disbursement Parade supplies Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. United States Treasury		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2014
Mailing Address 1500 Pennsylvania Avenue NW		Amount of Each Disbursement this Period 1192.94 Transaction ID : B-E-1558
City Washington State DC Zip Code 20220-0001	Purpose of Disbursement Payroll taxes Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2237.28
TOTAL This Period (last page this line number only).....	

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

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

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

Full Name (Last, First, Middle Initial) A. PayPal		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2014
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 30 Transaction ID : B-E-1632
City San Jose State CA Zip Code 95125-5905	Purpose of Disbursement Credit card processing fee 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. A & A Storage		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2014
Mailing Address PO Box 55		Amount of Each Disbursement this Period 50 Transaction ID : B-E-1562
City Midland State MI Zip Code 48640-0055	Purpose of Disbursement Rent 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Cardmember Service		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2014
Mailing Address PO Box 94014		Amount of Each Disbursement this Period 5168.63 Transaction ID : B-E-1543
City Palatine State IL Zip Code 60094-4014	Purpose of Disbursement Credit card payment - itemized 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5248.63
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 37			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

Full Name (Last, First, Middle Initial) A. H Hotel		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2014
Mailing Address 111 W Main Street		Amount of Each Disbursement this Period 5168.63
City Midland	State MI	
Zip Code 48640-5155	Purpose of Disbursement Catering & Room fee for event	Transaction ID : B-S-139
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Cardmember Service(10/07/14)
State: District:		

Full Name (Last, First, Middle Initial) B. Cardmember Service		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2014
Mailing Address PO Box 94014		Amount of Each Disbursement this Period 88.53
City Palatine	State IL	
Zip Code 60094-4014	Purpose of Disbursement Credit card payment - itemized	Transaction ID : B-E-1544
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

Full Name (Last, First, Middle Initial) c. Staples		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2014
Mailing Address 1517 Joe Mann Boulevard		Amount of Each Disbursement this Period 68.66
City Midland	State MI	
Zip Code 48642-8902	Purpose of Disbursement Office supplies	Transaction ID : B-S-135
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Subitemization of Cardmember Service(10/07/14)
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	88.53
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 23 OF 37	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

Full Name (Last, First, Middle Initial) A. Pizza Sam's		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2014
Mailing Address 102 W Main Street		Amount of Each Disbursement this Period 19.87
City Midland State MI Zip Code 48640-5156	Purpose of Disbursement Business meeting meal Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Candidate Name	Transaction ID : B-S-136
State: District:		[MEMO ITEM] Subitemization of Cardmember Service(10/07/14)

Full Name (Last, First, Middle Initial) B. GSL Solutions, Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2014
Mailing Address 1411 N West Shore Boulevard Suite 204		Amount of Each Disbursement this Period 665
City Tampa State FL Zip Code 33607-4529	Purpose of Disbursement Website hosting & support, email distribution Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Candidate Name	Transaction ID : B-E-1547
State: District:		

Full Name (Last, First, Middle Initial) c. GSL Solutions, Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2014
Mailing Address 1411 N West Shore Boulevard Suite 204		Amount of Each Disbursement this Period 690
City Tampa State FL Zip Code 33607-4529	Purpose of Disbursement Website hosting & support, email distribution Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Candidate Name	Transaction ID : B-E-1568
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1355.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 37			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

Full Name (Last, First, Middle Initial) A. Midland Postmaster			Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2014	
Mailing Address 2900 Rodd Street			Amount of Each Disbursement this Period 98	
City Midland	State MI	Zip Code 48640-4483	Transaction ID : B-E-1561	
Purpose of Disbursement Postage		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. QRP, Inc.			Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2014	
Mailing Address 94 Ashman Circle			Amount of Each Disbursement this Period 1391.98	
City Midland	State MI	Zip Code 48640-4627	Transaction ID : B-E-1545	
Purpose of Disbursement Supplies, postage -itemized		Category/ Type 001	Original vendors exceeding reporting threshold itemized as memo transactions.	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) c. Midland Postmaster			Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2014	
Mailing Address 2900 Rodd Street			Amount of Each Disbursement this Period 91.63	
City Midland	State MI	Zip Code 48640-4483	Transaction ID : B-S-140	
Purpose of Disbursement Postage		Category/ Type 001	[MEMO ITEM] Subitemization of QRP, Inc.(10/07/14)	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	1489.98
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 37			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

