

**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