

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) P.O. 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) CITY STATE ZIP CODE STATE DISTRICT 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 08 / 05 / 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 07 / 01 / 2014 through 07 / 16 / 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 Mrs. Deanna Taylor

Signature of Treasurer Mrs. Deanna Taylor [Electronically Filed] Date 07 / 25 / 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: M M / D D / Y Y Y Y 07 / 01 / 2014 To: M M / D D / Y Y Y Y 07 / 16 / 2014

	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))....	615.00	21265.75
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	615.00	21265.75
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	2221.17	27617.42
(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)).....	2221.17	27617.42
8. Cash on Hand at Close of Reporting Period (from Line 27).....	6149.58	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY 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).....	615.00	12453.63
(ii) Unitemized.....	0.00	0.00
(iii) TOTAL of contributions from individuals ▶	615.00	12453.63
(b) Political Party Committees.....	0.00	8562.12
(c) Other Political Committees (such as PACs).....	0.00	250.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	615.00	21265.75
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	12500.00
(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	1.25
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	615.00	33767.00

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	2221.17	27617.42
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	2221.17	27617.42

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	7755.75
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	615.00
25. SUBTOTAL (add Line 23 and Line 24).....	8370.75
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	2221.17
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	6149.58

**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 17
	<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)
Vanderstel for Congress

A. Full Name (Last, First, Middle Initial)
John Bell

Mailing Address 2887 Windswept Ct

City: Holland State: MI Zip Code: 49424-7917

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

Name of Employer: Retired Occupation: Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 50.00

Date of Receipt: 07 / 15 / 2014

Transaction ID : VNJ27CYABD1

Amount of Each Receipt this Period: 50.00

B. Full Name (Last, First, Middle Initial)
Ryan Bennett

Mailing Address 1538 White Pine Ct

City: Twin Lake State: MI Zip Code: 49457-9090

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: 07 / 09 / 2014

Transaction ID : VNJ27CYXR56

Amount of Each Receipt this Period: 25.00

C. Full Name (Last, First, Middle Initial)
Margaret E Haynes

Mailing Address 5150 Brookwood Cir

City: Montague State: MI Zip Code: 49437-1001

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: 100.00

Date of Receipt: 07 / 09 / 2014

Transaction ID : VNJ27CYXRF5

Amount of Each Receipt this Period: 100.00

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

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

175.00

**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 17
	<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)
Sarah Howard

Mailing Address 939 Franklin Ave

City Grand Haven State MI Zip Code 49417-1613

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

Name of Employer None Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 03 / 2014

Transaction ID : VNJ27CX0YW0

Amount of Each Receipt this Period
 100.00

B. Full Name (Last, First, Middle Initial)
Catherine Manigold

Mailing Address 139 Prospect Ave NE Apt 4

City Grand Rapids State MI Zip Code 49503-3378

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

Name of Employer Perrigo Occupation Sales

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 09 / 2014

Transaction ID : VNJ27CXMG64

Amount of Each Receipt this Period
 200.00

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

Mailing Address 6635 Zellar Rd

City Whitehall State MI Zip Code 49461-9772

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

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 09 / 2014

Transaction ID : VNJ27CYXRA5

Amount of Each Receipt this Period
 25.00

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

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

325.00

**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 17
	<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)
Vanderstel for Congress

A. Full Name (Last, First, Middle Initial)
David Ridders

Mailing Address 9254 Cook St

City Montague State MI Zip Code 49437-1007

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
20.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 09 / 2014

Transaction ID : VNJ27CYXS59

Amount of Each Receipt this Period
20.00

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

Mailing Address 5555 Miller St

City Muskegon State MI Zip Code 49442-1832

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

Name of Employer Information Requested Occupation Information Requested
N/A Ret

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
100.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 15 / 2014

Transaction ID : VNJ27CYXQD8

Amount of Each Receipt this Period
25.00

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

Mailing Address 301 Aue Rd

City Norton Shores State MI Zip Code 49441-4907

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

Name of Employer Information Requested Occupation Information Requested
Not employed Not employed

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

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

Transaction ID : VNJ27CYAB09

Amount of Each Receipt this Period
50.00

Earmarked through ActBlue

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

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

95.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : VNJ27CYAB09

Checked received 07/22/14 ActBlue PO Box 382110 Cambridge, MA 02238-2110

Form/Schedule:

Transaction ID:

**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 17
	<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)
Hubert P. Weller

Mailing Address 87 W 14th St

City State Zip Code
Holland MI 49423-3304

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

Name of Employer Occupation
Not employed Not employed

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 11 2014

Transaction ID : VNJ27CYAB58

Amount of Each Receipt this Period
20.00

Earmarked through ActBlue

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 M / D 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 M / D 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).....

