48-HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

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

 NAME OF COMMITTEE IN FULL Moolenaar for Co 	ongress							
ADDRESS (number and street) 59	915 Eastman Avenue							
	uite 100							
CITY		STATE		ZIP COI	DE			
Midland MI				48640-6824				
2. NAME OF CANDIDATE Moolenaar, John, , Mr.,			3. OFFICE SO	3. OFFICE SOUGHT (State and District) House MI 04			4. FEC IDENTIFICATION NUMBER C00561530	
			House					
5. IS THIS AN AMENDMENT?	NO, THIS IS A NEV	V FILING	YES, IT AME	NDS THE	NOTICE FILE	ED ON	/	/
A. FULL NAME			Name of Emp				Date (month,	Amount
Huizenga, J.C., , ,			Huizenga M	Huizenga Manufacturing Group			day, year)	
MAILING ADDRESS 3755 36th Street SE Suite 100	Transaction	Transaction ID : 6A7F2B3D204A54DB			10/31/2016	2700.00		
CITY	STATE	ZIP CODE	Occupation					
Crand Banida	MI	40540 044		·				
Grand Rapids	IVII	49512-314	_				Data (month	Amount
B. FULL NAME Wirt, Dena, , Ms.,			·	Name of Employer DJW Design			Date (month, day, year)	Amount
MAILING ADDRESS				_			10/31/2016	1000.00
196 Athlone Beach			Transaction	ID : 6B	FFDA74B	CAE7478		
CITY	STATE	ZIP CODE	Occupation					
Bay City	MI	48706-117	g Business O	Business Owner				
C. FULL NAME		10.00	Name of Emp	lover			Date (month,	Amount
Rogers, Gregory, H	ł., Mr.,		MidMichiga				day, year)	
MAILING ADDRESS 5903 Wildflower Circle			Transaction	Transaction ID: 6DECA6539AF67429			10/31/2016	1000.00
CITY	STATE	ZIP CODE	Occupation					
Midland	MI	48642-718	6 Manageme	Management				
D. FULL NAME	1411	100 12 1 10	- manageme				Date (month,	Amount
VanderKelen, Joseph, M., Mr.,				Name of Employer SMI Snowmakers			day, year)	
							10/31/2016	1000.00
MAILING ADDRESS 5610 Pondview Drive								1000.00
OITY	OTATE	ZIP CODE	Transaction	ID : 66	96695F6B	3EE4D5E		
CITY Midland	STATE	48640-741	13	Occupation President				
	""	10010 71	President					
E. FULL NAME CURRY, William, L., Mr., MAILING ADDRESS 4405 Arbor Drive			Name of Emp	Name of Employer The Dow Chemical Company Transaction ID: 612B691522AF04959			Date (month, day, year)	Amount
			The bow of				,,	
							10/31/2016	1000.00
			Transaction					
CITY	STATE	ZIP CODE	Occupation	Occupation				
Midland	MI	48640-267	1 Attorney	Attorney				
SIGNATURE (optional) Lang, Gwen, , ,			[Electronically	Filed]	DATE 11/01/20	16	Federal El 999 E Street, NV	nformation contact: ection Commission V, Washington, DC 20463 -9530, Local 202-694-1100



Any information copied from reports and statements filed under the Federal Election Campaign Act may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes other than using the name and address of any political committee to solicit contributions from such committee.



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NAME OF COMMITTEE IN FULL		1	
Moolenaar for Congress			
ADDRESS (number and street) 5915 Eastman Avenue			
Suite 100			
CITY, STATE, and ZIP CODE			
Midland	MI 48640-6824	continuatio	on page
2. NAME OF CANDIDATE	3. OFFICE SOUGHT (State and District)	4. FEC IDENTIFICATION NUMBER	
Moolenaar, John, , Mr.,	House MI 04	C00561530	
5. ISTHIS AN AMENDMENT? X NO, THIS IS A NEW FILING	YES, IT AMENDS THE NOTICE FILED ON	/	/
A. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month,	Amount
Jennings, Peter, M., Mr.,	The Dow Chemical Company	day, year)	
		10/31/2016	1000.00
PO Box 1965			
	Transaction ID: 61B0D4602A81F4A7	7A7A	
Midland MI 48641-1965	Occupation		
B. FULL NAME, MAILING ADDRESS AND ZIP CODE	President - Japan & Korea	Date (month,	Amount
,	Name of Employer	day, year)	Amount
American Medical Association PAC		10/01/0010	
25 Massachusetts Avenue NW		10/31/2016	3000.00
Suite 600	Transaction ID: 683022981606C4C46	8E3	
	Occupation		
Washington DC 20001-7400			
C. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month,	Amount
		day, year)	
	Occupation		
		Data (month	Amount
D. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month, day, year)	Amount
	Occupation	-	
	Cocapation		
E. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month,	Amount
•		day, year)	
	Occupation	1	