



# DETAILED SUMMARY PAGE

of Receipts and Disbursements

(Page 2, FEC FORM 3)

Name of Committee (In full)	Report Covering the Period:	
Pete Hoekstra For Congress CD0270249	From: <u>July 16, 1998</u>	To: <u>Sept. 30, 1998</u>
I. RECEIPTS	COLUMN A Total This Period	COLUMN B Calendar Year-To-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	25,490.00	
(ii) Unitemized	19,028.24	
(iii) Total of contributions from individuals	44,518.24	11,220.87
(b) Political Party Committees	500.00	1500.00
(c) Other Political Committees (such as PACs)	- 0 -	- 0 -
(d) The Candidate	- 0 -	- 0 -
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(i)(ii), (b), (c) and (d))	48,018.24	12,720.87
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 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 11(e), 12, 13(c), 14 and 15)	48,018.24	12,720.87
II. DISBURSEMENTS		
17. OPERATING EXPENDITURES	33,707.76	48,987.34
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 19(a) and (b))	- 0 -	- 0 -
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	- 0 -	- 0 -
(b) Political Party Committees	- 0 -	- 0 -
(c) Other Political Committees (such as PACs)	- 0 -	- 0 -
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))	- 0 -	- 0 -
21. OTHER DISBURSEMENTS	16,000.00	24,000.00
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)	49,707.76	72,987.34
III. CASH SUMMARY		
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	\$ 82,558.31	
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)	\$ 48,018.24	
25. SUBTOTAL (add Line 23 and Line 24)	\$ 130,576.55	
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	\$ 49,707.76	
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)	\$ 80,868.79	

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 10  
FOR LINE NUMBER 11(a)(1)

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NAME OF COMMITTEE (in Full)

Pete Hoekstra For Congress C00270249

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Abe Abraham 150 Park Hills Dr. S.E. Grand Rapids, MI 49506 Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Abraham and Sons Occupation: owner Aggregate Year-to-Date > \$ 250.00	9/22/98	\$ 250.00
B. Full Name, Mailing Address and ZIP Code Dr. Arden Alexander 3850 Applewood Ln. Muskegon, MI 49441 Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	self Occupation: DOCTOR Aggregate Year-to-Date > \$ 250.00	8/22/98	\$ 250.00
C. Full Name, Mailing Address and ZIP Code Attallah & Marie Amash 5460 Brattleboro Kentwood, MI 49508 Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Amash Imports Occupation: owner Aggregate Year-to-Date > \$ 250.00	9/8/98	\$ 250.00
D. Full Name, Mailing Address and ZIP Code John Batts 915 Cascade Hills E. Grand Rapids, MI 49546 Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Batts, Inc. Occupation: Executive Aggregate Year-to-Date > \$ 350.00	9/16/98	\$ 250.00
E. Full Name, Mailing Address and ZIP Code Herbert Blair 16173 Dawn View Spring Lake, MI 49456 Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	self Occupation: Dermatologist Aggregate Year-to-Date > \$ 250.00	8/22/98	\$ 250.00
F. Full Name, Mailing Address and ZIP Code Craig Barr 9413 Mockingbird Ln. Cadillac, MI 49601 Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Wolverine Power Supply Occupation: General Manager Aggregate Year-to-Date > \$ 385.00	9/30/98	\$ 385.00 (in-kind received) Golf prizes
G. Full Name, Mailing Address and ZIP Code Frederick Brown 15967 Baud Dr. Spring Lake, MI 49456 Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	self Occupation: DOCTOR Aggregate Year-to-Date > \$ 250.00	8/22/98	\$ 250.00

SUBTOTAL of Receipts This Page (optional)

1885.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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FOR LINE NUMBER 11(a)(c)

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NAME OF COMMITTEE (In Full)

Pala Hoekstra For Congress C00270243

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Terri Lynema 4313 Lakeshore Dr. Holland, MI 49423	Great Lakes Interiors Occupation: Designer	9/19/98	\$100.00 (in-kind received) (Fundraiser decorations)
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 100.00		
B. Full Name, Mailing Address and ZIP Code Dr. Yousif Hamati 1440 E. Sherman Blvd. Muskegon, MI 49444	Self Occupation: DOCTOR	8/22/98	\$1,000.00 (in-kind received) Dinner Party
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		
C. Full Name, Mailing Address and ZIP Code Connie Brummel 321 Peppermill Lane Holland, MI 49423	— Occupation: Housewife	9/22/98	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250.00		
D. Full Name, Mailing Address and ZIP Code Yvonne Chern 7427 W. Pine Bluff Spring Lake, MI 49456	— Occupation: Housewife	8/22/98	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250.00		
E. Full Name, Mailing Address and ZIP Code Robert De Nooyer 10333 Lake Michigan West Olive, MI 49460	— Occupation: Retired	9/21/98	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		
F. Full Name, Mailing Address and ZIP Code Daniel De Vos 201 Monroe NW Ste. 500 Grand Rapids, Mich	Self Occupation: Business Owner	9/16/98	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,500.00		
G. Full Name, Mailing Address and ZIP Code Jack De Witt 205 Norwood Dr. Holland, MI 49424	Request Foods Occupation: owner	9/9/98	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,500.00		

