

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
Moolenaar for Congress

ADDRESS (number and street) 5915 Eastman Avenue
Suite 100
 Check if different than previously reported. (ACC) Midland MI 48640-6824

2. **FEC IDENTIFICATION NUMBER** ▼ C C00561530 3. IS THIS REPORT NEW (N) OR AMENDED (A)
CITY ▲ STATE ▲ ZIP CODE ▲ STATE ▼ DISTRICT
MI 04

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 M M / D D / Y Y Y Y in the State of
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on M M / D D / Y Y Y Y in the State of MI
11 / 04 / 2014

5. Covering Period M M / D D / Y Y Y Y through M M / D D / Y Y Y Y
10 / 16 / 2014 through 11 / 24 / 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 Gwen Lang
Signature of Treasurer Gwen Lang [Electronically Filed] Date M M / D D / Y Y Y Y
12 / 04 / 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.

Office Use Only									
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FEC FORM 3
(Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Moolenaar for Congress

Report Covering the Period: From: M M / D D / Y Y Y Y 10 / 16 / 2014 To: M M / D D / Y Y Y Y 11 / 24 / 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))....	111505	1128238.33
(b) Total Contribution Refunds (from Line 20(d))	1600	9400
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	109905	1118838.33
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	287832.04	1044580.43
(b) Total Offsets to Operating Expenditures (from Line 14).....	0	0
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	287832.04	1044580.43
8. Cash on Hand at Close of Reporting Period (from Line 27).....	61384.52	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	287025.67	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

- If the candidate participated in the general election, use this form for the 30-day Post-General report.
- If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name

Moolenaar for Congress

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

I. RECEIPTS

COLUMN A Total this Period	COLUMN B Election Cycle Total as of <input type="text" value="11"/> / <input type="text" value="04"/> / <input type="text" value="2014"/> (date of general election)	COLUMN C Total for <input type="text" value="11"/> / <input type="text" value="05"/> / <input type="text" value="2014"/> (date after general election) through <input type="text" value="11"/> / <input type="text" value="24"/> / <input type="text" value="2014"/> (last day of reporting period)
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other than Political Committees		
(i) Itemized (use Schedule A)		
<input type="text" value="55125"/>	<input type="text" value="649800.65"/>	<input type="text" value="250"/>
(ii) Unitemized		
<input type="text" value="1530"/>	<input type="text" value="40757.81"/>	<input type="text" value="25"/>
(iii) Total of contributions from individuals		
<input type="text" value="56655"/>	<input type="text" value="690558.46"/>	<input type="text" value="275"/>
(b) Political Party Committees		
<input type="text" value="0"/>	<input type="text" value="6700"/>	<input type="text" value="0"/>
(c) Other Political Committees		
<input type="text" value="54850"/>	<input type="text" value="430979.87"/>	<input type="text" value="5500"/>

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

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COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
(d) The Candidate		
0	0	0
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))		
111505	1128238.33	5775
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
4544.85	4544.85	0
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
0	0	0
(b) All Other Loans		
0	0	0
(c) TOTAL LOANS (add Lines 13(a) and (b))		
0	0	0
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, rebates, etc.)		
0	0	0
15. OTHER RECEIPTS (Dividends, Interest, etc.)		
0	0	0
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		
116049.85	1132783.18	5775

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

Write or Type Committee Name

Moolenaar for Congress

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

II. DISBURSEMENTS

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
17. OPERATING EXPENDITURES		
<input type="text" value="287832.04"/>	<input type="text" value="1044580.43"/>	<input type="text" value="22193.23"/>
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES		
<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate		
<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
(b) Of All Other Loans		
<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))		
<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees		
<input type="text" value="1600"/>	<input type="text" value="9400"/>	<input type="text" value="0"/>
(b) Political Party Committees		
<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 6 / 63

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
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(c) Other Political Committees (such as PACs)

0	0	0
---	---	---

(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b) and (c))

1600	9400	0
------	------	---

21. OTHER DISBURSEMENTS

1000	1000	0
------	------	---

22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d) and 21)

290432.04	1054980.43	22193.23
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III. NET CONTRIBUTIONS (OTHER THAN LOANS)

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract Line 20(d) from Line 11(e))

109905.00	118838.33	5775.00
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IV. NET OPERATING EXPENDITURES

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract Line 14 from Line 17)

287832.04	1044580.43	22193.23
-----------	------------	----------

V. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	235766.71
24. TOTAL RECIEPTS THIS PERIOD (from Line 16).....	116049.85
25. SUBTOTAL (add Line 23 and Line 24).....	351816.56
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	290432.04
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	61384.52

**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 63
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 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)
Moolenaar for Congress

A. Full Name (Last, First, Middle Initial)
Linda K. Beard

Mailing Address 205 N Kinney Avenue

City Mt Pleasant State MI Zip Code 48858-1746

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

Name of Employer M & L Petroleum Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3600**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 16 / 2014

Transaction ID : A-CF1613

Amount of Each Receipt this Period
 1000

Donation

B. Full Name (Last, First, Middle Initial)
Byron M Benchley

Mailing Address 754 Eastwood Drive

City Clare State MI Zip Code 48617-9606

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

Name of Employer Benchley Chiropractic Clinic Occupation Chiropractor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3600**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 16 / 2014

Transaction ID : A-CF1614

Amount of Each Receipt this Period
 1000

Donation

C. Full Name (Last, First, Middle Initial)
Jim Holton

Mailing Address 1828 Woods Way

City Mt Pleasant State MI Zip Code 48858-1218

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

Name of Employer Mountain Town Station Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 16 / 2014

Transaction ID : A-CF1615

Amount of Each Receipt this Period
 250

Donation

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

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

2250.00

**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 8 OF 63
	<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)
Moolenaar for Congress

A. Full Name (Last, First, Middle Initial)
Phillip R. Seybert

Mailing Address 608 E Blue Grass Road

City State Zip Code
Mt Pleasant MI 48858-9565

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

Name of Employer Occupation
P.S. Equities President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		16		2014

Transaction ID : A-CF1616

Amount of Each Receipt this Period

1000

Donation

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

Mailing Address 1425 S Mission Road

City State Zip Code
Mount Pleasant MI 48858-4665

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

Name of Employer Occupation
Self Geologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		16		2014

Transaction ID : A-CF1617

Amount of Each Receipt this Period

1000

Donation

C. Full Name (Last, First, Middle Initial)
David Whitescarver

Mailing Address 1710 Flowers Mill Court NE

City State Zip Code
Grand Rapids MI 49525-9696

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

Name of Employer Occupation
Van Andel Research Institute Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		16		2014

Transaction ID : A-CF1649

Amount of Each Receipt this Period

250

Donation

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

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

2250.00

**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 9 OF 63
	<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)
Moolenaar for Congress

A. Full Name (Last, First, Middle Initial)
William E. Washabaugh Jr.

Mailing Address 420 Ricoma Beach Road

City State Zip Code
Bay City MI 48706-1149

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

Name of Employer Occupation
Northern Concrete Pipe President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2014

Transaction ID : A-CF1639

Amount of Each Receipt this Period
500

Donation

B. Full Name (Last, First, Middle Initial)
La Belle LTD Partnership

Mailing Address 405 S Mission Street

City State Zip Code
Mt Pleasant MI 48858-2878

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3600

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		22		2014

Transaction ID : A-CF1643

Amount of Each Receipt this Period
1000

Donation

Contribution from Partnership. Partners exceeding reporting threshold itemized as memos.