20.00

615.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : VNJ27CYAB58

Checked received 07/22/14 ActBlue PO Box 382110 Cambridge, MA 02238-2110

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 17			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Vanderstel for Congress

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services			Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2014	
Mailing Address PO Box			Amount of Each Disbursement this Period 2.77	
City Cambridge	State MA	Zip Code 02238	Transaction ID : VNH2Z9TB4Z3	
Purpose of Disbursement Fundraising		Category/ Type 003	ActBlue contribution fees	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Michael Horecki			Date of Disbursement M M / D D / Y Y Y Y 07 / 12 / 2014	
Mailing Address 1512 Bluebird Rd Apt 01			Amount of Each Disbursement this Period 1200.00	
City Grand Haven	State MI	Zip Code 49417-9021	Transaction ID : VNH2Z9TB4Y6	
Purpose of Disbursement Consulting - Campaign Consulting		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) c. Michael Horecki			Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2014	
Mailing Address 1512 Bluebird Rd Apt 01			Amount of Each Disbursement this Period 251.34	
City Grand Haven	State MI	Zip Code 49417-9021	Transaction ID : VNH2Z9TG2N0	
Purpose of Disbursement Consulting/Campaign Consulting		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	1454.11
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 12 OF 17	
	<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)
Vanderstel for Congress

Full Name (Last, First, Middle Initial) A. Ottawa Co. Democratic Party		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address PO Box 1792		Amount of Each Disbursement this Period 50.00 Transaction ID : VNH2Z9TB543
City Holland	State MI	
Zip Code 49422-1792	Purpose of Disbursement Rental insurance	Office rental insurance
Candidate Name Ottawa Co. Democratic Party	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Richard App Gallery		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address 910 Cherry St SE		Amount of Each Disbursement this Period 300.00 Transaction ID : VNH2Z9TG372
City Grand Rapids	State MI	
Zip Code 49506-1472	Purpose of Disbursement Room rental	Fundraising event
Candidate Name	Category/ Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Sage Payment Solutions		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2014
Mailing Address 1750 Old Meadow Rd Ste 300		Amount of Each Disbursement this Period 65.26 Transaction ID : VNH2Z9TB501
City McLean	State VA	
Zip Code 22102-4304	Purpose of Disbursement Bankcard fees	
Candidate Name	Category/ Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	415.26
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 13 OF 17			
	<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)
Vanderstel for Congress

Full Name (Last, First, Middle Initial) A. Sam's Club			Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2014
Mailing Address 1707 E Sherman Blvd			Amount of Each Disbursement this Period 44.88
City Muskegon	State MI	Zip Code 49444-1862	
Purpose of Disbursement Food		Candidate Name	Transaction ID : VNH2Z9TB577
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Candy for parade	
State:	District:		

Full Name (Last, First, Middle Initial) B. Sam's Club			Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2014
Mailing Address 1707 E Sherman Blvd			Amount of Each Disbursement this Period 14.96
City Muskegon	State MI	Zip Code 49444-1862	
Purpose of Disbursement Food		Candidate Name	Transaction ID : VNH2Z9TB585
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Candy for parade	
State:	District:		

Full Name (Last, First, Middle Initial) c. Sam's Club			Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2014
Mailing Address 1707 E Sherman Blvd			Amount of Each Disbursement this Period 23.40
City Muskegon	State MI	Zip Code 49444-1862	
Purpose of Disbursement Stationery		Candidate Name	Transaction ID : VNH2Z9TG398
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Postcards	
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....	83.24
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 14 OF 17	
	<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)
Vanderstel for Congress

Full Name (Last, First, Middle Initial) A. Spring Lake Post Office		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address 211 W Exchange St		Amount of Each Disbursement this Period 170.00
City Spring Lake	State MI	
Zip Code 49456-5024	Purpose of Disbursement Postage	Transaction ID : VNH2Z9TG364
Candidate Name	006 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	For mailings
State: District:		

Full Name (Last, First, Middle Initial) B. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 07 / 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 service	Transaction ID : VNH2Z9TG356
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	July phone service - event planner
State: District:		

Full Name (Last, First, Middle Initial) c. Wyoming Parks & Recreation		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address 1155 28th St SW		Amount of Each Disbursement this Period 50.00
City Wyoming	State MI	
Zip Code 49509-2825	Purpose of Disbursement Room rental	Transaction ID : VNH2Z9TG380
Candidate Name	007 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Town Hall meeting
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	268.56
TOTAL This Period (last page this line number only).....	2221.17

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)
Vanderstelt for Congress

Transaction ID : VNJ27CDGEP9L

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

Dean Vanderstelt

[PERSONAL FUNDS]

Election: 2014

Primary
 General
 Other (specify) ▼

Mailing Address
17996 Hathaway Ct

City State ZIP Code
Spring Lake MI 49456-8600

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
1500.00 0.00 1500.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 01 / D 30 / Y 2014 M 09 / D 30 / Y 2014 none % (apr) 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 : **VNJ27CDT7F8L**

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

Mailing Address
17996 Hathaway Ct

City State ZIP Code
Spring Lake MI 49456-8600

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 09 / D 30 / Y 2014	Interest Rate none % (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: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional).....	<input type="text" value="10000.00"/>
TOTALS This Period (last page in this line only).....	<input type="text"/>

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) Transaction ID : VNJ27CQZPK3L
Vanderstelt for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial) Dean Vanderstelt	[PERSONAL FUNDS]	Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 17996 Hathaway Ct		

City	State	ZIP Code
Spring Lake	MI	49456-8600

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

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 05 / D 14 / Y 2014	M 09 / D 30 / Y 2014	none % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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: <input style="width: 100%;" type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>

SUBTOTALS This Period This Page (optional).....	<input style="width: 100%;" type="text" value="1000.00"/>
TOTALS This Period (last page in this line only).....	<input style="width: 100%;" type="text" value="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.