SUBTOTAL of Receipts This Page (optional)

4,100.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (in Full) **Pete Hoekstra For Congress C00270249**

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jim Dunstan 4319 Bronson Blvd. Kalamazoo, MI 49008	Amazon USA, Inc. Occupation: owner	9/9/98	\$100 <sup>00</sup>
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 600 <sup>00</sup>		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dan Dykgraaf 347 Settlers Rd. Holland, MI 49423	Prop. Mngment Systems Occupation: owner	9/15/98	\$400 <sup>00</sup>
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 400 <sup>00</sup>		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert Frieling 25 Bay Meadows Dr. Holland, MI 49424	Walbrink Ins. Occupation: owner	9/2/98	\$200 <sup>00</sup>
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 300 <sup>00</sup>		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dr. Edwin Fuder 2480 Sunset Bluff Dr. Holland, MI 49424	Self Occupation: Orthodontist	9/2/98	\$100 <sup>00</sup>
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 350 <sup>00</sup>		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Gary Genzink 5360 141st Ave Holland, MI 49423	Property Management Systems Occupation: owner	9/15/98	\$400 <sup>00</sup>
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 900 <sup>00</sup>		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Gerard Haworth 633 So. Shore Dr. Holland, MI 49423	Retired	9/16/98	\$500 <sup>00</sup>
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1000 <sup>00</sup>		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Edsko Hekman P.O. Box 532 Spring Lake, MI 49456	Retired	9/22/98	\$250 <sup>00</sup>
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250 <sup>00</sup>		

SUBTOTAL of Receipts This Page (optional) ..... 1950<sup>00</sup>

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

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(a)(1)

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NAME OF COMMITTEE (in Full)

Pete Hoekstra For Congress C00270249

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
B. Rolf Hissom 18878 Greenwood Ct. Spring Lake, MI 49456 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Self Occupation: DOCTOR Aggregate Year-to-Date > \$ 250 <sup>00</sup>	9/1/98	\$250 <sup>00</sup>
Janet Hoch 409 Mid Oak Dr. No. Muskegon, MI 49445 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	— Occupation: Housewife Aggregate Year-to-Date > \$ 250 <sup>00</sup>	8/22/98	\$250 <sup>00</sup>
J.C. Huizenga 3161 Manhattan Ln. S.E. Grand Rapids, MI 49506 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Self Occupation: Business Owner Aggregate Year-to-Date > \$ 100 <sup>00</sup>	9/9/98	\$100 <sup>00</sup>
R.G. Johnson 3947 Shorewood Dr. Fremont, MI 49412 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Self Occupation: Insurance Aggregate Year-to-Date > \$ 250 <sup>00</sup>	9/21/98	\$250 <sup>00</sup>
Walter Jones 936 Sycamore Holland, MI 49424 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	— Occupation: Retired Aggregate Year-to-Date > \$ 500 <sup>00</sup>	9/14/98	\$500 <sup>00</sup>
Carl Jurgens A-4655 W. Mt St Holland, MI 49423 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Self Occupation: DOCTOR Aggregate Year-to-Date > \$ 300 <sup>00</sup>	9/21/98	\$500 <sup>00</sup>
Jim Jurries 444 Brecado Ct. Holland, MI 49423 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Self Occupation: Real Estate Dev. Aggregate Year-to-Date > \$ 100 <sup>00</sup>	8/24/98	\$100 <sup>00</sup>

SUBTOTAL of Receipts This Page (optional)

1950<sup>00</sup>

TOTAL This Period (last page this line number only)

SCHEDULE A

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FOR LINE NUMBER 11(a)(1)

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NAME OF COMMITTEE (in Full)

Pete Hoeksra For Congress C00270249

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jay Keuning P.O. Box 1439 Holland, MI 49423 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	self Occupation: Insurance Aggregate Year-to-Date > \$ 1000.00	9/21/98	\$ 1000.00
B. Full Name, Mailing Address and ZIP Code Dr. Ray Komray 15519 Oak Ridge Dr. Spring Lake, MI 49456 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	self Occupation: DOCTOR Aggregate Year-to-Date > \$ 350.00	8/22/98	\$ 250.00
C. Full Name, Mailing Address and ZIP Code Brian Koop 1039 So. Shore Dr. Holland, MI 49423 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	J.C.I. Occupation: Mgmt/Pres. Aggregate Year-to-Date > \$ 700.00	9/23/98	\$ 200.00
D. Full Name, Mailing Address and ZIP Code Mark Kortman 132 Timberwood Ln Holland, MI 49423 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Kore/Hi. Com. Occupation: U.P. Aggregate Year-to-Date > \$ 550.00	9/23/98	\$ 350.00
E. Full Name, Mailing Address and ZIP Code John Kunkel 6683 Audobon Rd Holland, MI 49423 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Retired Aggregate Year-to-Date > \$ 250.00	9/21/98	\$ 500.00
F. Full Name, Mailing Address and ZIP Code Glenn Langejans 16272 144th Ave Holland, MI 49423 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Maplewood Auto Occupation: Owner Aggregate Year-to-Date > \$ 8.50.00	9/23/98	\$ 150.00
G. Full Name, Mailing Address and ZIP Code Henry Langerak 8342 Wallinwood Springs Jenison, MI 49428 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Langerak Roofing Occupation: Owner Aggregate Year-to-Date > \$ 700.00	9/9/98	\$ 200.00

