

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name
VANDERSTELT FOR CONGRESS

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	0.00	1057.88
(b) Total Contribution Refunds (from Line 20(d))	0.00	10.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	0.00	1047.88
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	14.97	1870.43
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	50.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	14.97	1820.43
8. Cash on Hand at Close of Reporting Period (from Line 27).....	4512.00	
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).....	0.00	880.34
(ii) Unitemized.....	0.00	0.00
(iii) TOTAL of contributions from individuals ▶	0.00	880.34
(b) Political Party Committees.....	0.00	177.54
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	0.00	1057.88
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	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	50.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.75	47.31
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	0.75	1155.19

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	14.97	1870.43
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	10.00
(b) Political Party Committees.....	0.00	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	10.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	14.97	1880.43

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	4526.22
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	0.75
25. SUBTOTAL (add Line 23 and Line 24).....	4526.97
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	14.97
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	4512.00

**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 5 OF 9
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" 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)
VANDERSTELT FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Service 1 Federal Credit Union

Mailing Address PO Box 810

City Muskegon State MI Zip Code 49443-0810

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1.50**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 02 / 2015

Transaction ID : SA15.5499

Amount of Each Receipt this Period
0.25
 Apr shares interest

B. Full Name (Last, First, Middle Initial)
Service 1 Federal Credit Union

Mailing Address PO Box 810

City Muskegon State MI Zip Code 49443-0810

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1.75**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 02 / 2015

Transaction ID : SA15.5500

Amount of Each Receipt this Period
0.25
 May shares interest

C. Full Name (Last, First, Middle Initial)
Service 1 Federal Credit Union

Mailing Address PO Box 810

City Muskegon State MI Zip Code 49443-0810

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 02 / 2015

Transaction ID : SA15.5501

Amount of Each Receipt this Period
0.25
 Jun shares interest

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

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

0.75

0.75

**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 6 OF 9
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
VANDERSTELT FOR CONGRESS

Full Name (Last, First, Middle Initial) A. WIX.com		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2015
Mailing Address PO Box 40190		Amount of Each Disbursement this Period 4.99 Transaction ID : SB17.5496
City San Francisco State CA Zip Code 94140	Purpose of Disbursement Website fee 006 Category/Type	
Candidate Name VANDERSTELT FOR CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MI District: 02		

Full Name (Last, First, Middle Initial) B. WIX.com		Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2015
Mailing Address PO Box 40190		Amount of Each Disbursement this Period 4.99 Transaction ID : SB17.5497
City San Francisco State CA Zip Code 94140	Purpose of Disbursement Website fee 006 Category/Type	
Candidate Name VANDERSTELT FOR CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MI District: 02		

Full Name (Last, First, Middle Initial) C. WIX.com		Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2015
Mailing Address PO Box 40190		Amount of Each Disbursement this Period 4.99 Transaction ID : SB17.5498
City San Francisco State CA Zip Code 94140	Purpose of Disbursement Website fee 006 Category/Type	
Candidate Name VANDERSTELT FOR CONGRESS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MI District: 02		

SUBTOTAL of Disbursements This Page (optional).....	14.97
TOTAL This Period (last page this line number only).....	14.97

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

NAME OF COMMITTEE (In Full) Transaction ID : SC/10.4318
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 COURT		

City	State	ZIP Code
SPRING LAKE	MI	49456

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 M / D D / Y 09/30/14	0.00 % (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:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....	1500.00
TOTALS This Period (last page in this line only).....	

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

SCHEDULE C (FEC Form 3)
LOANS

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

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

Mailing Address
 17996 HATHAWAY COURT

City State ZIP Code
 SPRING LAKE MI 49456

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

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

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

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

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

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

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

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

Mailing Address
 17996 HATHAWAY COURT

City State ZIP Code
 SPRING LAKE MI 49456

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

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

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

SUBTOTALS This Period This Page (optional).....	▶	[] 1000.00
TOTALS This Period (last page in this line only).....	▶	[] 12500.00

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