C. Full Name (Last, First, Middle Initial)
Barton LaBelle

Mailing Address 405 S Mission Street

City State Zip Code
Mount Pleasant MI 48858-2878

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

Name of Employer Occupation
LaBelle Management Businessman

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1800

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		22		2014

Transaction ID : A-PIP9

Amount of Each Receipt this Period
500

Donation-partner allocation

[MEMO ITEM]
Partnership Itemization Memo

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

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

1500.00

**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 10 OF 63
	<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)
Moolenaar for Congress

A. Full Name (Last, First, Middle Initial)
Douglas LaBelle

Mailing Address 405 S Mission Street

City State Zip Code
Mount Pleasant MI 48858-2878

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

Name of Employer Occupation
LaBelle Management Businessman

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1800

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		22		2014

Transaction ID : A-PIP8

Amount of Each Receipt this Period
500

Donation-partner allocation

[MEMO ITEM]
Partnership Itemization Memo

B. Full Name (Last, First, Middle Initial)
Rick Baker

Mailing Address 335 Bridge Street NW
Apt. 1600

City State Zip Code
Grand Rapids MI 49504-8711

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

Name of Employer Occupation
Grand Rapids Chamber of Comm President/CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		22		2014

Transaction ID : A-CF1646

Amount of Each Receipt this Period
250

Donation

C. Full Name (Last, First, Middle Initial)
Kevin L. Kennett

Mailing Address 4813 Washington Street

City State Zip Code
Midland MI 48642-3034

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

Name of Employer Occupation
Case Systems Finance

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		22		2014

Transaction ID : A-CF1648

Amount of Each Receipt this Period
250

Donation

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

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

500.00

**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 11 OF 63
	<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)
Moolenaar for Congress

A. Full Name (Last, First, Middle Initial)
James H. Mathieu

Mailing Address 213 E Main Street

City Midland State MI Zip Code 48640-5113

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

Name of Employer Self Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **750**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 22 / 2014

Transaction ID : A-CF1640

Amount of Each Receipt this Period
 500

Donation

B. Full Name (Last, First, Middle Initial)
Thomas H. Cook

Mailing Address 1608 Foxwood Court

City Midland State MI Zip Code 48642-7187

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

Name of Employer Dow Corning Occupation Senior VP, Sales

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3500**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 23 / 2014

Transaction ID : A-CF1653

Amount of Each Receipt this Period
 2500

Donation

C. Full Name (Last, First, Middle Initial)
Joanne G. Emmons

Mailing Address 13904 Northland Drive

City Big Rapids State MI Zip Code 49307-8916

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

Name of Employer n/a Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **450**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 23 / 2014

Transaction ID : A-CF1654

Amount of Each Receipt this Period
 200

Donation

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

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

3200.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 12 OF 63
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

A. Full Name (Last, First, Middle Initial)
Brian Gettel

Mailing Address 1108 Balsam Hill Avenue SE

City Grand Rapids State MI Zip Code 49546-3814

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

Name of Employer n/a Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 23 / 2014

Transaction ID : A-CF1647

Amount of Each Receipt this Period
250

Donation

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

Mailing Address 382 Cedar Drive

City Mount Pleasant State MI Zip Code 48858-9027

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

Name of Employer n/a Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 23 / 2014

Transaction ID : A-CF1656

Amount of Each Receipt this Period
1000

Donation

C. Full Name (Last, First, Middle Initial)
Bruce Patterson

Mailing Address 42479 Redfern Street

City Canton State MI Zip Code 48187-3451

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

Name of Employer Self-employed Occupation Attorney/Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **450**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 23 / 2014

Transaction ID : A-CF1651

Amount of Each Receipt this Period
200

Donation

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

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

1450.00

**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)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 13 OF 63

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

A. Full Name (Last, First, Middle Initial)
Anthony Young

Mailing Address 2211 N Chipman Road

City Owosso State MI Zip Code 48867-4818

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

Name of Employer Young Chevrolet Cadillac Occupation Auto Dealer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 23 / 2014

Transaction ID : A-CF1650

Amount of Each Receipt this Period
1000

Donation

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

Mailing Address 82 Pond Ridge Drive NE

City Grand Rapids State MI Zip Code 49546-1402

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

Name of Employer Bissell, Inc. Occupation VP & General Counsel

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 24 / 2014

Transaction ID : A-CF1658

Amount of Each Receipt this Period
250

Donation

C. Full Name (Last, First, Middle Initial)
Richard N. Brouwer

Mailing Address 2112 Chesaning Drive SE

City Grand Rapids State MI Zip Code 49506-5311

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

Name of Employer Prime Distribution Services Occupation VP Information Technology

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 24 / 2014

Transaction ID : A-CF1659

Amount of Each Receipt this Period
250

Donation

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

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

1500.00

**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 14 OF 63
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

A. Full Name (Last, First, Middle Initial)
Marc Chircop

Mailing Address 2939 Nancy Court SW

City State Zip Code
Wyoming MI 49418-8717

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

Name of Employer Occupation
Spectrum Health Sr VP Business Development

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 24 / 2014

Transaction ID : A-CF1660

Amount of Each Receipt this Period
 250

Donation

B. Full Name (Last, First, Middle Initial)
Timothy Dye

Mailing Address 2244 Pheasant Avenue NW

City State Zip Code
Grand Rapids MI 49534-2385

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

Name of Employer Occupation
Truscott Rossman Vice President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 24 / 2014

Transaction ID : A-CF1662

Amount of Each Receipt this Period
 250

Donation

C. Full Name (Last, First, Middle Initial)
Christina Freese-Decker

Mailing Address 5936 Glen Ellyn Court SE

City State Zip Code
Grand Rapids MI 49546-3891

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

Name of Employer Occupation
Spectrum Health VP System Strategic Planning

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 24 / 2014

Transaction ID : A-CF1661

Amount of Each Receipt this Period
 250

Donation

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

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

750.00

**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 15 OF 63
	<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)
Moolenaar for Congress

A. Full Name (Last, First, Middle Initial)
Steven Heacock

Mailing Address 2560 Pebblebrook Drive SE

City State Zip Code
Grand Rapids MI 49546-7443

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

Name of Employer Occupation
Spectrum Health Sr VP Community Relations

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 24 / 2014

Transaction ID : A-CF1663

Amount of Each Receipt this Period
 1000
 Donation

B. Full Name (Last, First, Middle Initial)
Amy A. Lefebre

Mailing Address 811 Cadillac Drive SE

City State Zip Code
Grand Rapids MI 49506-3307

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

Name of Employer Occupation
Truscott Rossman Sr. Account Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 24 / 2014

Transaction ID : A-CF1664

Amount of Each Receipt this Period
 250
 Donation

C. Full Name (Last, First, Middle Initial)
Mark K. Lemoine

Mailing Address 4183 Tradewind Drive NE

City State Zip Code
Rockford MI 49341-8257

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

Name of Employer Occupation
Spectrum Health Director of Government Affairs

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 24 / 2014

Transaction ID : A-CF1665

Amount of Each Receipt this Period
 250
 Donation

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

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

1500.00

**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 16 OF 63
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

A. Full Name (Last, First, Middle Initial)
Billy H. Manns Jr.

Mailing Address 24582 Lee Baker Drive

City Southfield State MI Zip Code 48075-6805

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

Name of Employer Mercy Health St. Mary's Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 24 / 2014

Transaction ID : A-CF1666

Amount of Each Receipt this Period
250

Donation

B. Full Name (Last, First, Middle Initial)
Peter F. Secchia

Mailing Address 220 Lyon Street NW Suite 510

City Grand Rapids State MI Zip Code 49503-2210

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

Name of Employer Managing Partner Occupation SIBSCO LLC

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 24 / 2014

Transaction ID : A-CF1667

Amount of Each Receipt this Period
2600

Donation

C. Full Name (Last, First, Middle Initial)
John T Truscott

Mailing Address 124 W Allegan Street

City Lansing State MI Zip Code 48933-1718

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

Name of Employer Truscott Rossman Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 24 / 2014

Transaction ID : A-CF1668

Amount of Each Receipt this Period
500

Donation

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

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

3350.00

**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 17 OF 63
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

A. Full Name (Last, First, Middle Initial)
Gary S. Glaza

Mailing Address 4294 Windemere Drive

City State Zip Code
Saginaw MI 48603-1200

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

Name of Employer Occupation
Sahasa Realty Corp. CFO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
M M / D D / Y Y Y Y
10 / 27 / 2014

Transaction ID : A-CF1676

Amount of Each Receipt this Period
500

Donation

B. Full Name (Last, First, Middle Initial)
Sarah B. Jury

Mailing Address 5799 Dunrovin Drive

City State Zip Code
Saginaw MI 48638-5408

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

Name of Employer Occupation
n/a Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
M M / D D / Y Y Y Y
10 / 27 / 2014