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

2650

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

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

Pete Hoekstra For Congress C00270249

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Marcia Lanting 1575 South Shore Holland, MI 49423	Housewife	8/24/98	\$500 <sup>00</sup>
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <u>Housewife</u>	Aggregate Year-to-Date > \$ <u>800<sup>00</sup></u>	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Larry Lee 3155 N. 168th Ave Holland, MI 49424	Hart & Cooley Inc	8/24/98	\$100 <sup>00</sup>
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <u>Pres.</u>	Aggregate Year-to-Date > \$ <u>300<sup>00</sup></u>	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Scott Maclean 7411 W. Mill Ludington, MI 49431	self	9/9/98	\$250 <sup>00</sup>
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <u>Road Builder</u>	Aggregate Year-to-Date > \$ <u>250<sup>00</sup></u>	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert Mannes 4098 66th St. Holland, MI 49423	Oil & Gas Exploration	9/16/98	\$300 <sup>00</sup>
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <u>Pres.</u>	Aggregate Year-to-Date > \$ <u>300<sup>00</sup></u>	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Frank Marczak 1171 Cheboygan Muskegon, MI 49445	Musk. Community College	9/1/98	\$35.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <u>Pres.</u>	9/9/98	\$100.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Richard Meckley 702 Old Town Rd Holland, MI 49424	Self	9/9/98	\$200 <sup>00</sup>
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <u>Architect/Builder</u>	Aggregate Year-to-Date > \$ <u>300<sup>00</sup></u>	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ied Miedema 0-1000 Chicago Dr. Jenison, MI 49428	Self	9/9/98	\$500 <sup>00</sup>
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <u>Cement Contractor</u>	Aggregate Year-to-Date > \$ <u>500<sup>00</sup></u>	

SUBTOTAL of Receipts This Page (optional)

1985-

TOTAL This Period (next page this line number only)



SCHEDULE A

ITEMIZED RECEIPTS

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (in Full)

Pete Hoekstra For Congress C00270249

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John Mixer 3735 Farmwood Muskegon, MI 49441	W. Shore Oral + Max facial Surgeon	9/1/98	\$250 <sup>00</sup>
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 300 <sup>00</sup>		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert Morehouse 4197 Indian Spr. Dr. Grandville MI 49418	Lumberman Banking	9/9/98	\$300 <sup>00</sup>
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 300 <sup>00</sup>		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Harvey Plaggernars A-4565 1st St Holland, MI 49423	Self Business Owner	9/21/98	\$250 <sup>00</sup>
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250 <sup>00</sup>		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert Porter 1530 Brookwood Muskegon, MI 49441	Muskegon Surgical Assoc. DOCTOR	8/22/98	\$250 <sup>00</sup>
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250 <sup>00</sup>		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dr. Evan Reinders 18371 Fruitport Rd Spring Lake, MI 49456	Self DOCTOR	9/8/98	\$250 <sup>00</sup>
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 350 <sup>00</sup>		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Richard Rienstra 112 E. Grand Ave Muskegon, MI 49442	Trinity Village Housing Dir. of Housing	9/22/98	\$250 <sup>00</sup>
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250 <sup>00</sup>		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Donald Rypma P.O. Box 99 Whitehall, MI 49461	Self AUTO DEALER	9/11/98 9/15/98	70 <sup>00</sup> 200 <sup>00</sup>
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 270 <sup>00</sup>		

SUBTOTAL of Receipts This Page (optional)

1820<sup>00</sup>

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NAME OF COMMITTEE (in Full)

Pete Hoekstra For Congress C00270249

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Joseph Salisz 4135 Tree Line Muskegon, MI 49441 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Self Occupation: DOCTOR	8/22/98	\$250 <sup>00</sup>
Scott Spaelhof 41 Bay Meadows Dr Holland, MI 49424 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	J.C.I. Occupation: Acct. Mgr.	8/24/98	\$500 <sup>00</sup>
Roger Spaelman 651 W. Wedgewood Dr. No. Muskegon, MI 49445 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Hackley Hospital Occupation: Hosp. Pres.	8/22/98	\$250 <sup>00</sup>
Dr. Remington Sprague 1050 Harbor Point Ct. Muskegon, MI 49441 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Self Occupation: DOCTOR	9/8/98	\$250 <sup>00</sup>
Elmer Toonstra 3030 Viewpoint Jenison, MI 49428 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Retired	8/24/98	\$100 <sup>00</sup>
Robert Tuttle 608 Lake Dr. No. Muskegon, MI 49445 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Retired	9/9/98	\$500 <sup>00</sup>
L.J. VerPlank P.O. Box 8 Ferrysburg, MI 49409 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Self Occupation: Business Exec.	9/21/98	\$500 <sup>00</sup>