Full Name (Last, First, Middle Initial) A. QRP, Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2014
Mailing Address 94 Ashman Circle		Amount of Each Disbursement this Period 1315.03 Transaction ID : B-E-1546
City Midland	State MI	
Zip Code 48640-4627	Purpose of Disbursement T-shirts, Invitations, Magnets, Cards	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. QRP, Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2014
Mailing Address 94 Ashman Circle		Amount of Each Disbursement this Period 1741.45 Transaction ID : B-E-1549
City Midland	State MI	
Zip Code 48640-4627	Purpose of Disbursement Stationary, envelopes, note cards	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. State Of Michigan- Dept of Treasury		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2014
Mailing Address Dept 77003		Amount of Each Disbursement this Period 367.29 Transaction ID : B-E-1564
City Detroit	State MI	
Zip Code 48277-0001	Purpose of Disbursement Michigan withholding tax	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	3423.77
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 26 OF 37	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

Full Name (Last, First, Middle Initial) A. The Catalyst Group		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2014
Mailing Address 600 Pennsylvania Avenue SE Suite 330		Amount of Each Disbursement this Period 438.34
City Washington State DC Zip Code 20003-6300	Purpose of Disbursement Food & beverage for event - itemized 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : B-E-1563 Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

Full Name (Last, First, Middle Initial) B. Beltway Catering DBA Bon Vivant Catering		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2014
Mailing Address 1251 Pine Hill Road		Amount of Each Disbursement this Period 359.34
City McLean State VA Zip Code 22101-2906	Purpose of Disbursement Catering for event 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : B-S-133 [MEMO ITEM] Subitemization of The Catalyst Group(10/07/14)
State: District:		

Full Name (Last, First, Middle Initial) c. The Weekly		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2014
Mailing Address PO Box 11		Amount of Each Disbursement this Period 352
City Ovid State MI Zip Code 48866-0011	Purpose of Disbursement Newspaper ad 004 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : B-E-1548
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	790.34
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 27 OF 37	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
Moolenaar for Congress

Full Name (Last, First, Middle Initial) A. Sarah Brooks		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2014
Mailing Address 210 Maple View Court		Amount of Each Disbursement this Period 660.35 Transaction ID : B-E-1567
City Hemlock	State MI	
Zip Code 48626-8455	Purpose of Disbursement Mileage, expenses - itemized	Original vendors exceeding reporting threshold itemized as memo transactions.
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2014
Mailing Address PO Box 15062		Amount of Each Disbursement this Period 73.1 Transaction ID : B-S-138
City Albany	State NY	
Zip Code 12212-5062	Purpose of Disbursement Cell phones, wireless data acc	[MEMO ITEM] Subitemization of Sarah Brooks(10/07/14)
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. John Moolenaar		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2014
Mailing Address 4410 Linden Drive		Amount of Each Disbursement this Period 312.3 Transaction ID : B-E-1626
City Midland	State MI	
Zip Code 48640-2614	Purpose of Disbursement Mileage	
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	972.65
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 37			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

NAME OF COMMITTEE (In Full)
Moolenaar for Congress

Full Name (Last, First, Middle Initial) A. Gladwin County Record		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2014
Mailing Address 700 E Cedar Avenue		Amount of Each Disbursement this Period 271.6 Transaction ID : B-E-1627
City Gladwin State MI Zip Code 48624-2218	Purpose of Disbursement Newspaper Ads Candidate Name Category/Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. PayPal		Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2014
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 47.75 Transaction ID : B-E-1537
City San Jose State CA Zip Code 95125-5905	Purpose of Disbursement Credit card processing fees Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. LCM Strategies		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2014
Mailing Address PO Box 158513		Amount of Each Disbursement this Period 3000 Transaction ID : B-E-1619
City Nashville State TN Zip Code 37215-8513	Purpose of Disbursement Online Marketing & Management Candidate Name Category/Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	3319.35
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 29 OF 37	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

Full Name (Last, First, Middle Initial) A. PayPal		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2014
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 26.25
City San Jose State CA Zip Code 95125-5905	Purpose of Disbursement Credit card processing fees	
Candidate Name	Category/Type 001	Transaction ID : B-E-1591
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Strategic National LLC		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2014
Mailing Address 190 Monroe Avenue NW Suite 500		Amount of Each Disbursement this Period 500
City Grand Rapids State MI Zip Code 49503-2628	Purpose of Disbursement Political consulting	
Candidate Name	Category/Type 001	Transaction ID : B-E-1569
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Strategic National LLC		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2014
Mailing Address 190 Monroe Avenue NW Suite 500		Amount of Each Disbursement this Period 500
City Grand Rapids State MI Zip Code 49503-2628	Purpose of Disbursement Political Consulting	
Candidate Name	Category/Type 001	Transaction ID : B-E-1618
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1026.25
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 30 OF 37	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