Transaction ID : A-CF1677

Amount of Each Receipt this Period
500

Donation

C. Full Name (Last, First, Middle Initial)
Timothy P. Kelly

Mailing Address 25 Benton Road

City State Zip Code
Saginaw MI 48602-1945

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

Name of Employer Occupation
State of Michigan State Representative

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
M M / D D / Y Y Y Y
10 / 27 / 2014

Transaction ID : A-CF1678

Amount of Each Receipt this Period
250

Donation

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

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

1250.00

**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 18 OF 63
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

A. Full Name (Last, First, Middle Initial)
Patrick W. Mercier

Mailing Address 114 Grosse Pointe Boulevard

City State Zip Code
Grosse Pointe Farms MI 48236-3768

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

Name of Employer Occupation
Mercier Fine Arts Business Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		27		2014

Transaction ID : A-CF1673

Amount of Each Receipt this Period
500

Donation

B. Full Name (Last, First, Middle Initial)
Peter J. Mercier

Mailing Address 114 Grosse Pointe Boulevard

City State Zip Code
Grosse Pointe Farms MI 48236-3768

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

Name of Employer Occupation
P.J. Mercier & Co. Business Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		27		2014

Transaction ID : A-CF1674

Amount of Each Receipt this Period
1000

Donation

C. Full Name (Last, First, Middle Initial)
Raymond J. Rabadoux

Mailing Address 1398 Colony Drive

City State Zip Code
Saline MI 48176-1094

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

Name of Employer Occupation
Glacier Hills President/CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		27		2014

Transaction ID : A-CF1675

Amount of Each Receipt this Period
250

Donation

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

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

1750.00

**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 19 OF 63
	<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)
Moolenaar for Congress

A. Peter Shaheen
Full Name (Last, First, Middle Initial)
Mailing Address 1100 S Washington Avenue
City Saginaw State MI Zip Code 48601-2557
FEC ID number of contributing federal political committee. C
Name of Employer SSP Associates, Inc. Occupation Real estate development
Receipt For: 2014
 Primary General
 Other (specify)
Election Cycle-to-Date 5200

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 27 / 2014
Transaction ID : A-CF1679
Amount of Each Receipt this Period
2600
Donation

B. Sabrina M. Shaheen
Full Name (Last, First, Middle Initial)
Mailing Address 1100 S Washington Avenue Suite 3
City Saginaw State MI Zip Code 48601-2557
FEC ID number of contributing federal political committee. C
Name of Employer The Cronin Law Firm Occupation Attorney
Receipt For: 2014
 Primary General
 Other (specify)
Election Cycle-to-Date 2600

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 27 / 2014
Transaction ID : A-CF1680
Amount of Each Receipt this Period
2600
Donation

C. Farhad Shokoohi
Full Name (Last, First, Middle Initial)
Mailing Address 341 Golfview Drive
City Saginaw State MI Zip Code 48638-5827
FEC ID number of contributing federal political committee. C
Name of Employer Great Lakes Eye Institute Occupation Ophthalmologist
Receipt For: 2014
 Primary General
 Other (specify)
Election Cycle-to-Date 1000

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 27 / 2014
Transaction ID : A-CF1681
Amount of Each Receipt this Period
1000
Donation

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

6200.00

**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 20 OF 63
	<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)
Moolenaar for Congress

A. Full Name (Last, First, Middle Initial)
Herbert A. Spence III

Mailing Address 49 Benton Road

City State Zip Code
Saginaw MI 48602-1945

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Spence Brothers President & CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : A-CF1682

Amount of Each Receipt this Period

Donation

B. Full Name (Last, First, Middle Initial)
Hendrik G. Meijer

Mailing Address 99 Monroe Avenue NW
Suite 600

City State Zip Code
Grand Rapids MI 49503-6211

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Meijer, Inc. Co-Chairman & CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : A-CF1696

Amount of Each Receipt this Period

Donation

C. Full Name (Last, First, Middle Initial)
Mark D. Meijer

Mailing Address PO Box 2284

City State Zip Code
Grand Rapids MI 49501-2284

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Meijer, Inc. President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : A-CF1697

Amount of Each Receipt this Period

Donation

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

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

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 21 OF 63
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

A. Full Name (Last, First, Middle Initial)
Saginaw Chippewa Indian Tribe

Mailing Address 7070 E Broadway Road

City State Zip Code
Mt Pleasant MI 48858-8970

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 30 2014

Transaction ID : A-CF1713

Amount of Each Receipt this Period
 1600

Donation

B. Full Name (Last, First, Middle Initial)
Stephen Brownell

Mailing Address 306 Provencal Road

City State Zip Code
Grosse Pointe Farms MI 48236-2959

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

Name of Employer Occupation
The Kirlin Company Vice President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 30 2014

Transaction ID : A-CF1719

Amount of Each Receipt this Period
 1000

Donation

C. Full Name (Last, First, Middle Initial)
David B. Cotton

Mailing Address 15324 Windmill Pointe Drive

City State Zip Code
Grosse Pointe Park MI 48230-1744

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

Name of Employer Occupation
Meridian Health Plan President/CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 30 2014

Transaction ID : A-CF1720

Amount of Each Receipt this Period
 2600

Donation

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

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

5200.00

**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 22 OF 63
	<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)
Moolenaar for Congress

Full Name (Last, First, Middle Initial) David B. Cotton		Date of Receipt M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address 15324 Windmill Pointe Drive		Transaction ID : A-CF1721
City Grosse Pointe Park	State MI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400
Name of Employer Meridian Health Plan	Occupation President/CEO	Excess contribution - To be refunded
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200	

Full Name (Last, First, Middle Initial) Nancy Cotton		Date of Receipt M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address 33 Hendrie Lane		Transaction ID : A-CF1726
City Grosse Pointe Farms	State MI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600
Name of Employer n/a	Occupation Homemaker	Donation
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600	

Full Name (Last, First, Middle Initial) Nancy Cotton		Date of Receipt M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address 33 Hendrie Lane		Transaction ID : A-CF1727
City Grosse Pointe Farms	State MI	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400
Name of Employer n/a	Occupation Homemaker	Excess contribution - To be refunded
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600	

SUBTOTAL of Receipts This Page (optional).....	3400.00
TOTAL This Period (last page this line number only).....	

**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 23 OF 63
	<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)
Moolenaar for Congress

A. Full Name (Last, First, Middle Initial)
Sean P. Cotton

Mailing Address 33 Hendrie Lane

City State Zip Code
Grosse Pointe Farms MI 48236-3735

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

Name of Employer Occupation
Meridian Health Plan President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 30 / 2014

Transaction ID : A-CF1724

Amount of Each Receipt this Period
2600

Donation

B. Full Name (Last, First, Middle Initial)
Sean P. Cotton

Mailing Address 33 Hendrie Lane

City State Zip Code
Grosse Pointe Farms MI 48236-3735

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

Name of Employer Occupation
Meridian Health Plan President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 30 / 2014

Transaction ID : A-CF1725

Amount of Each Receipt this Period
400

Excess contribution - To be refunded

C. Full Name (Last, First, Middle Initial)
Shery Cotton

Mailing Address 15324 Windmill Pointe Drive

City State Zip Code
Grosse Pointe Park MI 48230-1744

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

Name of Employer Occupation
Meridian Health Plan Corporate COO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 30 / 2014

Transaction ID : A-CF1722

Amount of Each Receipt this Period
2600

Donation

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

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

5600.00

**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 24 OF 63
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

A. Full Name (Last, First, Middle Initial)
Shery Cotton

Mailing Address 15324 Windmill Pointe Drive

City State Zip Code
Grosse Pointe Park MI 48230-1744

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

Name of Employer Occupation
Meridian Health Plan Corporate COO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		30		2014

Transaction ID : A-CF1723

Amount of Each Receipt this Period
400

Excess contribution - To be refunded

B. Full Name (Last, First, Middle Initial)
Richard J. Garber, Jr.

Mailing Address 999 S Washington Avenue
Suite 1

City State Zip Code
Saginaw MI 48601-2573

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

Name of Employer Occupation
Garber Management Group President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2250