SUBTOTAL of Receipts This Page (optional)

2350<sup>00</sup>

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 7 OF 10  
FOR LINE NUMBER 11610

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NAME OF COMMITTEE (In Full)

Pete Hoekstra For Congress C00270249

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John Watts 245 Hubbard St Allegan, MI 49010	Self Occupation: Attorney	9/19/98 9/23/98	100- 150-
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250-		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
P.M. Wege P.O. Box 6388 Grand Rapids, MI 49516	Retired	9/21/98	\$100-
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 100-		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Beatrice Westrate 55 W. 14th St Holland, MI 49423	Retired	9/16/98	\$200 <sup>00</sup>
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 400-		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Alia Jacob 16251 Riley St Holland, MI 49424	Housewife	9/8/98	\$250 <sup>00</sup>
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250 <sup>00</sup>		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jim Anderson P.O. Box 708 Ludington, MI 49431	Lake Michigan Car Ferry Occupation: V.P.	9/19/98	\$1,000- (in-kind receipt) Fundraiser Facility
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1000 <sup>00</sup>		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Eleanor Anderson P.O. Box 708 Ludington, MI 49431	Dr. Don Doughty Occupation: Pediatric Nurse Practitioner	9/19/98	\$1,000 <sup>00</sup> (in-kind receipt) Fundraiser Facility
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1000 <sup>00</sup>		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Thomas Anderson 1121 Ottawa Beach Holland, MI 49424	Self Occupation: Dentist	9/19/98	\$1,000 <sup>00</sup> (in-kind receipt) Fundraiser Facility
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1000 <sup>00</sup>		

SUBTOTAL of Receipts This Page (optional)

3800-

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 10 OF 10 FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (in Full)

Peta Hoekstra For Congress C00270249

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Don Clingan P.O. Box 708 Ludington, MI 49431	Lake Michigan Car Ferry	9/19/98	\$1000 - (in-kind received) Fundraiser Facility
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation V.P. Marketing	Aggregate Year-to-Date > \$ 1000 -	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Bobbie Clingan P.O. Box 708 Ludington, MI 49431		9/17/98	1000 <sup>00</sup> in-kind received Fundraiser Facility
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Housewife	Aggregate Year-to-Date > \$ 1000 -	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Bob Manglitz 6671 Audubon Holland, MI 49423	Lake Michigan Car Ferry	9/19/98	1000 <sup>00</sup> (in-kind received) Fundraiser Facility
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President	Aggregate Year-to-Date > \$ 1000 -	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Janet Manglitz 6671 Audubon Holland, MI 49423		9/19/98	1000 <sup>00</sup> (in-kind received) Fundraiser Facility
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Housewife	Aggregate Year-to-Date > \$ 1000 -	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Kerri Manglitz 6671 Audubon Holland, MI 49423	Lake Michigan Car Ferry	9/19/98	1000 <sup>00</sup> (in-kind received) Fundraiser Facility
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Clerk	Aggregate Year-to-Date > \$ 1000 -	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Sharla Manglitz 6671 Audubon Holland, MI 49423	Lake Michigan Car Ferry	9/19/98	1000 <sup>00</sup> (in-kind received) Fundraiser Facility
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Mngement	Aggregate Year-to-Date > \$ 1000 -	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)

6000 -

TOTAL This Period (last page this line number only)

28,490<sup>00</sup>

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 111 OF 116  
FOR LINE NUMBER 116

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NAME OF COMMITTEE (in Full)

Peta Hoekstra For Congress C00270249

A. Full Name, Mailing Address and ZIP Code Newaygo County Republicans P.O. Box 208 Fremont, MI 49412	Name of Employer  Occupation  Aggregate Year-to-Date > \$ 1,500.00	Date (month, day, year) 9/22/98	Amount of Each Receipt this Period \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
B. Full Name, Mailing Address and ZIP Code			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
C. Full Name, Mailing Address and ZIP Code			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
D. Full Name, Mailing Address and ZIP Code			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
E. Full Name, Mailing Address and ZIP Code			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
F. Full Name, Mailing Address and ZIP Code			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
G. Full Name, Mailing Address and ZIP Code			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

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

TOTAL This Period (last page this line number only) ..... 500-

SCHEDULE B

ITEMIZED DISBURSEMENTS

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) **Pete Hoekstra For Congress C00270249**

