

**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

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C

C00561530

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

STATE ▼ DISTRICT

MI

02

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

5. Covering Period

M M / D D / Y Y Y Y  
10 / 01 / 2023

through

M M / D D / Y Y Y Y  
12 / 31 / 2023*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 Bos, Kellie, M, Mrs.,

Signature of Treasurer

Bos, Kellie, M, Mrs.,

Date

M M / D D / Y Y Y Y  
06 / 13 / 2024

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

Office  
Use  
Only**FEC FORM 3**  
(Revised 05/2016)

**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

Moolenaar for Congress

Report Covering the Period:

From:

MM / DD / YYYY  
10 / 01 / 2023

To:

MM / DD / YYYY  
12 / 31 / 2023

|                                                                                                                  | COLUMN A<br>This Period | COLUMN B<br>Election Cycle-to-Date |
|------------------------------------------------------------------------------------------------------------------|-------------------------|------------------------------------|
| 6. Net Contributions (other than loans)                                                                          |                         |                                    |
| (a) Total Contributions<br>(other than loans) (from Line 11(e)) ....                                             | 229260.47               | 954927.15                          |
| (b) Total Contribution Refunds<br>(from Line 20(d)) .....                                                        | 2764.00                 | 5664.00                            |
| (c) Net Contributions (other than loans)<br>(subtract Line 6(b) from Line 6(a)) .....                            | 226496.47               | 949263.15                          |
| 7. Net Operating Expenditures                                                                                    |                         |                                    |
| (a) Total Operating Expenditures<br>(from Line 17) .....                                                         | 149551.96               | 569757.91                          |
| (b) Total Offsets to Operating<br>Expenditures (from Line 14) .....                                              | 157.80                  | 5457.80                            |
| (c) Net Operating Expenditures<br>(subtract Line 7(b) from Line 7(a)) .....                                      | 149394.16               | 564300.11                          |
| 8. Cash on Hand at Close of<br>Reporting Period (from Line 27) .....                                             | 1017715.94              |                                    |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | 0.00                    |                                    |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) ..... | 27356.15                |                                    |

For further information, contact the Federal Election Commission at 800-424-9530 or visit [www.fec.gov](http://www.fec.gov).

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

Moolenaar for Congress

Report Covering the Period:

From:

M M / D D / Y Y Y Y  
10 / 01 / 2023

To:

M M / D D / Y Y Y Y  
12 / 31 / 2023**I. RECEIPTS****COLUMN A**  
Total This Period**COLUMN B**  
Election Cycle-to-Date

## 11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than  
Political Committees

(i) Itemized (use Schedule A).....

136902.28

556888.62

(ii) Unitemized.....

2609.19

21413.77

(iii) TOTAL of contributions  
from individuals ▶

139511.47

578302.39

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees  
(such as PACs).....

89749.00

376624.76

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS  
(other than loans)  
(add Lines 11(a)(iii), (b), (c), and (d))..

229260.47

954927.15

12. TRANSFERS FROM OTHER  
AUTHORIZED COMMITTEES .....

24825.00

45675.00

## 13. LOANS:

(a) Made or Guaranteed by the  
Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS  
(add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING  
EXPENDITURES  
(Refunds, Rebates, etc.) .....

157.80

5457.80

15. OTHER RECEIPTS  
(Dividends, Interest, etc.) .....

4928.36

7863.26

16. TOTAL RECEIPTS (add Lines  
11(e), 12, 13(c), 14, and 15)  
(Carry Total to Line 24, page 4)..... ▶

259171.63

1013923.21

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 05/2016)

| II. DISBURSEMENTS                                                            | COLUMN A<br>Total This Period | COLUMN B<br>Election Cycle-to-Date |
|------------------------------------------------------------------------------|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES.....                                              | 149551.96                     | 569757.91                          |
| 18. TRANSFERS TO OTHER<br>AUTHORIZED COMMITTEES .....                        | 0.00                          | 0.00                               |
| 19. LOAN REPAYMENTS:                                                         |                               |                                    |
| (a) Of Loans Made or Guaranteed<br>by the Candidate.....                     | 0.00                          | 0.00                               |
| (b) Of All Other Loans .....                                                 | 0.00                          | 0.00                               |
| (c) TOTAL LOAN REPAYMENTS<br>(add Lines 19(a) and (b)).....                  | 0.00                          | 0.00                               |
| 20. REFUNDS OF CONTRIBUTIONS TO:                                             |                               |                                    |
| (a) Individuals/Persons Other<br>Than Political Committees .....             | 2764.00                       | 5664.00                            |
| (b) Political Party Committees.....                                          | 0.00                          | 0.00                               |
| (c) Other Political Committees<br>(such as PACs) .....                       | 0.00                          | 0.00                               |
| (d) TOTAL CONTRIBUTION REFUNDS<br>(add Lines 20(a), (b), and (c)).....       | 2764.00                       | 5664.00                            |
| 21. OTHER DISBURSEMENTS .....                                                | 3933.50                       | 11220.19                           |
| 22. <b>TOTAL DISBURSEMENTS</b><br>(add Lines 17, 18, 19(c), 20(d), and 21) ► | 156249.46                     | 586642.10                          |

## **III. CASH SUMMARY**

|                                                                                       |            |
|---------------------------------------------------------------------------------------|------------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....                                | 914793.77  |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....                            | 259171.63  |
| 25. SUBTOTAL (add Line 23 and Line 24).....                                           | 1173965.40 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....                               | 156249.46  |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD<br>(subtract Line 26 from Line 25)..... | 1017715.94 |

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 5 OF 191

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

Brann, Johnny, , ,

A.