Full Name (Last, First, Middle Initial) A. John D Boothroyd		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2014
Mailing Address 5104 Oakridge Drive		Amount of Each Disbursement this Period 855.12 Transaction ID : B-E-1553
City Midland	State MI	
Zip Code 48640-1974	Purpose of Disbursement Wages	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. John D Boothroyd		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2014
Mailing Address 5104 Oakridge Drive		Amount of Each Disbursement this Period 827.55 Transaction ID : B-E-1636
City Midland	State MI	
Zip Code 48640-1974	Purpose of Disbursement Mileage	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Sarah Brooks		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2014
Mailing Address 210 Maple View Court		Amount of Each Disbursement this Period 1492.96 Transaction ID : B-E-1554
City Hemlock	State MI	
Zip Code 48626-8455	Purpose of Disbursement Wages	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	3175.63
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 37			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

Full Name (Last, First, Middle Initial) A. Adam Kroczaleski		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2014
Mailing Address 5082 Lincoln Road		Amount of Each Disbursement this Period 1003.33
City Standish State MI Zip Code 48658-9437	Purpose of Disbursement Wages Candidate Name Category/Type 001	Transaction ID : B-E-1552
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. Adam Kroczaleski		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2014
Mailing Address 5082 Lincoln Road		Amount of Each Disbursement this Period 597.3
City Standish State MI Zip Code 48658-9437	Purpose of Disbursement Mileage, expense - itemized Candidate Name Category/Type 002	Transaction ID : B-E-1638
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:	Original vendors exceeding reporting threshold itemized as memo transactions.	

Full Name (Last, First, Middle Initial) c. John Moolenaar		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2014
Mailing Address 4410 Linden Drive		Amount of Each Disbursement this Period 443.7
City Midland State MI Zip Code 48640-2614	Purpose of Disbursement Mileage Candidate Name Category/Type 002	Transaction ID : B-E-1633
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) State: District:		

SUBTOTAL of Disbursements This Page (optional)	2044.33
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 32 OF 37	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

Full Name (Last, First, Middle Initial) A. Stephen R Walker		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2014
Mailing Address 5806 Woodbridge Lane		Amount of Each Disbursement this Period 659.29 Transaction ID : B-E-1555
City Midland State MI Zip Code 48640-2124	Purpose of Disbursement Wages Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B.		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 State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

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

SUBTOTAL of Disbursements This Page (optional).....	659.29
TOTAL This Period (last page this line number only).....	25831.03

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

Moolenaar for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Stamas Properties

Nature of Debt (Purpose):
Office space rent

Mailing Address Main Street

City State Zip Code
Midland MI 48642

Outstanding Balance Beginning This Period

600

Transaction ID : SD10-DEBT1380

Amount Incurred This Period

0

Payment This Period

0

Outstanding Balance at Close of This Period

600

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
QRP, Inc.

Nature of Debt (Purpose):
Stationary, envelopes, note cards

Mailing Address 94 Ashman Circle

City State Zip Code
Midland MI 48640-4627

Outstanding Balance Beginning This Period

4448.46

Transaction ID : SD10-DEBT1549

Amount Incurred This Period

0

Payment This Period

4448.46

Outstanding Balance at Close of This Period

0

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
United States Treasury

Nature of Debt (Purpose):
Payroll taxes

Mailing Address 1500 Pennsylvania Avenue NW

City State Zip Code
Washington DC 20220-0001

Outstanding Balance Beginning This Period

0

Transaction ID : SD10-DEBT1628

Amount Incurred This Period

1210.42

Payment This Period

0

Outstanding Balance at Close of This Period

1210.42

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

1810.42

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 Andrews Hooper Pavlik, PLC	Nature of Debt (Purpose): Accounting services
Mailing Address 5915 Eastman Avenue Suite 100	
City State Zip Code Midland MI 48640-6824	

Outstanding Balance Beginning This Period 11714	Transaction ID : SD10-DEBT1531	
Amount Incurred This Period 0	Payment This Period 0	Outstanding Balance at Close of This Period 11714

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Victory Phones	Nature of Debt (Purpose): Telephone Town Hall
Mailing Address 190 Monroe Avenue NW Suite 5	
City State Zip Code Grand Rapids MI 49503-2628	

Outstanding Balance Beginning This Period 37790.31	Transaction ID : SD10-DEBT1374	
Amount Incurred This Period 0	Payment This Period 0	Outstanding Balance at Close of This Period 37790.31

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Grassroots Midwest LLC	Nature of Debt (Purpose): Fundraising services
Mailing Address PO Box 12157	
City State Zip Code Lansing MI 48901-2157	

Outstanding Balance Beginning This Period 3025	Transaction ID : SD10-DEBT1367	
Amount Incurred This Period 0	Payment This Period 0	Outstanding Balance at Close of This Period 3025

1) SUBTOTALS This Period This Page (optional)	52529.31
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

Moolenaar for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
GSL Solutions, Inc.