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bill Huizenga 117 W. Cherry Zeeland, MI 49464	Compensation Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) gen'l operating	7/23/98 8/31/98 9/29/98	\$300.62 \$300.62 \$300.62
Gibbs U.S. 10 Ludington, MI	Campaign meeting Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/23/98	\$105.00
Bill Huizenga 117 W. Cherry Zeeland, MI 49464	reimbursement for computer purchase Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) gen'l operating	7/24/98 <del>7/24/98</del>	\$2124.53
Congressional Institute 316 Pennsylvania Ave. S.E. Suite 403 WASHINGTON, DC. 20003	attending conference Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) gen'l operating	8/1/98	\$540.00
Diane Hoekstra 1454 Cimarron Dr Holland MI 49423	reimbursement for fundraiser expenses Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/1/98 8/28/98 9/29/98	\$250.63 \$196.50 \$552.48
Holland Postmaster 190 E. 8th St Holland, MI 49423	Postage Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) gen'l operating	8/5/98 8/7/98 8/24/98	\$800.02 \$800.02 \$160.00
Diane Rickbost 1327 Heather Dr. Holland, MI 49423	Compensation Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) gen'l operating	8/12/98 9/3/98	\$282.28 \$282.28
Ameritech Bill Payment Center Saginaw, MI 48663	phones Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) gen'l operating	8/13/98 9/8/98 9/22/98	\$70.46 \$69.03 \$21.42
Old Kent Bank 36 E. 8th St Holland, MI 49423	FICA Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) gen'l operating	8/13/98 9/8/98 9/29/98	\$302.48 \$608.08 \$5169.14

SUBTOTAL of Disbursements This Page (optional) **8631.17**

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 2 OF 5  
FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

Pete Hoekstra For Congress C00270249

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Holland Litho 10972 Chicago Dr. Zeeland MI 49464	Newsletter: Typeset Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/13/98	\$138.86
B. Full Name, Mailing Address and ZIP Code Image Group 31 East 8th St. Suite 200 Holland, MI 49423	Newsletter: Artwork Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/13/98	\$300.00
C. Full Name, Mailing Address and ZIP Code Schrew Printing 422 Diekema Holland, MI 49423	Printing Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/13/98 8/28/98 9/8/98	\$2604.42 • 270.30 • 541.13
D. Full Name, Mailing Address and ZIP Code Zeeland Print Shop 145 East Main St. Zeeland, MI 49464	Print flyers Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/13/98 9/22/98	\$265.85 • 71.02
E. Full Name, Mailing Address and ZIP Code ATT P.O. Box 27-680 Kansas City, MO 64180	Phone Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) gen'l operating	8/13/98 9/8/98	\$51.16 \$52.16
F. Full Name, Mailing Address and ZIP Code Jane Jelgerhuis 897 Ottawa Ave Holland, MI 49423	Compensation Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/18/98 8/21/98 8/31/98	\$471.35 • 47.00 \$629.74
G. Full Name, Mailing Address and ZIP Code Richard Ridenour 6296 Redfern Circle Portage, MI 49024	fundraiser entertainer Compensation Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/1/98	\$300.00
H. Full Name, Mailing Address and ZIP Code Chromatic Graphics 654 E. Lakewood Blvd. Holland, MI 49423	Campaign T-shirts & hats Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/8/98	\$475.94
I. Full Name, Mailing Address and ZIP Code Stumps P.O. Box 305 South Whitley, IN. 46787	Decorations Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/28/98	\$111.90

SUBTOTAL of Disbursements This Page (optional)

6330.83

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 3 OF 5  
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NAME OF COMMITTEE (In Full)

Pete Hoekstra For Congress C00270240

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
84 East 84 E. 8th St Holland, Mich.	Campaign Committee Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/14/98	\$137.00
Holland Postmaster 190 E. 8th St Holland, MI 49423	Stamps Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/14/98	\$160.00
Taylor Rental 62 South Waverly Rd Holland, MI 49423	Helium Tank/Balloon Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/14/98	\$74.20
Ameritech Bill Payment Center Saginaw, MI 48663	Phone Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/16/98	\$20.57
Shawn Pacanowski 2976 Millpond Dr. W #3-B Holland, MI 49424	expenses & compensation Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/18/98 7/29/98	\$16.75 \$350.77
Jane Jelgerhuis 897 Ottawa Ave Holland, MI 49423	expenses & compensation Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/18/98 7/29/98	\$47.75 \$471.35
Tom Nienhuis Catering 11975 E. Lakewood Holland, MI 49424	Fundraiser Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/22/98	\$595.00
Terry Lynema 4313 Lakeshore Dr. Holland, MI 49424	expenses for fundraiser Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/22/98 9/19/98 (in-kind received)	\$149.11 \$100.00
Jane Bosko 583 Riley Holland, MI 49424	entertainment at fundraiser Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/29/98	\$150.00

SUBTOTAL of Disbursements This Page (optional)

1522.56

TOTAL This Period (last page this line number only)



SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (in Full)