Mailing Address 5057 Grand River Dr NE

City

Grand Rapids

State

MI

Zip Code

49525-9768

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BrannsOccupation  
Owner

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 03 |   |   | 2023 |   |   |   |

Transaction ID : A87C8E4F1B1D04B0F940

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Earmarked (Non-Directed) through WinRed

Full Name (Last, First, Middle Initial)

WinRed

B.

Mailing Address PO Box 9891

City

Arlington

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

148684.12

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 06 |   |   | 2023 |   |   |   |

Transaction ID : A6292E5FD52AD4388AB1

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not affected.

Full Name (Last, First, Middle Initial)

Mostrom, Jeremiah, , ,

C.

Mailing Address 8188 96th St SE

City

Alto

State

MI

Zip Code

49302-9503

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Axios HROccupation  
Chief Revenue Officer

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1579.93

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 10 |   |   | 2023 |   |   |   |

Transaction ID : A8F75EED52798430BA81

Amount of Each Receipt this Period

1579.93

☐ Memo Item

In-kind:Food and Beverage for Event

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

2579.93

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 6 OF 191

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

Born, Drew, W., ,

Mailing Address 939 146th Ave

City

Wayland

State

MI

Zip Code

49348-9731

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-EmployedOccupation  
Broker

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 10  |   | 11  |   | 2023        |

Transaction ID : AA64529D2A27E4A51AE6

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Clover-Adams, Jamie, L., ,

Mailing Address 3565 Wynbrooke Dr

City

Lansing

State

MI

Zip Code

48906-9228

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Michigan Asparagus Advisory BoardOccupation  
Executive Director

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 10  |   | 11  |   | 2023        |

Transaction ID : A53DAE39877D04529B5E

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Escobedo-Escotto, Audrey, L., ,

Mailing Address 1520 Ingram Ter

City

Silver Spring

State

MD

Zip Code

20906-5930

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Emerson Clinical Research InstituteOccupation  
Site Director

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 10  |   | 11  |   | 2023        |

Transaction ID : A93ED29A1836D41278E7

Amount of Each Receipt this Period

2000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶

3250.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 7 OF 191

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

Escobedo-Escotto, Audrey, L., ,

A.

Mailing Address 1520 Ingram Ter

City

Silver Spring

State

MD

Zip Code

20906-5930

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Emerson Clinical Research Institute

Occupation

Site Director

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 10  |   | 11  |   | 2023        |

Transaction ID : A7777075305DE466D97B

Amount of Each Receipt this Period

- 700.00



Memo Item

Redesignation From

B.

Full Name (Last, First, Middle Initial)

Escobedo-Escotto, Audrey, L., ,

Mailing Address 1520 Ingram Ter

City

Silver Spring

State

MD

Zip Code

20906-5930

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Emerson Clinical Research Institute

Occupation

Site Director

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 10  |   | 11  |   | 2023        |

Transaction ID : AD5A280260303478EBB0

Amount of Each Receipt this Period

700.00



Memo Item

Redesignation To

C.

Full Name (Last, First, Middle Initial)

Essex, Bruce, J., , Jr.

Mailing Address 221 W Webster Ave  
Ste 200

City

Muskegon

State

MI

Zip Code

49440-1243

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Port City Ventures

Occupation

Property Development

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 10  |   | 11  |   | 2023        |

Transaction ID : A7429F8CC9CAC4C48842

Amount of Each Receipt this Period

2000.00



Memo Item

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

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

2000.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 8 OF 191

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

Fazakerley, Mark, F., ,

A.

Mailing Address 391 Grover Rd

City

Muskegon

State

MI

Zip Code

49442-8504

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Eagle Alloy, Inc.

Occupation

Co-Chairman

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 10  |   | 11  |   | 2023        |

Transaction ID : A3E1129E726AF4220BD9

Amount of Each Receipt this Period

5000.00

☐ Memo Item

B.

Full Name (Last, First, Middle Initial)

Fazakerley, Mark, F., ,

Mailing Address 391 Grover Rd

City

Muskegon

State

MI

Zip Code

49442-8504

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Eagle Alloy, Inc.

Occupation

Co-Chairman

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 10  |   | 11  |   | 2023        |

Transaction ID : AF17427AAADEF46A7A54

Amount of Each Receipt this Period

- 1700.00

☒ Memo Item  
Redesignation From

C.

Full Name (Last, First, Middle Initial)

Fazakerley, Mark, F., ,

Mailing Address 391 Grover Rd

City

Muskegon

State

MI

Zip Code

49442-8504

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Eagle Alloy, Inc.

Occupation

Co-Chairman

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 10  |   | 11  |   | 2023        |

Transaction ID : A06266D3B1BEA41E1855

Amount of Each Receipt this Period

1700.00

☒ Memo Item  
Redesignation To

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

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

5000.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 9 OF 191

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

Grice, Jonathan, A., ,

Mailing Address 4992 E Loop Rd

City

Hesperia

State

MI

Zip Code

49421-9744

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HTP

Occupation

Pharmacist

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 1 | 1 |   | 2 | 0 | 2 | 3 |

Transaction ID : A6A18367CB4FA41C991B

Amount of Each Receipt this Period

500.00



Memo Item

B.

Full Name (Last, First, Middle Initial)

Hagen, Robert, , ,

Mailing Address 3980 N Euclid Ave

City

Bay City

State

MI

Zip Code

48706

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hagen Ford

Occupation

Car Dealer

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

512.50

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 1 | 1 |   | 2 | 0 | 2 | 3 |

Transaction ID : AA32612FFE8764A36B84

Amount of Each Receipt this Period

50.00



Memo Item

Earmarked (Non-Directed) through WinRed

C.