Nature of Debt (Purpose):
Website hosting & support, email distribution

Mailing Address 1411 N West Shore Boulevard
Suite 204

City State Zip Code
Tampa FL 33607-4529

Outstanding Balance Beginning This Period

665

Transaction ID : SD10-DEBT1547

Amount Incurred This Period

0

Payment This Period

665

Outstanding Balance at Close of This Period

0

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
The Weekly

Nature of Debt (Purpose):
Newspaper ad

Mailing Address PO Box 11

City State Zip Code
Ovid MI 48866-0011

Outstanding Balance Beginning This Period

352

Transaction ID : SD10-DEBT1548

Amount Incurred This Period

0

Payment This Period

352

Outstanding Balance at Close of This Period

0

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

Nature of Debt (Purpose):
Political consulting

Mailing Address 190 Monroe Avenue NW
Suite 500

City State Zip Code
Grand Rapids MI 49503-2628

Outstanding Balance Beginning This Period

99511.75

Transaction ID : SD10-DEBT1635

Amount Incurred This Period

25208.4

Payment This Period

500

Outstanding Balance at Close of This Period

124220.15

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

124220.15

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER:
(check only one)

9
 10

NAME OF COMMITTEE (In Full)

Moolenaar for Congress

<p>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Victory Phones Live</p> <p>Mailing Address 2900 Wilson Avenue SW Suite 101</p> <p>City State Zip Code Grandville MI 49418-1286</p>	<p>Nature of Debt (Purpose): Phone calls to voters</p>
---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	------------------------------------------------------------

<p>Outstanding Balance Beginning This Period <input style="width:100%;" type="text" value="43742.5"/></p> <p>Amount Incurred This Period <input style="width:100%;" type="text" value="0"/></p>	<p>Payment This Period <input style="width:100%;" type="text" value="0"/></p>	<p>Transaction ID : SD10-DEBT1370</p> <p>Outstanding Balance at Close of This Period <input style="width:100%;" type="text" value="43742.5"/></p>
---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-----------------------------------------------------------------------------------	-------------------------------------------------------------------------------------------------------------------------------------------------------

<p>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Victory Processing LLC</p> <p>Mailing Address 190 Monroe Avenue NW Suite 500</p> <p>City State Zip Code Grand Rapids MI 49503-2628</p>	<p>Nature of Debt (Purpose): Data/List for Primary</p>
-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	------------------------------------------------------------

<p>Outstanding Balance Beginning This Period <input style="width:100%;" type="text" value="1060"/></p> <p>Amount Incurred This Period <input style="width:100%;" type="text" value="0"/></p>	<p>Payment This Period <input style="width:100%;" type="text" value="0"/></p>	<p>Transaction ID : SD10-DEBT1375</p> <p>Outstanding Balance at Close of This Period <input style="width:100%;" type="text" value="1060"/></p>
------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-----------------------------------------------------------------------------------	----------------------------------------------------------------------------------------------------------------------------------------------------

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

<p>Outstanding Balance Beginning This Period <input style="width:100%;" type="text" value="5257.16"/></p> <p>Amount Incurred This Period <input style="width:100%;" type="text" value="4027.95"/></p>	<p>Payment This Period <input style="width:100%;" type="text" value="5257.16"/></p>	<p>Transaction ID : SD10-DEBT1631</p> <p>Outstanding Balance at Close of This Period <input style="width:100%;" type="text" value="4027.95"/></p>
---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-----------------------------------------------------------------------------------------	-------------------------------------------------------------------------------------------------------------------------------------------------------

<p>1) SUBTOTALS This Period This Page (optional)</p>	<p><input style="width:100%;" type="text" value="48830.45"/></p>
<p>2) TOTALS This Period (last page this line number only)</p>	<p><input style="width:100%;" type="text"/></p>
<p>3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....</p>	<p><input style="width:100%;" type="text"/></p>
<p>4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶</p>	<p><input style="width:100%;" type="text"/></p>

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 Haley O'Neill, LLC		Nature of Debt (Purpose): Research Report
Mailing Address PO Box 16015		
City Alexandria	State VA Zip Code 22302-8015	

Outstanding Balance Beginning This Period <input type="text" value="0"/>		Transaction ID : SD10-DEBT1629	
Amount Incurred This Period <input type="text" value="5000"/>	Payment This Period <input type="text" value="0"/>	Outstanding Balance at Close of This Period <input type="text" value="5000"/>	

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

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

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

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

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="5000.00"/>
2) TOTALS This Period (last page this line number only)	<input type="text" value="232390.33"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="232390.33"/>