Pete Hoekstra For Congress C00270249

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Holland Chorale 583 Riley Holland, MI 49424	Entertainment at Fundraiser Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/29/98	\$200.00
Don's Flowers 217 E. Main St Zeeland, MI 49464	Roses for Fundraiser Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/29/98	\$238.50
Dell's Music 23 East 8th St Holland, MI 49423	Sound Equipment Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/29/98	\$79.50
Greg Meadowcroft 24 East 9th St Holland, MI 49423	Bldg. Space Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/29/98	\$225.00
Freestone Enterprises 430 E. 8th St, Suite 221 Holland, MI 49423	lapel stickers Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/29/98	\$312.70
Dr. Yousif Hamati 1440 E. Sherman Blvd. Muskegon, MI 49444	Fundraiser Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/22/98	\$1000.00 Lin-kind recet Dinner Party
MISC EXPENSES	Campaign Expenses Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/16/98 thru 9/30/98	\$102.56
Jimm Anderson P.O. Box 708 Ludington, MI 49431	Fundraiser Faculty Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/19/98	\$1000.00
Eleanor Anderson P.O. Box 708 Ludington, MI 49431	Fundraiser Faculty Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/19/98	\$1000.00

SUBTOTAL of Disbursements This Page (optional)

458.26

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 5 OF 5  
FOR LINE NUMBER 17

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NAME OF COMMITTEE (in Full)

Pete Hoekstra For Congress C00270249

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Thomas Anderson 1121 Ottawa Beach Holland, MI 49424	Fundraiser Facility Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/19/98	\$1000 - in-kind received
Don Clingan P.O. Box 708 Ludington, MI 49431	Fundraiser Facility Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/19/98	\$1000 - in-kind received
Bobbie Clingan P.O. Box 708 Ludington, MI 49431	Fundraiser Facility Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/19/98	\$1000 - in-kind received
Bob Manglitz 6671 Audubon Holland, MI 49423	Fundraiser Facility Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/19/98	\$1000 - in-kind received
Janet Manglitz 6671 Audubon Holland, MI 49423	Fundraiser Facility Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/19/98	\$1000 - in-kind received
Kern Manglitz 6671 Audubon Holland, MI 49423	Fundraiser Facility Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/19/98	\$1000 - in-kind received
Sharla Manglitz 6671 Audubon Holland, MI 49423	Fundraiser Facility Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/19/98	\$1000 - in-kind received
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

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

7000-

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

33,707.76

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

*other expenditures*

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

PAGE 1 OF 1

FOR LINE NUMBER

21

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NAME OF COMMITTEE (In Full)

**Pete Hoekstra For Congress C00270249**

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
<i>Neumann for Senate P.O. Box 2830 Janesville, WI 53547</i>	<i>Transfer of excess funds Candidate Support</i> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>8/1/98</i>	<i>\$1,000<sup>00</sup></i>
<i>McMillan for Congress 351 No. Squirrel Rd. #195 Auburn Hills, MI 48326</i>	<i>Transfer of excess Campaign funds</i> Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>8/28/98 9/26/98</i>	<i>\$750<sup>00</sup> \$250<sup>00</sup></i>
<i>McMannus for Congress P.O. Box 2032 Traverse City, MI 49685</i>	<i>Transfer of excess Campaign funds</i> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>8/28/98 9/26/98</i>	<i>\$500<sup>00</sup> \$500<sup>00</sup></i>
<i>Touma for Congress P.O. Box 100 Royal Oak, MI 48068</i>	<i>Transfer of excess Campaign funds</i> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>8/28/98</i>	<i>\$500<sup>00</sup></i>
<i>N.R.C.C. 320 First St. S.E. Washington, D.C. 20003</i>	<i>Transfer of excess Campaign funds</i> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>9/22/98</i>	<i>\$7500<sup>00</sup></i>
<i>Michigan State Rep. Party 2721 East Grand River Lansing, MI 48912</i>	<i>Transfer of excess funds</i> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>9/26/98</i>	<i>\$5000<sup>00</sup></i>
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

*16,000<sup>00</sup>*

TOTAL This Period (last page this line number only)

*16,000<sup>00</sup>*

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 5

FOR LINE NUMBER 17

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NAME OF COMMITTEE (in Full)