Full Name (Last, First, Middle Initial)

WinRed

Mailing Address PO Box 9891

City

Arlington

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

148684.12

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 1 | 6 |   | 2 | 0 | 2 | 3 |

Transaction ID : A376BBBD7D419643CEA14

Amount of Each Receipt this Period

50.00



Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not  
affected.

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

550.00

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 10 OF 191

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

Hines, Larry, W., ,

A.

Mailing Address 335 W Circle Dr

City

Muskegon

State

MI

Zip Code

49445-2715

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Hines Corporation

Occupation

President

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 11 |   |   | 2023 |   |   |   |

Transaction ID : AAE338CCCC6EB4D1C9D5

Amount of Each Receipt this Period

2000.00



Memo Item

Full Name (Last, First, Middle Initial)

Kuznar, Daniel, J., ,

B.

Mailing Address 648 Ranch Dr

City

Norton Shores

State

MI

Zip Code

49441-4942

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Quality Tool &amp; Stamping Company

Occupation

President

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 11 |   |   | 2023 |   |   |   |

Transaction ID : A4F7891A2840F4776979

Amount of Each Receipt this Period

2000.00



Memo Item

Full Name (Last, First, Middle Initial)

Leonard, Corey, V., ,

C.

Mailing Address 292 W Western Ave  
201

City

Muskegon

State

MI

Zip Code

49440-1167

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BigSigns.com

Occupation

CEO

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 11 |   |   | 2023 |   |   |   |

Transaction ID : A8A8F9C1F026845359B3

Amount of Each Receipt this Period

2000.00



Memo Item

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

6000.00

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 11 OF 191

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

Olsen, Deborah, J., ,

A.

Mailing Address 820 Oakmere Pl

City

Muskegon

State

MI

Zip Code

49445-2963

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Homemaker / Volunteer

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 1 | 1 |   | 2 | 0 | 2 | 3 |

Transaction ID : AFBC4B921C3C342E8934

Amount of Each Receipt this Period

4000.00

☐ Memo Item

B.

Full Name (Last, First, Middle Initial)

Olsen, Deborah, J., ,

Mailing Address 820 Oakmere Pl

City

Muskegon

State

MI

Zip Code

49445-2963

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Homemaker / Volunteer

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 1 | 1 |   | 2 | 0 | 2 | 3 |

Transaction ID : AAB3326532FF140998F1

Amount of Each Receipt this Period

- 2000.00

☒ Memo Item

Reattribution From

C.

Full Name (Last, First, Middle Initial)

Olsen, Stephen, G., ,

Mailing Address 820 Oakmere Pl

City

Muskegon

State

MI

Zip Code

49445-2963

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Northern Machine Tool &amp; Die

Occupation

President

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 1 | 1 |   | 2 | 0 | 2 | 3 |

Transaction ID : A8C394883E6CD42FD8DE

Amount of Each Receipt this Period

2000.00

☒ Memo Item

Reattribution To

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

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

4000.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 12 OF 191

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

Playford, Brad, W., ,

A.

Mailing Address 329 W Circle Dr

City

Muskegon

State

MI

Zip Code

49445-2715

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AvaSure, LLC

Occupation

Founder &amp; CEO

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 1 | 1 |   | 2 | 0 | 2 | 3 |

Transaction ID : A4343AE0D8A9A4F9BA76

Amount of Each Receipt this Period

2000.00



Memo Item

B.

Full Name (Last, First, Middle Initial)

Rooks, Jonathan, L., ,

Mailing Address 75 W Walton Ave

Ste A

City

Muskegon

State

MI

Zip Code

49440-1349

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Parkland Property Management, Inc.

Occupation

President

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 1 | 1 |   | 2 | 0 | 2 | 3 |

Transaction ID : A8F5D03F83A334D46980

Amount of Each Receipt this Period

2000.00



Memo Item

C.

Full Name (Last, First, Middle Initial)

Wickstrom, Benjamin, D., ,

Mailing Address 3896 Woodstream Dr SW

City

Grand Rapids

State

MI

Zip Code

49534-3594

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Erhardt Construction Company

Occupation

President &amp; CEO

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 1 | 1 |   | 2 | 0 | 2 | 3 |

Transaction ID : A00CFD23EEEE749A7B7F

Amount of Each Receipt this Period

2000.00



Memo Item

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

6000.00

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 13 OF 191

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

Tubergen, Jerry, L., ,

A.

Mailing Address 7505 River St SE

Ste 200

City

Ada

State

MI

Zip Code

49301-8547

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Ottawa Avenue Private Capital

Occupation

Executive

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 1 | 2 |   | 2 | 0 | 2 | 3 |

Transaction ID : A04E5F437117B46ABB1B

Amount of Each Receipt this Period

5000.00



Memo Item

B.

Full Name (Last, First, Middle Initial)

Tubergen, Jerry, L., ,

Mailing Address 7505 River St SE

Ste 200

City

Ada

State

MI

Zip Code

49301-8547

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Ottawa Avenue Private Capital

Occupation

Executive

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 1 | 2 |   | 2 | 0 | 2 | 3 |

Transaction ID : A7DAAE9742F7C443A93B

Amount of Each Receipt this Period

- 2500.00



Memo Item

Reattribution From

C.

