

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 / 35  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
KUIPERS FOR CONGRESS

**A.**

Full Name (Last, First, Middle Initial) James Strikwerda		Date of Receipt MM / DD / YYYY 03 / 31 / 2010
Mailing Address 141 Central Ave Ste 330		<b>Transaction ID:</b> SA11AI.4695
City Holland	State MI	Zip Code 49423-2861
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Strikwerda Family Dentistry	Occupation Dentist	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 350.00	

**B.**

Full Name (Last, First, Middle Initial) Brian D Thrasher		Date of Receipt MM / DD / YYYY 03 / 30 / 2010
Mailing Address 11750 Peake Rd		<b>Transaction ID:</b> SA11AI.4705
City Portland	State MI	Zip Code 48875
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Dean Transportation	Occupation VP	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

**C.**

Full Name (Last, First, Middle Initial) Craig Tiggelman		Date of Receipt MM / DD / YYYY 03 / 29 / 2010
Mailing Address 3461 Ashton Rd SE		<b>Transaction ID:</b> SA11AI.4735
City Grand Rapids	State MI	Zip Code 49546
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Canteen Services	Occupation CEO	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 800.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	900.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	