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		30		2014

Transaction ID : A-CF1707

Amount of Each Receipt this Period
1000

Donation

C. Full Name (Last, First, Middle Initial)
Jeffrey Harness

Mailing Address 20229 E 9 Mile Road

City State Zip Code
Saint Clair Shores MI 48080-1775

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

Name of Employer Occupation
Federal Screw Works VP Sales & Marketing

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		30		2014

Transaction ID : A-CF1728

Amount of Each Receipt this Period
500

Donation

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

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

1900.00

**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 25 OF 63
	<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)
Moolenaar for Congress

A. Full Name (Last, First, Middle Initial)
A. Rocky Raczkowski

Mailing Address 32064 Bonnet Hill Road

City Farmington Hills State MI Zip Code 48334-3404

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

Name of Employer Imperium Logistics LLC Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 30 / 2014

Transaction ID : A-CF1729

Amount of Each Receipt this Period
500

Donation

B. Full Name (Last, First, Middle Initial)
Deborah R. Reardon

Mailing Address 899 Breasbois Road

City Midland State MI Zip Code 48640-9328

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

Name of Employer n/a Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1125**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 30 / 2014

Transaction ID : A-CF1710

Amount of Each Receipt this Period
125

Donation

C. Full Name (Last, First, Middle Initial)
Louise Klarr

Mailing Address 1530 N Cranbrook Road

City Bloomfield Village State MI Zip Code 48301-2314

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

Name of Employer n/a Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 31 / 2014

Transaction ID : A-CF1733

Amount of Each Receipt this Period
2600

Donation

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

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

3225.00

**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)
 11a 11b 11c 11d
 12 13a 13b 14 15
 PAGE 26 OF 63

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

A. Full Name (Last, First, Middle Initial)
S. Gunnar Klarr

Mailing Address 1530 N Cranbrook Road

City Bloomfield Village State MI Zip Code 48301-2314

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

Name of Employer Self-employed Occupation Property Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 31 / 2014

Transaction ID : A-CF1732

Amount of Each Receipt this Period
 2600

Donation

B. Full Name (Last, First, Middle Initial)
Sarah Prues Hecker

Mailing Address 1314 Harvard Road

City Grosse Pointe State MI Zip Code 48230-1134

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

Name of Employer Prues Hecker LLC Occupation Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 31 / 2014

Transaction ID : A-CF1734

Amount of Each Receipt this Period
 250

Donation

C. Full Name (Last, First, Middle Initial)
Waheed Akbar M.D.

Mailing Address 580 Golfview Drive

City Saginaw State MI Zip Code 48638-5869

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

Name of Employer Self Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 03 / 2014

Transaction ID : A-CF1747

Amount of Each Receipt this Period
 500

Donation

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

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

3350.00

**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 27 OF 63
	<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)
Moolenaar for Congress

A. Full Name (Last, First, Middle Initial)
Sean D. Gehle

Mailing Address 1828 Boston Boulevard

City State Zip Code
Lansing MI 48910-1173

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

Name of Employer Occupation
Ascension Health Government Affairs

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		03		2014

Transaction ID : A-CF1748

Amount of Each Receipt this Period
250

Donation

B. Full Name (Last, First, Middle Initial)
Judith F. Smith

Mailing Address 730 E Blue Grass Road

City State Zip Code
Mt Pleasant MI 48858-9565

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

Name of Employer Occupation
n/a Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4600

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		04		2014

Transaction ID : A-CF1766

Amount of Each Receipt this Period
2000

Donation

C. Full Name (Last, First, Middle Initial)
Mildred A. Kelly

Mailing Address 5372 Clydesdale Lane

City State Zip Code
Saginaw MI 48603-2824

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

Name of Employer Occupation
Saginaw Medical Federal CU Administrator

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		07		2014

Transaction ID : A-CF1765

Amount of Each Receipt this Period
250

Donation

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

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

2500.00

55125.00

**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 28 OF 63
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

A. Full Name (Last, First, Middle Initial)
CMR Political Action Committee

Mailing Address PO Box 2485

City Springfield State VA Zip Code 22152-0485

FEC ID number of contributing federal political committee. **C C00469429**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **4500**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 22 / 2014

Transaction ID : A-CF1645

Amount of Each Receipt this Period
 2500

Donation

B. Full Name (Last, First, Middle Initial)
Credit Union Legislative Action Council (CULAC)

Mailing Address 601 Pennsylvania Avenue NW
South Building, Suite #600

City Washington State DC Zip Code 20004-2601

FEC ID number of contributing federal political committee. **C C00007880**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **10000**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 22 / 2014

Transaction ID : A-CF1644

Amount of Each Receipt this Period
 4000

Donation

C. Full Name (Last, First, Middle Initial)
Renaissance Health Service Corporation PAC

Mailing Address PO Box 293

City Okemos State MI Zip Code 48805-0293

FEC ID number of contributing federal political committee. **C C00450288**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 23 / 2014

Transaction ID : A-CF1652

Amount of Each Receipt this Period
 1000

Donation

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

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

7500.00

**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 29 OF 63
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

A. National Pro-Life Alliance PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 4521 Windsor Arms Court
 City Annandale State VA Zip Code 22003-5751
 FEC ID number of contributing federal political committee. **C** C00358051
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 24 / 2014
Transaction ID : A-CF1670
 Amount of Each Receipt this Period
 500
 Donation

B. GOP Generation Y Fund
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 9055
 City Peoria State IL Zip Code 61612-9055
 FEC ID number of contributing federal political committee. **C** C00448191
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 6000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 27 / 2014
Transaction ID : A-CF1671
 Amount of Each Receipt this Period
 5000
 Donation

C. Mr. Southern Missourian In The House PAC - (Mr. Smith PAC)
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 30844
 City Bethesda State MD Zip Code 20824-0844
 FEC ID number of contributing federal political committee. **C** C00563726
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 2600

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 27 / 2014
Transaction ID : A-CF1672
 Amount of Each Receipt this Period
 1600
 Donation

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

7100.00

**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 30 OF 63
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

A. Full Name (Last, First, Middle Initial)
Alticor PAC

Mailing Address 7575 Fulton Street E

City State Zip Code
Ada MI 49355-0001

FEC ID number of contributing federal political committee. **C** C00034884

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
M M / D D / Y Y Y Y
10 / 29 / 2014