Full Name (Last, First, Middle Initial)

Tubergen, Marcia, D., ,

Mailing Address 1911 Egypt Valley Ave NE

City

Ada

State

MI

Zip Code

49301-8393

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Homemaker

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 1 | 2 |   | 2 | 0 | 2 | 3 |

Transaction ID : A889A9B0F207E41E6895

Amount of Each Receipt this Period

2500.00



Memo Item

Reattribution To

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

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

5000.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 14 OF 191

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

Moskwa, Patti, Ann, ,

A. Mailing Address PO Box 904

City

Mackinac Island

State

MI

Zip Code

49757-0904

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Horn's Bar

Occupation

Business Owner

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

558.38

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 19 |   |   | 2023 |   |   |   |

Transaction ID : AC85669E6E5F74878BB5

Amount of Each Receipt this Period

8.34

☐ Memo Item

Earmarked (Non-Directed) through WinRed

Full Name (Last, First, Middle Initial)

WinRed

B. Mailing Address PO Box 9891

City

Arlington

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

148684.12

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 24 |   |   | 2023 |   |   |   |

Transaction ID : ADDD720BAB8114235B41

Amount of Each Receipt this Period

8.34

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not affected.

Full Name (Last, First, Middle Initial)

Charron, Rory, M., ,

C. Mailing Address 285 W Western Ave  
Apt 301

City

Muskegon

State

MI

Zip Code

49440-1127

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Parkland Investments, Inc.

Occupation

Real Estate

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 20 |   |   | 2023 |   |   |   |

Transaction ID : AE2D2B2B634394A45B19

Amount of Each Receipt this Period

2000.00

☐ Memo Item

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

2008.34

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 15 OF 191

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

Miller, Michael, E., ,

A.

Mailing Address 4251 Hulett Rd

City

Okemos

State

MI

Zip Code

48864-3252

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2900.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 0 |   | 2 | 0 | 2 | 3 |

Transaction ID : AA697C6A8A4184BABAA8

Amount of Each Receipt this Period

5800.00

☐ Memo Item

B.

Full Name (Last, First, Middle Initial)

Miller, Michael, E., ,

Mailing Address 4251 Hulett Rd

City

Okemos

State

MI

Zip Code

48864-3252

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2900.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 0 |   | 2 | 0 | 2 | 3 |

Transaction ID : A10C60A6F335D4E56A48

Amount of Each Receipt this Period

- 2900.00

☒ Memo Item

Reattribution From

C.

Full Name (Last, First, Middle Initial)

Miller, Anna, E., ,

Mailing Address 4251 Hulett Rd

City

Okemos

State

MI

Zip Code

48864-3252

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2900.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 0 |   | 2 | 0 | 2 | 3 |

Transaction ID : A0A46573E11664C2BB65

Amount of Each Receipt this Period

2900.00

☒ Memo Item

Reattribution To

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

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

5800.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 16 OF 191

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

Ware, Ellen, K., ,

Mailing Address 4611 N Stark Rd

City  
HopeState  
MIZip Code  
48628-9764FEC ID number of contributing  
federal political committee.

C

Name of Employer  
WSW Funeral HomeOccupation  
Funeral Director

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 20 2023

Transaction ID : A966A07CE2CFD4347A6D

Amount of Each Receipt this Period

250.00

☐ Memo Item

B.

Full Name (Last, First, Middle Initial)

Spicer, Phillip, A., ,

Mailing Address 605 Old Trail Dr

City  
Houghton LakeState  
MIZip Code  
48629-9379FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Spicer's Boat CityOccupation  
Owner

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 22 2023

Transaction ID : A212AA281128F4643AAD

Amount of Each Receipt this Period

250.00

☐ Memo Item

Earmarked (Non-Directed) through WinRed

C.

Full Name (Last, First, Middle Initial)

WinRed

Mailing Address PO Box 9891

City  
ArlingtonState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

148684.12

Date of Receipt

M M / D D / Y Y Y Y Y  
10 26 2023

Transaction ID : A8369026F4B364CE2887

Amount of Each Receipt this Period

250.00

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not affected.

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 17 OF 191

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

McKemey, Tripp, , ,

A.

Mailing Address 1155 F St NW

Suite 1200

City

Washington

State

DC

Zip Code

20004-1329

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Brownstein Hyatt Farber Schreck

Occupation

Government Affairs

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 5 |   | 2 | 0 | 2 | 3 |

Transaction ID : A5CA34F83309D43C5939

Amount of Each Receipt this Period

250.00



Memo Item

Earmarked (Non-Directed) through WinRed

B.

Full Name (Last, First, Middle Initial)

WinRed

Mailing Address PO Box 9891

City

Arlington

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

148684.12

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 3 | 0 |   | 2 | 0 | 2 | 3 |

Transaction ID : AD1458BB2A1A94BA198D

Amount of Each Receipt this Period

250.00



Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not affected.

C.

Full Name (Last, First, Middle Initial)

Allen, Jason, E., ,

Mailing Address 526 Washington St

City

Traverse City

State

MI

Zip Code

49686-2644

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Consultant

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 6 |   | 2 | 0 | 2 | 3 |

Transaction ID : A35D781E6E2994EF9B09

Amount of Each Receipt this Period

1000.00



Memo Item

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

1250.00

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 18 OF 191

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

Baker, Bradley, , ,

A.

Mailing Address UNDELIVERABLE XMAS 23

City

Middleville

State

MI

Zip Code

49333

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-EmployedOccupation  
Real Estate Agent

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 10  |   | 26  |   | 2023        |

Transaction ID : A50B23CB5BF9E4A36A02

Amount of Each Receipt this Period

1000.00

☐ Memo Item

B.

Full Name (Last, First, Middle Initial)

Hune, Joeseeph, R., ,

Mailing Address 10155 Roberts Rd

City

Gregory

State

MI

Zip Code

48137-9413

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Blue Cross Blue Shield of MIOccupation  
Director

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 10  |   | 26  |   | 2023        |

Transaction ID : A7C4CAD720E034CA38BC

Amount of Each Receipt this Period

250.00

☐ Memo Item

C.