Pete Hoekstra For Congress C00270249

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bill Huizenga 117 W. Cherry Zeeland, MI 49464	Compensation	7/23/98	\$300.62
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	8/31/98	\$300.62
	<input checked="" type="checkbox"/> Other (specify) gen'l operating	9/29/98	\$300.62
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Gibbs U.S. 10 Ludington, MI	Campaign meeting	7/23/98	\$105.00
Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General			
<input type="checkbox"/> Other (specify)			
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bill Huizenga 117 W. Cherry Zeeland, MI 49464	reimbursement for computer purchase	7/24/98	\$2124.53
Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General		<del>7/24/98</del>	
<input checked="" type="checkbox"/> Other (specify) gen'l operating			
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Congressional Institute 3/6 Pennsylvania Ave. S.E. Suite 403 WASHINGTON, DC. 20003	attending conference	8/11/98	\$540.00
Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General			
<input checked="" type="checkbox"/> Other (specify) gen'l operating			
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Diane Hoekstra 1454 Cimarron Dr Holland MI 49423	reimbursement for fundraiser expenses	8/11/98	\$250.63
Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		8/28/98	\$196.50
<input type="checkbox"/> Other (specify)		9/29/98	\$552.48
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Holland Postmaster 190 E. 8th St Holland, MI 49423	Postage	8/5/98	\$800.00
Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General		8/7/98	\$800.00
<input checked="" type="checkbox"/> Other (specify) gen'l operating		8/24/98	\$160.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Diane Ryckboost 1327 Heather Dr. Holland, MI 49423	Compensation	8/12/98	\$282.28
Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General		9/3/98	\$282.28
<input checked="" type="checkbox"/> Other (specify) gen'l operating			
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ameritech Bill Payment Center Saginaw, MI 48663	phones	8/13/98	\$70.46
Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General		9/8/98	\$69.03
<input checked="" type="checkbox"/> Other (specify) gen'l operating		9/22/98	\$21.42
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Old Kent Bank 36 E. 8th St Holland, MI 49423	FICA	8/13/98	\$302.48
Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General		9/8/98	\$608.08
<input checked="" type="checkbox"/> Other (specify) gen'l operating		9/29/98	\$569.14

SUBTOTAL of Disbursements This Page (optional)

8636.17

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 2 OF 5  
FOR LINE NUMBER 17

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NAME OF COMMITTEE (in Full)

Pete Hoekstra For Congress C00270240

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Holland Litho 10972 Chicago Dr. Zeeland MI 49464	Newsletter: Typeset Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/13/98	\$138.86
Image Group 31 East 8th St. Suite 200 Holland, MI 49423	Newsletter: Artwork Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/13/98	\$300.00
Schrew Printing 422 Diekema Holland, MI 49423	Printing Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/13/98 8/28/98 9/8/98	\$2604.42 270.30 541.13
Zeeland Print Shop 145 East Main St. Zeeland, MI 49464	Print flyers Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/13/98 9/22/98	\$265.85 71.02
ATT P.O. Box 27-680 Kansas City, MO 64180	Phone Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) gas/transport	8/13/98 9/8/98	\$51.16 52.16
Jane Jelgenhuis 897 Ottawa Ave Holland, MI 49423	Compensation Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/18/98 8/24/98 8/31/98	\$471.35 47.00 629.74
Richard Ridenour 6296 Redfern Circle Portage, MI 49024	Fundraiser entertainer Compensation Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/1/98	\$300.00
Chromatic Graphics 654 E. Lakewood Blvd. Holland, MI 49423	Campaign T-shirts & hats Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/8/98	\$475.94
Stumps P.O. Box 305 South Whitley, IN. 46787	Decorations Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/28/98	\$111.90

SUBTOTAL of Disbursements This Page (optional)

6330.83

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 3 OF 5  
FOR LINE NUMBER 17

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NAME OF COMMITTEE (in Full)

Peta Hoekstra For Congress C00270249

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
84 East 84 E. 8th St Holland, Mich.	Campaign Committee Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/14/98	\$137.00
Holland Postmaster 190 E. 8th St Holland, MI 49423	Stamps Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/14/98	\$1.60
Taylor Rental 622 South Waverly Rd Holland, MI 49423	Badger Helium Tank Fundraiser Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/14/98	\$74.20
Ameritech Bill Payment Center Saginaw, MI 48663	phone Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/16/98	\$20.57
Shawn Pacanowski 2976 Millpond Dr. W #3-B Holland, MI 49424	expenses & compensation Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/18/98 9/29/98	\$16.75 \$350.77
Jane Jelgerhuis 897 Ottawa Ave Holland, MI 49423	expenses & compensation Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/18/98 9/29/98	\$47.75 \$471.35
Tom Nienhuis Catering 11975 E. Lakewood Holland, MI 49424	Fundraiser Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/22/98	\$5905.00
Terry Lynema 4313 Lakeshore Dr. Holland, MI 49424	expenses for fundraiser Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/22/98 9/19/98 (in-kind received)	\$149.11 \$100.00
Jane Bosko 583 Riley Holland, MI 49424	entertainment at fundraiser Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/29/98	\$150.00

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

1582.50

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

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 4 OF 5  
FOR LINE NUMBER 17

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NAME OF COMMITTEE (in Full) **Pete Hoekstra For Congress C00270249**

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Holland Chorale 583 Riley Holland, MI 49424	Entertainment at Fundraiser Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	9/29/98	\$200.00
Don's Flowers 217 E. Main St Zeeland, MI 49464	Roses for Fundraiser Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	9/29/98	\$238.50
Dell's Music 23 East 8th St Holland, MI 49423	Sound Equipment Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	9/29/98	\$79.50
Greg Meadowcroft 24 East 9th St Holland, MI 49423	Bldg. Space Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	9/29/98	\$225.00
Freestone Enterprises 430 E. 8th St, Suite 221 Holland, MI 49423	Label stickers Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	9/29/98	\$312.70
Dr. Yousif Hamati 1440 E. Sherman Blvd. Muskegon, MI 49444	Fundraiser Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	8/22/98	\$1000.00 Lin-kind Rec. Dinner Party
MISC EXPENSES	Campaign Expenses Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	7/16/98 Thu 9/30/98	\$102.56
Jim Anderson P.O. Box 708 Ludington, MI 49431	Fundraiser Facility Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	9/19/98	\$1000.00
Cleanor Anderson P.O. Box 708 Ludington, MI 49431	Fundraiser Facility Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	9/19/98	\$1000.00