Transaction ID : A-CF1694

Amount of Each Receipt this Period
1000
Donation

B. Full Name (Last, First, Middle Initial)
American Bankers Association PAC (BankPAC)

Mailing Address 1120 Connecticut Avenue NW

City State Zip Code
Washington DC 20036-3902

FEC ID number of contributing federal political committee. **C** C00004275

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3500

Date of Receipt
M M / D D / Y Y Y Y
10 / 29 / 2014

Transaction ID : A-CF1693

Amount of Each Receipt this Period
2500
Donation

C. Full Name (Last, First, Middle Initial)
American Dental PAC

Mailing Address 1111 14th Street NW
Suite 1100

City State Zip Code
Washington DC 20005-5627

FEC ID number of contributing federal political committee. **C** C00000729

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000

Date of Receipt
M M / D D / Y Y Y Y
10 / 29 / 2014

Transaction ID : A-CF1695

Amount of Each Receipt this Period
2500
Donation

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

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

6000.00

**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 31 OF 63
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

A. Full Name (Last, First, Middle Initial)
Ernst & Young PAC

Mailing Address 1101 New York Avenue NW

City Washington State DC Zip Code 20005-4269

FEC ID number of contributing federal political committee. **C** C00227744

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 30 / 2014

Transaction ID : A-CF1714

Amount of Each Receipt this Period
5000

Donation

B. Full Name (Last, First, Middle Initial)
Fund for American Opportunity PAC

Mailing Address PO Box 65796

City Washington State DC Zip Code 20035-5796

FEC ID number of contributing federal political committee. **C** C00336297

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 30 / 2014

Transaction ID : A-CF1715

Amount of Each Receipt this Period
1000

Donation

C. Full Name (Last, First, Middle Initial)
Gail Haines Leadership Fund

Mailing Address 120 N Washington Square
Suite 805

City Lansing State MI Zip Code 48933-1619

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 30 / 2014

Transaction ID : A-CF1716

Amount of Each Receipt this Period
500

Donation

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

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

6500.00

**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 32 OF 63
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

A. Full Name (Last, First, Middle Initial)
Health Alliance Plan PAC

Mailing Address 2850 W Grand Boulevard

City State Zip Code
Detroit MI 48202-2643

FEC ID number of contributing federal political committee. **C** C00410670

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500

Date of Receipt
 M M / D D / Y Y Y Y
 10 30 / 2014

Transaction ID : A-CF1717

Amount of Each Receipt this Period
 1000

Donation

B. Full Name (Last, First, Middle Initial)
IPAA Wildcatters Fund

Mailing Address 1201 15th Street NW
Suite 300

City State Zip Code
Washington DC 20005-2899

FEC ID number of contributing federal political committee. **C** C00246306

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y
 10 31 / 2014

Transaction ID : A-CF1730

Amount of Each Receipt this Period
 1000

Donation

C. Full Name (Last, First, Middle Initial)
Patriot Voices PAC

Mailing Address 315 Foxtail Lane

City State Zip Code
Spring City PA 19475-1677

FEC ID number of contributing federal political committee. **C** C00528307

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y
 10 31 / 2014

Transaction ID : A-CF1731

Amount of Each Receipt this Period
 1000

Donation

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

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

3000.00

**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 33 OF 63
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

A. Michigan Milk Producers PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 41310 Bridge Street
 City State Zip Code
 Novi MI 48375-1302
 FEC ID number of contributing federal political committee. **C** C00096594
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 2000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 01 / 2014
Transaction ID : A-CF1738
 Amount of Each Receipt this Period
 1000
 Donation

B. Dairy Farmers of America Inc. - DEPAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 10220 N Ambassador Drive
 City State Zip Code
 Kansas City MO 64153-1367
 FEC ID number of contributing federal political committee. **C** C00001388
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 1000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 03 / 2014
Transaction ID : A-CF1743
 Amount of Each Receipt this Period
 1000
 Donation

C. Henry Ford Health System PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 3551 Hamlin Road
 # MC2250
 City State Zip Code
 Auburn Hills MI 48326-2852
 FEC ID number of contributing federal political committee. **C** C00552141
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 250

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 03 / 2014
Transaction ID : A-CF1744
 Amount of Each Receipt this Period
 250
 Donation

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

2250.00

**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 34 OF 63
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

A. Full Name (Last, First, Middle Initial)
HUCK PAC

Mailing Address **PO Box 2008**

City **Little Rock** State **AR** Zip Code **72203-2008**

FEC ID number of contributing federal political committee. **C C00448373**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 03 / 2014

Transaction ID : A-CF1761

Amount of Each Receipt this Period
 Donation **3000**

B. Full Name (Last, First, Middle Initial)
Huntington Bancshares Inc. PAC (HBI-PAC)

Mailing Address **41 S High Street**

City **Columbus** State **OH** Zip Code **43215-6101**

FEC ID number of contributing federal political committee. **C C00165589**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 03 / 2014

Transaction ID : A-CF1739

Amount of Each Receipt this Period
 Donation **1000**

C. Full Name (Last, First, Middle Initial)
ITC Holdings Corp PAC

Mailing Address **201 Townsend Street
Suite 900**

City **Lansing** State **MI** Zip Code **48933-1529**

FEC ID number of contributing federal political committee. **C C00388462**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 03 / 2014

Transaction ID : A-CF1745

Amount of Each Receipt this Period
 Donation **2500**

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

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

6500.00

**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 35 OF 63
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

A. Michigan Sugar Company Growers PAC

Full Name (Last, First, Middle Initial)
Mailing Address 2600 S Euclid Avenue

City Bay City State MI Zip Code 48706-3414

FEC ID number of contributing federal political committee. **C C00384354**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **6000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 03 / 2014

Transaction ID : A-CF1746

Amount of Each Receipt this Period
 1500

Donation

B. Blue Cross & Blue Shield of MI PAC

Full Name (Last, First, Middle Initial)
Mailing Address 232 S Capitol Avenue # MCL10A

City Lansing State MI Zip Code 48933-1536

FEC ID number of contributing federal political committee. **C C00084061**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **10000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 04 / 2014

Transaction ID : A-CF1769

Amount of Each Receipt this Period
 3000

Donation

C. EHealth Inc. Political Action Committee (EHEALTH PAC)

Full Name (Last, First, Middle Initial)
Mailing Address 1615 L Street NW Suite 1100

City Washington State DC Zip Code 20036-5624

FEC ID number of contributing federal political committee. **C C00459289**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 04 / 2014

Transaction ID : A-CF1767

Amount of Each Receipt this Period
 1000

Donation

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

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

5500.00

**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 36 OF 63
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

A. Full Name (Last, First, Middle Initial)
McDonalds Corporation PAC

Mailing Address 2111 McDonalds Drive
Dept. 213

City State Zip Code
Oak Brook IL 60523-5500

FEC ID number of contributing federal political committee. **C C00063164**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000

Date of Receipt
M M / D D / Y Y Y Y
11 / 04 / 2014

Transaction ID : A-CF1768

Amount of Each Receipt this Period
5000

Donation

B. Full Name (Last, First, Middle Initial)
Action Committee for Rural Electrification (ACRE)

Mailing Address 4301 Wilson Boulevard

City State Zip Code
Arlington VA 22203-1867

FEC ID number of contributing federal political committee. **C C00002972**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify) Debt Retirement

Election Cycle-to-Date
7500

Date of Receipt
M M / D D / Y Y Y Y
11 / 24 / 2014

Transaction ID : A-CF1792

Amount of Each Receipt this Period
2500

Donation - Debt Retirement

C. Full Name (Last, First, Middle Initial)
Conservative American Network Delivering Increased Congressional Excellence (candice-Pac)

Mailing Address PO Box 183370

City State Zip Code
Shelby Township MI 48318-3370

FEC ID number of contributing federal political committee. **C C00488155**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify) Debt Retirement

Election Cycle-to-Date
1000

Date of Receipt
M M / D D / Y Y Y Y
11 / 24 / 2014

Transaction ID : A-CF1793

Amount of Each Receipt this Period
1000

Donation - Debt Retirement

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

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

8500.00

**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 37 OF 63
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

A. Full Name (Last, First, Middle Initial)
Energy Transfer Employee Mgmt Co PAC

Mailing Address 400 W 15th Street
Suite 720

City Austin State TX Zip Code 78701-1661

FEC ID number of contributing federal political committee. **C** C00438754

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 24 / 2014

Transaction ID : A-CF1795

Amount of Each Receipt this Period
 1000

Donation

B. Full Name (Last, First, Middle Initial)
Truth Is Markets Work Fund (aka Tim W Fund)

Mailing Address PO Box 2485

City Springfield State VA Zip Code 22152-0485

FEC ID number of contributing federal political committee. **C** C00498360

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify) Debt Retirement

Election Cycle-to-Date 2000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 24 / 2014

Transaction ID : A-CF1794

Amount of Each Receipt this Period
 1000

Donation - Debt Retirement

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 / 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).....

2000.00

54850.00

**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 38 OF 63
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

A. Full Name (Last, First, Middle Initial)
Young Guns Day IV 2014

Mailing Address 228 S Washington Street
Suite 115

City Alexandria State VA Zip Code 22314-5404

FEC ID number of contributing federal political committee. **C** C00568436

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4544.85

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 20 / 2014

Transaction ID : A-TF1634

Amount of Each Receipt this Period
4544.85

Transfer of joint fundraising proceeds

B. Full Name (Last, First, Middle Initial)
National Republican Congressional Committee (NRCC)

Mailing Address 320 1st Street SE

City Washington State DC Zip Code 20003-1838

FEC ID number of contributing federal political committee. **C** C00075820

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : A-TIP7

Amount of Each Receipt this Period
5000

Donation to joint fundraising committee

[MEMO ITEM]
Transfer Memo of Young Guns Day IV 2014 (9/29/2014)

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 / D D / 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).....