Full Name (Last, First, Middle Initial)

Missad, Matthew, J., ,

Mailing Address 2801 E Beltline Ave NE

City

Grand Rapids

State

MI

Zip Code

49525-9680

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Universal Forest ProductsOccupation  
Chief Executive Officer

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 10  |   | 26  |   | 2023        |

Transaction ID : ADC964A71241343149E8

Amount of Each Receipt this Period

5000.00

☐ Memo Item

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

6250.00

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 19 OF 191

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

Missad, Matthew, J., ,

**A.** Mailing Address 2801 E Beltline Ave NE

City

Grand Rapids

State

MI

Zip Code

49525-9680

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Universal Forest Products

Occupation

Chief Executive Officer

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 10  |   | 26  |   | 2023        |

Transaction ID : A4A5AB775D79748E9BA2

Amount of Each Receipt this Period

- 1700.00

☒ Memo Item

Redesignation From

Full Name (Last, First, Middle Initial)

Missad, Matthew, J., ,

**B.** Mailing Address 2801 E Beltline Ave NE

City

Grand Rapids

State

MI

Zip Code

49525-9680

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Universal Forest Products

Occupation

Chief Executive Officer

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 10  |   | 26  |   | 2023        |

Transaction ID : A7C6A42F515F848FC9A7

Amount of Each Receipt this Period

1700.00

☒ Memo Item

Redesignation To

Full Name (Last, First, Middle Initial)

Mostrom, Jonathan, O., ,

**C.** Mailing Address 7865 92nd St SE

City

Caledonia

State

MI

Zip Code

49316-9595

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 10  |   | 26  |   | 2023        |

Transaction ID : A91543281D4AE44E9BBD

Amount of Each Receipt this Period

1000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

1000.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 20 OF 191

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

Schellhas, Robert, J., ,

A.

Mailing Address 2639 N Roosevelt St

City

Arlington

State

VA

Zip Code

22207-1011

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Ernst &amp; Young

Occupation

Consultant

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 7 |   | 2 | 0 | 2 | 3 |

Transaction ID : AE18E0A3C36894870862

Amount of Each Receipt this Period

3000.00



Memo Item

Earmarked (Non-Directed) through WinRed

B.

Full Name (Last, First, Middle Initial)

WinRed

Mailing Address PO Box 9891

City

Arlington

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

148684.12

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 1 |   | 2 | 0 | 2 | 3 |

Transaction ID : A1844B99AFD7A4AF1949

Amount of Each Receipt this Period

3000.00



Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not affected.

C.

Full Name (Last, First, Middle Initial)

Tiffany, Lyle, B., ,

Mailing Address 2267 Pontiac Trl

City

Ann Arbor

State

MI

Zip Code

48105-1224

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 8 |   | 2 | 0 | 2 | 3 |

Transaction ID : A95F631591AB74A78939

Amount of Each Receipt this Period

50.00



Memo Item

Earmarked (Non-Directed) through WinRed

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

3050.00

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 21 OF 191

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

WinRed

A.

Mailing Address PO Box 9891

City

Arlington

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2024



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

148684.12

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 11  |   | 02  |   | 2023        |

Transaction ID : A80C0E60FABBE4572969

Amount of Each Receipt this Period

50.00

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not affected.

B.

Full Name (Last, First, Middle Initial)

Oliver, Kyle, , ,

Mailing Address 1107 Priscilla Ln

City

Alexandria

State

VA

Zip Code

22308-2545

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BLUEWATER STRATEGIES

Occupation

Consultant

Receipt For: 2024



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 10  |   | 31  |   | 2023        |

Transaction ID : A9011BDBCF7094B97997

Amount of Each Receipt this Period

250.00

☐ Memo Item

Earmarked (Non-Directed) through WinRed

C.

Full Name (Last, First, Middle Initial)

WinRed

Mailing Address PO Box 9891

City

Arlington

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2024



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

148684.12

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 11  |   | 03  |   | 2023        |

Transaction ID : A9A26ADFAB7C4D99BA5

Amount of Each Receipt this Period

250.00

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not affected.

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

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

250.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 22 OF 191

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

Cameron, Ronald, M., ,

A. Mailing Address PO Box 21440

City

Little Rock

State

AR

Zip Code

72221-1440

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mountaire CorporationOccupation  
Chairman of The Board

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6600.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 11 |   |   | 01 |   |   | 2023 |   |   |   |

Transaction ID : AF1422089600D4244B0E

Amount of Each Receipt this Period

- 3300.00

☒ Memo Item

Redesignation From

B. Full Name (Last, First, Middle Initial)  
Cameron, Ronald, M., ,  
Mailing Address PO Box 21440

City

Little Rock

State

AR

Zip Code

72221-1440

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mountaire CorporationOccupation  
Chairman of The Board

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6600.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 11 |   |   | 01 |   |   | 2023 |   |   |   |

Transaction ID : A81430233F4D64E35971

Amount of Each Receipt this Period

3300.00

☒ Memo Item

Redesignation To

C. Full Name (Last, First, Middle Initial)  
Cameron, Ronald, M., ,  
Mailing Address PO Box 21440

City

Little Rock

State

AR

Zip Code

72221-1440

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mountaire CorporationOccupation  
Chairman of The Board

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6600.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 11 |   |   | 01 |   |   | 2023 |   |   |   |

Transaction ID : A0C4660049E3F482EBEF

Amount of Each Receipt this Period

6600.00

☐ Memo Item

Earmarked (Non-Directed) through WinRed

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

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

6600.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 23 OF 191

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

WinRed

A.

Mailing Address PO Box 9891

City

Arlington

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

148684.12

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 6 |   | 2 | 0 | 2 | 3 |

Transaction ID : A0344BE4147184B9EB74

Amount of Each Receipt this Period

6600.00

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not  
affected.