SUBTOTAL of Disbursements This Page (optional) ..... 458.26

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



SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 5 OF 5  
FOR LINE NUMBER 17

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NAME OF COMMITTEE (in Full)

Pete Hoekstra For Congress C00270249

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Thomas Anderson 1121 Ottawa Beach Holland, MI 49424	Fundraiser Facility Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/19/98	\$1000 - in-kind received
Don Clingan P.O. Box 708 Ludington MI 49431	Fundraiser Facility Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/19/98	\$1000 - in-kind received
Bobbie Clingan P.O. Box 708 Ludington, MI 49431	Fundraiser Facility Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/19/98	\$1000 - in-kind received
Bob Manglitz 6671 Audubon Holland, MI 49423	Fundraiser Facility Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/19/98	\$1000 - in-kind received
Janet Manglitz 6671 Audubon Holland, MI 49423	Fundraiser Facility Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/19/98	\$1000 - in-kind received
Keri Manglitz 6671 Audubon Holland, MI 49423	Fundraiser Facility Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/19/98	\$1000 - in-kind received
Sharla Manglitz 6671 Audubon Holland, MI 49423	Fundraiser Facility Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/19/98	\$1000 - in-kind received
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

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

7000-

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

33,707.76



**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

*other expenditures*

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NAME OF COMMITTEE (in Full)

**Pete Hoekstra For Congress C00270249**

<p>A. Full Name, Mailing Address and ZIP Code  <i>Newmann for Senate                  P.O. Box 2830                  Janesville, WI 53547</i></p>	<p>Purpose of Disbursement  <i>Transfer of excess funds                  Candidate Support</i></p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year)  <i>8/1/98</i></p>	<p>Amount of Each Disbursement This Period  <i>\$1,000<sup>00</sup></i></p>
<p>B. Full Name, Mailing Address and ZIP Code  <i>McMillan for Congress                  351 No Squirrel Rd. #195                  Auburn Hills, MI 48326</i></p>	<p>Purpose of Disbursement  <i>Transfer of excess                  Campaign funds</i></p> <p>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year)  <i>8/28/98                  9/26/98</i></p>	<p>Amount of Each Disbursement This Period  <i>\$ 750<sup>00</sup>                  \$ 250<sup>00</sup></i></p>
<p>C. Full Name, Mailing Address and ZIP Code  <i>McMannus for Congress                  P.O. Box 2032                  Traverse City, MI 49685</i></p>	<p>Purpose of Disbursement  <i>Transfer of excess                  Campaign funds</i></p> <p>Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year)  <i>8/28/98                  9/26/98</i></p>	<p>Amount of Each Disbursement This Period  <i>\$ 500<sup>00</sup>                  \$ 500<sup>00</sup></i></p>
<p>D. Full Name, Mailing Address and ZIP Code  <i>Touma for Congress                  P.O. Box 100                  Royal Oak, MI 48068</i></p>	<p>Purpose of Disbursement  <i>Transfer of excess                  Campaign funds</i></p> <p>Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year)  <i>8/28/98</i></p>	<p>Amount of Each Disbursement This Period  <i>\$ 500<sup>00</sup></i></p>
<p>E. Full Name, Mailing Address and ZIP Code  <i>N.R.C.C.                  320 First St. S.E                  Washington, D.C. 20003</i></p>	<p>Purpose of Disbursement  <i>Transfer of excess                  Campaign funds</i></p> <p>Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year)  <i>9/22/98</i></p>	<p>Amount of Each Disbursement This Period  <i>\$ 7500<sup>00</sup></i></p>
<p>F. Full Name, Mailing Address and ZIP Code  <i>Michigan State Rep. Party                  2121 East Grand River                  Lansing, MI 48912</i></p>	<p>Purpose of Disbursement  <i>Transfer of excess funds</i></p> <p>Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year)  <i>9/26/98</i></p>	<p>Amount of Each Disbursement This Period  <i>\$ 5000<sup>00</sup></i></p>
<p>G. Full Name, Mailing Address and ZIP Code</p>	<p>Purpose of Disbursement</p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Disbursement This Period</p>
<p>H. Full Name, Mailing Address and ZIP Code</p>	<p>Purpose of Disbursement</p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Disbursement This Period</p>
<p>I. Full Name, Mailing Address and ZIP Code</p>	<p>Purpose of Disbursement</p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Disbursement This Period</p>


SUBTOTAL of Disbursements This Page (optional) ..... *16,000<sup>00</sup>*

TOTAL This Period (last page this line number only) ..... *16,000<sup>00</sup>*

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE  
FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED 10/13/98
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other ( Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
 PREPARER	10/15/98 DATE PREPARED