4544.85

4544.85

**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 39 OF 63
	<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)
Moolenaar for Congress

Full Name (Last, First, Middle Initial) A. Chemical Bank & Trust		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014
Mailing Address 333 W Main Street		Amount of Each Disbursement this Period 25 Transaction ID : B-E-1623
City Midland	State MI	
Zip Code 48640-5162	Purpose of Disbursement Bank Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. State of Michigan - UIA		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014
Mailing Address PO Box 33598		Amount of Each Disbursement this Period 301.11 Transaction ID : B-E-1622
City Detroit	State MI	
Zip Code 48232-5598	Purpose of Disbursement Unemployment insurance	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Strategic Media Services, Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014
Mailing Address 1911 Fort Myer Drive Suite 400		Amount of Each Disbursement this Period 133523.1 Transaction ID : B-E-1624
City Arlington	State VA	
Zip Code 22209-1617	Purpose of Disbursement TV Media Buy	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	133849.21
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 40 OF 63	
	<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)
Moolenaar for Congress

Full Name (Last, First, Middle Initial) A. Clare County Review		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2014
Mailing Address 105 W 4th Street		Amount of Each Disbursement this Period 275 Transaction ID : B-E-1621
City Clare	State MI	
Zip Code 48617-1458	Purpose of Disbursement Newspaper Ad	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Gladwin County Record		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2014
Mailing Address 700 E Cedar Avenue		Amount of Each Disbursement this Period 271.6 Transaction ID : B-E-1620
City Gladwin	State MI	
Zip Code 48624-2218	Purpose of Disbursement Newspaper Ads	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Strategic National LLC		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2014
Mailing Address 190 Monroe Avenue NW Suite 500		Amount of Each Disbursement this Period 16208.4 Transaction ID : B-E-1630
City Grand Rapids	State MI	
Zip Code 49503-2628	Purpose of Disbursement Mailings	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	16755.00
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 41 OF 63			
	<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)
Moolenaar for Congress

Full Name (Last, First, Middle Initial) A. Midland Postmaster		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2014
Mailing Address 2900 Rodd Street		Amount of Each Disbursement this Period 104.37 Transaction ID : B-E-1688
City Midland	State MI	
Zip Code 48640-4483	Purpose of Disbursement Postage	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. United States Treasury		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2014
Mailing Address 1500 Pennsylvania Avenue NW		Amount of Each Disbursement this Period 1210.42 Transaction ID : B-E-1628
City Washington	State DC	
Zip Code 20220-0001	Purpose of Disbursement Payroll taxes	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. John Moolenaar		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2014
Mailing Address 4410 Linden Drive		Amount of Each Disbursement this Period 284.4 Transaction ID : B-E-1687
City Midland	State MI	
Zip Code 48640-2614	Purpose of Disbursement Mileage	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1599.19
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 42 OF 63	
	<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)
Moolenaar for Congress

Full Name (Last, First, Middle Initial) A. Sarah Brooks		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2014
Mailing Address 210 Maple View Court		Amount of Each Disbursement this Period 604.45 Transaction ID : B-E-1689
City Hemlock	State MI	
Zip Code 48626-8455	Purpose of Disbursement Mileage	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. PayPal		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2014
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 48.45 Transaction ID : B-E-1657
City San Jose	State CA	
Zip Code 95125-5905	Purpose of Disbursement Credit card processing fees	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Chemical Bank & Trust		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2014
Mailing Address 333 W Main Street		Amount of Each Disbursement this Period 25 Transaction ID : B-E-1686
City Midland	State MI	
Zip Code 48640-5162	Purpose of Disbursement Bank fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	604.45
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 43 OF 63			
	<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)
Moolenaar for Congress

Full Name (Last, First, Middle Initial) A. Chemical Bank & Trust		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2014
Mailing Address 333 W Main Street		Amount of Each Disbursement this Period 25 Transaction ID : B-E-1691
City Midland State MI Zip Code 48640-5162	Purpose of Disbursement Bank fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) State: District:	
Category/Type 001		

Full Name (Last, First, Middle Initial) B. Strategic Media Services, Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2014
Mailing Address 1911 Fort Myer Drive Suite 400		Amount of Each Disbursement this Period 50000 Transaction ID : B-E-1692
City Arlington State VA Zip Code 22209-1617	Purpose of Disbursement TV & Cable Media Buy Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) State: District:	
Category/Type 004		

Full Name (Last, First, Middle Initial) c. Strategic National LLC		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2014
Mailing Address 190 Monroe Avenue NW Suite 500		Amount of Each Disbursement this Period 17337.6 Transaction ID : B-E-1685
City Grand Rapids State MI Zip Code 49503-2628	Purpose of Disbursement Mailings Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) State: District:	
Category/Type 004		

SUBTOTAL of Disbursements This Page (optional).....	67362.60
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 44 OF 63	
	<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)
Moolenaar for Congress

Full Name (Last, First, Middle Initial) A. Sarah Brooks		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2014
Mailing Address 210 Maple View Court		Amount of Each Disbursement this Period 500.68
City Hemlock State MI Zip Code 48626-8455	Purpose of Disbursement Mileage, expenses - itemized	Transaction ID : B-E-1690
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Original vendors exceeding reporting threshold itemized as memo transactions.
State: District:		

Full Name (Last, First, Middle Initial) B. Sam's Club		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2014
Mailing Address 5656 Bay Road		Amount of Each Disbursement this Period 158.68
City Saginaw State MI Zip Code 48604-2510	Purpose of Disbursement Office supplies	Transaction ID : B-S-142
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		Subitemization of Sarah Brooks(10/24/14)

Full Name (Last, First, Middle Initial) c. Chemical Bank & Trust		Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2014
Mailing Address 333 W Main Street		Amount of Each Disbursement this Period 25
City Midland State MI Zip Code 48640-5162	Purpose of Disbursement Bank fee	Transaction ID : B-E-1683
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	525.68
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 45 OF 63	
	<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)
Moolenaar for Congress

Full Name (Last, First, Middle Initial) A. Strategic Media Services, Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2014
Mailing Address 1911 Fort Myer Drive Suite 400		Amount of Each Disbursement this Period 33794
City Arlington	State VA	Zip Code 22209-1617
Purpose of Disbursement TV & Cable Media Buy	Category/ Type 004	
Candidate Name	Transaction ID : B-E-1684	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Mountain Town Station		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address 506 W Broadway Street		Amount of Each Disbursement this Period 1856.06
City Mt Pleasant	State MI	Zip Code 48858-2441
Purpose of Disbursement Catering for event on 10-16-14	Category/ Type 003	
Candidate Name	Transaction ID : B-E-1705	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. PayPal		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 30.35
City San Jose	State CA	Zip Code 95125-5905
Purpose of Disbursement Credit card processing fees	Category/ Type 001	
Candidate Name	Transaction ID : B-E-1712	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	35680.41
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 46 OF 63	
	<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)
Moolenaar for Congress

A. Cardmember Service

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 94014

City Palatine State IL Zip Code 60094-4014

Purpose of Disbursement
Credit card payment - itemized

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 31 / 2014

Amount of Each Disbursement this Period: 1500

Transaction ID : B-E-1758

Original vendors exceeding reporting threshold itemized as memo transactions.