B.

Full Name (Last, First, Middle Initial)

Eastman, Sage, , ,

Mailing Address 3643 Trinity Dr

City

Alexandria

State

VA

Zip Code

22304-1840

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Mehlman Castagnetti Rosen &amp; Thomas

Occupation

Lobbyist

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 1 |   | 2 | 0 | 2 | 3 |

Transaction ID : A7DFF62DF28BD4BC7933

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Earmarked (Non-Directed) through WinRed

C.

Full Name (Last, First, Middle Initial)

WinRed

Mailing Address PO Box 9891

City

Arlington

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

148684.12

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 6 |   | 2 | 0 | 2 | 3 |

Transaction ID : AD04B6F2C79D44D5EA88

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not  
affected.

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

1000.00

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 24 OF 191

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

Herbruck, Gregory, S., ,

A.

Mailing Address 5380 Tee Seventeen Ct SE

City

Grand Rapids

State

MI

Zip Code

49546-9042

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Herbruck's Egg FarmOccupation  
CEO

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 11  |   | 02  |   | 2023        |

Transaction ID : ABEDCB3AB00A14C42998

Amount of Each Receipt this Period

- 1700.00

☒ Memo Item

Redesignation From

B.

Full Name (Last, First, Middle Initial)

Herbruck, Gregory, S., ,

Mailing Address 5380 Tee Seventeen Ct SE

City

Grand Rapids

State

MI

Zip Code

49546-9042

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Herbruck's Egg FarmOccupation  
CEO

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 11  |   | 02  |   | 2023        |

Transaction ID : A30AB2BA37C16424AB86

Amount of Each Receipt this Period

1700.00

☒ Memo Item

Redesignation To

C.

Full Name (Last, First, Middle Initial)

Herbruck, Gregory, S., ,

Mailing Address 5380 Tee Seventeen Ct SE

City

Grand Rapids

State

MI

Zip Code

49546-9042

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Herbruck's Egg FarmOccupation  
CEO

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 11  |   | 02  |   | 2023        |

Transaction ID : AE0F124C9B70749D7BD6

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Earmarked (Non-Directed) through WinRed

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

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

5000.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)  
WinRed

Mailing Address PO Box 9891

City  
ArlingtonState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

148684.12

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 11  |   | 02  |   | 2023        |

Transaction ID : AB04C94E96C6A429EBCC

Amount of Each Receipt this Period

5000.00

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not  
affected.

B.

Full Name (Last, First, Middle Initial)  
Herbruck, Harry, W., , III

Mailing Address 7340 Cascade Rd SE

City  
Grand RapidsState  
MIZip Code  
49546-9108FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Herbruck's Poultry Ranch

Farmer

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 11  |   | 02  |   | 2023        |

Transaction ID : ACA51506791A84601837

Amount of Each Receipt this Period

5000.00

☐ Memo Item

C.

Full Name (Last, First, Middle Initial)  
Herbruck, Harry, W., , III

Mailing Address 7340 Cascade Rd SE

City  
Grand RapidsState  
MIZip Code  
49546-9108FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Herbruck's Poultry Ranch

Farmer

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 11  |   | 02  |   | 2023        |

Transaction ID : A18B1AC913B9E4EE394A

Amount of Each Receipt this Period

- 1700.00

☒ Memo Item

Redesignation From

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

5000.00

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 PageFOR LINE NUMBER:  
(check only one)

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|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

Herbruck, Harry, W., , III

A.

Mailing Address 7340 Cascade Rd SE

City

Grand Rapids

State

MI

Zip Code

49546-9108

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Herbruck's Poultry Ranch

Occupation

Farmer

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

5000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 2 |   | 2 | 0 | 2 | 3 |

Transaction ID : AF157C4131D6341909B8

Amount of Each Receipt this Period

1700.00

☒ Memo Item

Redesignation To

B.

Full Name (Last, First, Middle Initial)

Burrell, Deborah, L., ,

Mailing Address 410 1st St SE

City

Washington

State

DC

Zip Code

20003-1819

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Burrell International Group

Occupation

Consultant

Receipt For: 2024

☒ Primary  
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

3000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 3 |   | 2 | 0 | 2 | 3 |

Transaction ID : AD5A76AA5C74E48338FA

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Earmarked (Non-Directed) through WinRed

C.

Full Name (Last, First, Middle Initial)

WinRed

Mailing Address PO Box 9891

City

Arlington

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2024

☒ Primary  
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

148684.12

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 8 |   | 2 | 0 | 2 | 3 |

Transaction ID : A0EC02FBF207249529D0

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not affected.

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

1000.00

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 PageFOR LINE NUMBER:  
(check only one)

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|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

Aliferis, Scott, A., ,

Mailing Address 9604 Timberview Ct

City

Vienna

State

VA

Zip Code

22182-4410

FEC ID number of contributing  
federal political committee.

C

Name of Employer

K &amp; L Gates LLP

Occupation

Government Affairs

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 8 |   | 2 | 0 | 2 | 3 |

Transaction ID : A79259B1714E94D829CD

Amount of Each Receipt this Period

500.00

☐ Memo Item

A.

Full Name (Last, First, Middle Initial)

Delgado, Martin, , ,

Mailing Address 12300 Skylark Ln

City

Bowie

State

MD

Zip Code

20715-2118

FEC ID number of contributing  
federal political committee.

C

Name of Employer

S3 Group

Occupation

Lobbyist

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 9 |   | 2 | 0 | 2 | 3 |

Transaction ID : A8F5C7A9F4E944E48926

Amount of Each Receipt this Period

- 200.00

☒ Memo Item

Redesignation From

B.

Full Name (Last, First, Middle Initial)

Delgado, Martin, , ,

Mailing Address 12300 Skylark Ln

City

Bowie

State

MD

Zip Code

20715-2118

FEC ID number of contributing  
federal political committee.

C

Name of Employer

S3 Group

Occupation

Lobbyist

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 9 |   | 2 | 0 | 2 | 3 |

Transaction ID : A7B6777DE6316425284D

Amount of Each Receipt this Period

200.00

☒ Memo Item

Redesignation To

C.

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 28 OF 191

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

Delgado, Martin, , ,

Mailing Address 12300 Skylark Ln

City

Bowie

State

MD

Zip Code

20715-2118

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
S3 GroupOccupation  
Lobbyist

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 11  |   | 09  |   | 2023        |

Transaction ID : A231211CDDC3449758CA

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Earmarked (Non-Directed) through WinRed

Full Name (Last, First, Middle Initial)

WinRed

Mailing Address PO Box 9891

City

Arlington

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

148684.12

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 11  |   | 14  |   | 2023        |

Transaction ID : A43C321DB4858424C89A

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not  
affected.

Full Name (Last, First, Middle Initial)

KGM Healthcare Ventures LLC

Mailing Address 142 Viridian Dr

City

Muskegon

State

MI

Zip Code

49440-1134

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 11  |   | 09  |   | 2023        |

Transaction ID : A9491AB10A0374EFA899

Amount of Each Receipt this Period

2000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶

3000.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 29 OF 191

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

Murphy, Kevin, G., ,

Mailing Address 142 Viridian Dr

City

Muskegon

State

MI

Zip Code

49440-1134

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-Employed

Occupation

Healthcare Management

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 11 |   |   | 09 |   |   | 2023 |   |   |   |

Transaction ID : AB985B3878EBB4D109EA

Amount of Each Receipt this Period

2000.00

☒ Memo Item

Partnership: KGM Healthcare Ventures LLC

Full Name (Last, First, Middle Initial)

Hagen, Robert, , ,

Mailing Address 3980 N Euclid Ave

City

Bay City

State

MI

Zip Code

48706

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hagen Ford

Occupation

Car Dealer

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

562.50

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 11 |   |   | 11 |   |   | 2023 |   |   |   |

Transaction ID : A83892A20EDC84C2A8DC

Amount of Each Receipt this Period

50.00

☐ Memo Item

Earmarked (Non-Directed) through WinRed

Full Name (Last, First, Middle Initial)

WinRed

Mailing Address PO Box 9891

City

Arlington

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

148684.12

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 11 |   |   | 11 |   |   | 2023 |   |   |   |

Transaction ID : A026D4A3B1AC24DA699A

Amount of Each Receipt this Period

50.00

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not affected.

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

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

50.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 30 OF 191

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

Fishman, Jay, A., ,

A.

Mailing Address 901 Wilshire Dr  
Suite 555City  
TroyState  
MIZip Code  
48084-5605

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 1 | 3 |   | 2 | 0 | 2 | 3 |

Transaction ID : A32947B0DDEF34D198C2

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Jay A. Fishman, Ltd.Occupation  
Investment Counsel

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1033.33

Amount of Each Receipt this Period

33.33

☐ Memo Item

Earmarked (Non-Directed) through WinRed

Full Name (Last, First, Middle Initial)  
WinRed

B.

Mailing Address PO Box 9891

City  
ArlingtonState  
VAZip Code  
22219-1891

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 1 | 3 |   | 2 | 0 | 2 | 3 |

Transaction ID : AC527047293E34541AA7

FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

148684.12

Amount of Each Receipt this Period

33.33

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not  
affected.Full Name (Last, First, Middle Initial)  
Jonker, Jerry, L., ,

C.

Mailing Address 3355 Egypt Valley Ave NE

City  
AdaState  
MIZip Code  
49301-9535

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 1 | 3 |   | 2 | 0 | 2 | 3 |

Transaction ID : A3C6CA95632B448F59AF

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Circular Recycling Technologies LLCOccupation  
Owner

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Amount of Each Receipt this Period

2500.00

☐ Memo Item

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

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

2533.33

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

Kennedy III, John, C., ,

A.

Mailing Address 3607 Broadmoor Ave SE

City

Grand Rapids

State

MI

Zip Code

49512-3902

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Autocam CorporationOccupation  
President / CEO

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3300.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 11  |   | 13  |   | 2023        |

Transaction ID : A037FB1959FBC46B3A47

Amount of Each Receipt this Period

6600.00

☐ Memo Item

B.

Full Name (Last, First, Middle Initial)

Kennedy III, John, C., ,

Mailing Address 3607 Broadmoor Ave SE

City

Grand Rapids

State

MI

Zip Code

49512-3902

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Autocam CorporationOccupation  
President / CEO

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3300.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 11  |   | 13  |   | 2023        |

Transaction ID : AE34A4B76A66445D090E

Amount of Each Receipt this Period

- 3300.00

☒ Memo Item

Reattribution From

C.

Full Name (Last, First, Middle Initial)

Kennedy, Nancy, G., ,

Mailing Address 3607 Broadmoor Ave SE

City

Grand Rapids

State

MI

Zip Code

49512-3902

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NoneOccupation  
Homemaker

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3300.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 11  |   | 13  |   | 2023        |

Transaction ID : AB7D01CB7FA5A4E4CA37

Amount of Each Receipt this Period

3300.00

☒ Memo Item

Reattribution To

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

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

6600.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 32 OF 191

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

Nance, Christopher, D., ,

A. Mailing Address 450 Mid Oak Dr

City

Muskegon

State

MI

Zip Code

49445-2726

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 1 | 3 |   | 2 | 0 | 2 | 3 |

Transaction ID : AEB048119A9C542E2B11

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Sumners, John, A., ,

B. Mailing Address 2814 McCracken St

City

Norton Shores

State

MI

Zip Code

49441-3421

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Beverage Parts Source, LLC

Occupation

Owner

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 1 | 3 |   | 2 | 0 | 2 | 3 |

Transaction ID : A1FBF464040A54DC6B96

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Stapleton, Thomas, , ,

C. Mailing Address 8504 WENDELL DR

City

Alexandria

State

VA

Zip Code

22308-2158

FEC ID number of contributing  
federal political committee.