B. Troppo

Full Name (Last, First, Middle Initial)
Mailing Address 111 E Michigan Avenue

City Lansing State MI Zip Code 48933-1376

Purpose of Disbursement
Catering for fundraiser

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 09 / 24 / 2014

Amount of Each Disbursement this Period: 1500

Transaction ID : B-S-145

[MEMO ITEM]
Subitemization of Cardmember Service(10/31/14)

C. Chemical Bank & Trust

Full Name (Last, First, Middle Initial)
Mailing Address 333 W Main Street

City Midland State MI Zip Code 48640-5162

Purpose of Disbursement
Bank service charge

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 31 / 2014

Amount of Each Disbursement this Period: 3

Transaction ID : B-E-1773

SUBTOTAL of Disbursements This Page (optional)..... 1503.00

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 47 OF 63			
	<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)
Moolenaar for Congress

Full Name (Last, First, Middle Initial) A. PayPal			Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 2145 Hamilton Avenue			Amount of Each Disbursement this Period 157.43
City San Jose	State CA	Zip Code 95125-5905	Transaction ID : B-E-1736
Purpose of Disbursement Credit card processing fees		001 Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. John D Boothroyd			Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 5104 Oakridge Drive			Amount of Each Disbursement this Period 855.13
City Midland	State MI	Zip Code 48640-1974	Transaction ID : B-E-1702
Purpose of Disbursement Wages		001 Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) c. Sarah Brooks			Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 210 Maple View Court			Amount of Each Disbursement this Period 1492.96
City Hemlock	State MI	Zip Code 48626-8455	Transaction ID : B-E-1703
Purpose of Disbursement Wages		001 Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	2505.52
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 48 OF 63	
	<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)
Moolenaar for Congress

Full Name (Last, First, Middle Initial) A. Adam Kroczaleski		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 5082 Lincoln Road		Amount of Each Disbursement this Period 1003.34
City Standish State MI Zip Code 48658-9437	Purpose of Disbursement Wages Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : B-E-1701

Full Name (Last, First, Middle Initial) B. Stephen R Walker		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 5806 Woodbridge Lane		Amount of Each Disbursement this Period 710.21
City Midland State MI Zip Code 48640-2124	Purpose of Disbursement Wages Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : B-E-1704

Full Name (Last, First, Middle Initial) c. Ogemaw County Voice		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2014
Mailing Address PO Box 22		Amount of Each Disbursement this Period 240
City West Branch State MI Zip Code 48661-0022	Purpose of Disbursement Newspaper ad Candidate Name Category/Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : B-E-1759

SUBTOTAL of Disbursements This Page (optional).....	1953.55
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 49 OF 63	
	<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)
Moolenaar for Congress

Full Name (Last, First, Middle Initial) A. QRP, Inc.		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2014
Mailing Address 94 Ashman Circle		Amount of Each Disbursement this Period 1005.94 Transaction ID : B-E-1760
City Midland State MI Zip Code 48640-4627	Purpose of Disbursement Print advertising - invitations Category/Type 004	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

Full Name (Last, First, Middle Initial) B. PayPal		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2014
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 30 Transaction ID : B-E-1791
City San Jose State CA Zip Code 95125-5905	Purpose of Disbursement Credit card processing fee Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

Full Name (Last, First, Middle Initial) C. H Hotel		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2014
Mailing Address 111 W Main Street		Amount of Each Disbursement this Period 1000 Transaction ID : B-E-1753
City Midland State MI Zip Code 48640-5155	Purpose of Disbursement Victory party on 11/4/14 Category/Type 007	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2035.94
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 50 OF 63			
	<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)
Moolenaar for Congress

Full Name (Last, First, Middle Initial) A. PayPal		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2014
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 5.55
City San Jose State CA Zip Code 95125-5905	Purpose of Disbursement Credit card processing fees	
Candidate Name	Category/Type 001	Transaction ID : B-E-1742
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) B. United States Treasury		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2014
Mailing Address 1500 Pennsylvania Avenue NW		Amount of Each Disbursement this Period 1229.76
City Washington State DC Zip Code 20220-0001	Purpose of Disbursement Payroll taxes	
Candidate Name	Category/Type 001	Transaction ID : B-E-1699
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) c. Sarah Brooks		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2014
Mailing Address 210 Maple View Court		Amount of Each Disbursement this Period 571.5
City Hemlock State MI Zip Code 48626-8455	Purpose of Disbursement Mileage	
Candidate Name	Category/Type 002	Transaction ID : B-E-1763
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1806.81
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 51 OF 63	
	<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)
Moolenaar for Congress

Full Name (Last, First, Middle Initial) A. John Moolenaar		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2014
Mailing Address 4410 Linden Drive		Amount of Each Disbursement this Period 473.85 Transaction ID : B-E-1764
City Midland State MI Zip Code 48640-2614	Purpose of Disbursement Mileage Category/Type 002	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Aristotle International, Inc		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2014
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 1000 Transaction ID : B-E-1770
City Washington State DC Zip Code 20003-1164	Purpose of Disbursement Campaign reporting software Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. State Of Michigan- Dept of Treasury		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2014
Mailing Address Dept 77003		Amount of Each Disbursement this Period 373.07 Transaction ID : B-E-1774
City Detroit State MI Zip Code 48277-0001	Purpose of Disbursement Michigan withholding tax Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1846.92
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 52 OF 63
	<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)
Moolenaar for Congress

Full Name (Last, First, Middle Initial) A. John D Boothroyd		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2014
Mailing Address 5104 Oakridge Drive		Amount of Each Disbursement this Period 855.13 Transaction ID : B-E-1780
City Midland	State MI	
Zip Code 48640-1974	Purpose of Disbursement Wages	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Sarah Brooks		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2014
Mailing Address 210 Maple View Court		Amount of Each Disbursement this Period 1492.96 Transaction ID : B-E-1781
City Hemlock	State MI	
Zip Code 48626-8455	Purpose of Disbursement Wages	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Adam Kroczaleski		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2014
Mailing Address 5082 Lincoln Road		Amount of Each Disbursement this Period 1003.33 Transaction ID : B-E-1779
City Standish	State MI	
Zip Code 48658-9437	Purpose of Disbursement Wages	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	3351.42
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 53 OF 63	
	<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)
Moolenaar for Congress

Full Name (Last, First, Middle Initial) A. Stephen R Walker		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2014
Mailing Address 5806 Woodbridge Lane		Amount of Each Disbursement this Period 760.13 Transaction ID : B-E-1782
City Midland	State MI	
Zip Code 48640-2124	Purpose of Disbursement Wages	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. United States Treasury		Date of Disbursement M M / D D / Y Y Y Y 11 / 17 / 2014
Mailing Address 1500 Pennsylvania Avenue NW		Amount of Each Disbursement this Period 1250.16 Transaction ID : B-E-1777
City Washington	State DC	
Zip Code 20220-0001	Purpose of Disbursement Payroll taxes	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Adam Kroczaleski		Date of Disbursement M M / D D / Y Y Y Y 11 / 17 / 2014
Mailing Address 5082 Lincoln Road		Amount of Each Disbursement this Period 1050.75 Transaction ID : B-E-1772
City Standish	State MI	
Zip Code 48658-9437	Purpose of Disbursement Mileage	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	3061.04
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 54 OF 63	
	<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)
Moolenaar for Congress

Full Name (Last, First, Middle Initial) A. Stephen R Walker		Date of Disbursement M M / D D / Y Y Y Y 11 / 17 / 2014
Mailing Address 5806 Woodbridge Lane		Amount of Each Disbursement this Period 1631
City Midland State MI Zip Code 48640-2124	Purpose of Disbursement Mileage, expenses - itemized	Transaction ID : B-E-1771
Candidate Name	002 Category/Type	Original vendors exceeding reporting threshold itemized as memo transactions.
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Andrews Hooper Pavlik, PLC		Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2014
Mailing Address 5915 Eastman Avenue Suite 100		Amount of Each Disbursement this Period 8474
City Midland State MI Zip Code 48640-6824	Purpose of Disbursement Accounting services	Transaction ID : B-E-1530
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. QRP, Inc.		Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2014
Mailing Address 94 Ashman Circle		Amount of Each Disbursement this Period 1570.15
City Midland State MI Zip Code 48640-4627	Purpose of Disbursement Print advertising - invitations	Transaction ID : B-E-1789
Candidate Name	004 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	11675.15
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 55 OF 63			
	<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)
Moolenaar for Congress

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. The Weekly		M M / D D / Y Y Y Y 11 / 24 / 2014
Mailing Address PO Box 11		Amount of Each Disbursement this Period
City State Zip Code Ovid MI 48866-0011		594
Purpose of Disbursement Newspaper ads		Transaction ID : B-E-1788
Candidate Name		
Office Sought:	Disbursement For:	
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. University Club of Grand Rapids		M M / D D / Y Y Y Y 11 / 24 / 2014
Mailing Address 111 Lyon Street NW Suite 1025		Amount of Each Disbursement this Period
City State Zip Code Grand Rapids MI 49503-2414		827.35
Purpose of Disbursement Catering for event on 10-24-14		Transaction ID : B-E-1787
Candidate Name		
Office Sought:	Disbursement For:	
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
C.		M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code		
Purpose of Disbursement		
Candidate Name		
Office Sought:	Disbursement For:	
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1421.35
TOTAL This Period (last page this line number only).....	287537.24

**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 56 OF 63			
	<input type="checkbox"/> 17 <input checked="" 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)
Moolenaar for Congress

Full Name (Last, First, Middle Initial) A. David B. Cotton		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address 15324 Windmill Pointe Drive		Amount of Each Disbursement this Period 400
City Grosse Pointe Park	State MI	Zip Code 48230-1744
Purpose of Disbursement Refund of excess contribution	Category/Type 010	
Candidate Name	Transaction ID : B-E-1754	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Nancy Cotton		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address 33 Hendrie Lane		Amount of Each Disbursement this Period 400
City Grosse Pointe Farms	State MI	Zip Code 48236-3735
Purpose of Disbursement Refund of excess contribution	Category/Type 010	
Candidate Name	Transaction ID : B-E-1757	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Sean P. Cotton		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address 33 Hendrie Lane		Amount of Each Disbursement this Period 400
City Grosse Pointe Farms	State MI	Zip Code 48236-3735
Purpose of Disbursement Refund of excess contribution	Category/Type 010	
Candidate Name	Transaction ID : B-E-1756	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1200.00
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 57 OF 63			
	<input type="checkbox"/> 17 <input checked="" 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)
Moolenaar for Congress

Full Name (Last, First, Middle Initial) A. Shery Cotton		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address 15324 Windmill Pointe Drive		Amount of Each Disbursement this Period 400
City Grosse Pointe Park	State MI Zip Code 48230-1744	
Purpose of Disbursement Refund of excess contribution	Category/Type 010	Transaction ID : B-E-1755
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	1600.00

**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 58 OF 63	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Moolenaar for Congress

Full Name (Last, First, Middle Initial) A. Upton For All Of Us		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address PO Box 490		Amount of Each Disbursement this Period 1000 Transaction ID : B-E-1737
City Saint Joseph	State MI	
Zip Code 49085-0490	Purpose of Disbursement Contributions to Candidate	Category/ Type 011
Candidate Name Frederick Stephen Upton	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: MI District: 06	

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	1000.00

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)

Moolenaar for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Stamas Properties		Nature of Debt (Purpose): Rent
Mailing Address Main Street		
City State	Zip Code	
Midland MI	48642	

Outstanding Balance Beginning This Period	Transaction ID : SD10-DEBT1797	
<input type="text" value="600"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="200"/>	<input type="text" value="0"/>	<input type="text" value="800"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor United States Treasury		Nature of Debt (Purpose): Payroll taxes
Mailing Address 1500 Pennsylvania Avenue NW		
City State	Zip Code	
Washington DC	20220-0001	

Outstanding Balance Beginning This Period	Transaction ID : SD10-DEBT1628	
<input type="text" value="1210.42"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0"/>	<input type="text" value="1210.42"/>	<input type="text" value="0"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Andrews Hooper Pavlik, PLC		Nature of Debt (Purpose): Accounting services
Mailing Address 5915 Eastman Avenue Suite 100		
City State	Zip Code	
Midland MI	48640-6824	

Outstanding Balance Beginning This Period	Transaction ID : SD10-DEBT1800	
<input type="text" value="11714"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="10920"/>	<input type="text" value="8474"/>	<input type="text" value="14160"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="14960.00"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one) 9 10

NAME OF COMMITTEE (In Full)

Moolenaar for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Victory Phones

Mailing Address 190 Monroe Avenue NW
 Suite 5

City State Zip Code
 Grand Rapids MI 49503-2628

Nature of Debt (Purpose):
 Telephone Town Hall

Outstanding Balance Beginning This Period **Transaction ID : SD10-DEBT1374**

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
LCM Strategies

Mailing Address PO Box 158513

City State Zip Code
 Nashville TN 37215-8513

Nature of Debt (Purpose):
 Online marketing and management

Outstanding Balance Beginning This Period **Transaction ID : SD10-DEBT1805**

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Grassroots Midwest LLC

Mailing Address PO Box 12157

City State Zip Code
 Lansing MI 48901-2157

Nature of Debt (Purpose):
 Fundraising services

Outstanding Balance Beginning This Period **Transaction ID : SD10-DEBT1813**

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="46170.16"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

Moolenaar for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
GSL Solutions, Inc.

Nature of Debt (Purpose):
Website hosting & support, email distribution

Mailing Address 1411 N West Shore Boulevard
Suite 204

City State Zip Code
Tampa FL 33607-4529

Outstanding Balance Beginning This Period

0

Transaction ID : SD10-DEBT1804

Amount Incurred This Period

1165

Payment This Period

0

Outstanding Balance at Close of This Period

1165

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
The Catalyst Group

Nature of Debt (Purpose):
Fundraising coordination

Mailing Address 600 Pennsylvania Avenue SE
Suite 330

City State Zip Code
Washington DC 20003-6300

Outstanding Balance Beginning This Period

0

Transaction ID : SD10-DEBT1801

Amount Incurred This Period

7150

Payment This Period

0

Outstanding Balance at Close of This Period

7150

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Strategic National LLC

Nature of Debt (Purpose):
Political consulting

Mailing Address 190 Monroe Avenue NW
Suite 500

City State Zip Code
Grand Rapids MI 49503-2628

Outstanding Balance Beginning This Period

124220.15

Transaction ID : SD10-DEBT1811

Amount Incurred This Period

30000

Payment This Period

16208.4

Outstanding Balance at Close of This Period

138011.75

- 1) **SUBTOTALS** This Period This Page (optional) ▶
- 2) **TOTALS** This Period (last page this line number only) ▶
- 3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶
- 4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

146326.75

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)

Moolenaar for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Victory Phones Live		Nature of Debt (Purpose): Phone calls to voters
Mailing Address 2900 Wilson Avenue SW Suite 101		
City State	Zip Code	
Grandville MI	49418-1286	

Outstanding Balance Beginning This Period	Transaction ID : SD10-DEBT1370	
<input type="text" value="43742.5"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="43742.5"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Victory Processing LLC		Nature of Debt (Purpose): Elections lists
Mailing Address 190 Monroe Avenue NW Suite 500		
City State	Zip Code	
Grand Rapids MI	49503-2628	

Outstanding Balance Beginning This Period	Transaction ID : SD10-DEBT1810	
<input type="text" value="1060"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="2314.31"/>	<input type="text" value="0"/>	<input type="text" value="3374.31"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Cardmember Service		Nature of Debt (Purpose): Credit card payment
Mailing Address PO Box 94014		
City State	Zip Code	
Palatine IL	60094-4014	

Outstanding Balance Beginning This Period	Transaction ID : SD10-DEBT1803	
<input type="text" value="4027.95"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="7832.25"/>	<input type="text" value="1500"/>	<input type="text" value="10360.2"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="57477.01"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)

Moolenaar for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Warner Norcross & Judd LLP		Nature of Debt (Purpose): Legal consulting
Mailing Address 900 Fifth Third Center 111 Lyon Street NW		
City State	Zip Code	
Grand Rapids MI	49803	

Outstanding Balance Beginning This Period	Transaction ID : SD10-DEBT1808	
<input type="text" value="0"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="15143.5"/>	<input type="text" value="0"/>	<input type="text" value="15143.5"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Pulse Red Communications, LLC		Nature of Debt (Purpose): Digital/Social Media Advertising
Mailing Address 190 Monroe Avenue NW Suite 5		
City State	Zip Code	
Grand Rapids MI	49503-2628	

Outstanding Balance Beginning This Period	Transaction ID : SD10-DEBT1812	
<input type="text" value="6948.25"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="6948.25"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City	State	Zip Code

Outstanding Balance Beginning This Period		
<input type="text"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text"/>	<input type="text"/>	<input type="text"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="22091.75"/>
2) TOTALS This Period (last page this line number only)	<input type="text" value="287025.67"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="287025.67"/>