C

Name of Employer

STAPLETON ASSOCIATES

Occupation

Consultant

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 1 | 6 |   | 2 | 0 | 2 | 3 |

Transaction ID : A09AD393B3F3D4375B27

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Earmarked (Non-Directed) through WinRed

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

3250.00

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 33 OF 191

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

WinRed

A.

Mailing Address PO Box 9891

City

Arlington

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

148684.12

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 1 | 6 |   | 2 | 0 | 2 | 3 |

Transaction ID : A0D3C6F6C803F464E994

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not  
affected.

B.

Full Name (Last, First, Middle Initial)

Moskwa, Patti, Ann, ,

Mailing Address PO Box 904

City

Mackinac Island

State

MI

Zip Code

49757-0904

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Horn's Bar

Business Owner

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

566.72

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 1 | 9 |   | 2 | 0 | 2 | 3 |

Transaction ID : A06039514A57B4D80B37

Amount of Each Receipt this Period

8.34

☐ Memo Item

Earmarked (Non-Directed) through WinRed

C.

Full Name (Last, First, Middle Initial)

WinRed

Mailing Address PO Box 9891

City

Arlington

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

148684.12

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 2 | 4 |   | 2 | 0 | 2 | 3 |

Transaction ID : A22AC389314974876849

Amount of Each Receipt this Period

8.34

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not  
affected.

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

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

8.34

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 34 OF 191

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

Tiffany, Lyle, B., ,

A.

Mailing Address 2267 Pontiac Trl

City

Ann Arbor

State

MI

Zip Code

48105-1224

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2024

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 28 / 2023D D / Y Y Y Y Y  
28 / 2023Y Y Y Y Y  
2023

Transaction ID : ADB6B70B094444746B28

Amount of Each Receipt this Period

50.00

☐ Memo Item

Earmarked (Non-Directed) through WinRed

B.

Full Name (Last, First, Middle Initial)

WinRed

Mailing Address PO Box 9891

City

Arlington

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2024

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

148684.12

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 01 / 2023D D / Y Y Y Y Y  
01 / 2023Y Y Y Y Y  
2023

Transaction ID : AB2D226B384314039AF3

Amount of Each Receipt this Period

50.00

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not affected.

C.

Full Name (Last, First, Middle Initial)

Kimbell, Jeffrey, J., ,

Mailing Address 401 9th St NW  
Ste 920

City

Washington

State

DC

Zip Code

20004-2194

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Health Care Consultant

Receipt For: 2024

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 29 / 2023D D / Y Y Y Y Y  
29 / 2023Y Y Y Y Y  
2023

Transaction ID : AA6BAB125FF9A47D3AB1

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Earmarked (Non-Directed) through WinRed

1550.00

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 35 OF 191

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

WinRed

A.

Mailing Address PO Box 9891

City

Arlington

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2024



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

148684.12

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 12  |   | 04  |   | 2023        |

Transaction ID : AA6ECE8E74EEB422CBFC

Amount of Each Receipt this Period

1500.00

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not  
affected.

B.

Full Name (Last, First, Middle Initial)

Bleiberg, Paul, E., ,

Mailing Address 2401 Calvert Street NW  
Apartment 321

City

Washington

State

DC

Zip Code

20008-2662

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

National Milk Producers Federation

Senior Director Gov Relations

Receipt For: 2024



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 11  |   | 30  |   | 2023        |

Transaction ID : AA709770242DE436482C

Amount of Each Receipt this Period

500.00

☐ Memo Item

Earmarked (Non-Directed) through WinRed

C.

Full Name (Last, First, Middle Initial)

WinRed

Mailing Address PO Box 9891

City

Arlington

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2024



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

148684.12

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 12  |   | 06  |   | 2023        |

Transaction ID : ACA0D6B46F1974E0F88E

Amount of Each Receipt this Period

500.00

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not  
affected.

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: PAGE 36 OF 191

(check only one)

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

Ellis, Grant, R., ,

A. Mailing Address 555 Steketee Rd NE

City

Ada

State

MI

Zip Code

49301-8765

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Home Acres Building Supply Co.

Occupation

President

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 11  |   | 30  |   | 2023        |

Transaction ID : A44204EA71B264E6CAA0

Amount of Each Receipt this Period

2500.00

☐ Memo Item

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

Everett, Warren, W., ,

Mailing Address 253 Purdy Dr

City

Alma

State

MI

Zip Code

48801-2160

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 11  |   | 30  |   | 2023        |

Transaction ID : AD61E5A9626C7417FBD4

Amount of Each Receipt this Period

2500.00

☐ Memo Item

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

Fick, Eric, , ,

Mailing Address 15 Patriot Way

City

Stafford

State

VA

Zip Code

22554

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Lyten Federal Solutions

Occupation

President

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 11  |   | 30  |   | 2023        |

Transaction ID : A57AD5C0AD0634295BFB

Amount of Each Receipt this Period

500.00

☐ Memo Item

Earmarked (Non-Directed) through WinRed

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

5500.00

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 PageFOR LINE NUMBER:  
(check only one)

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|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)  
WinRed

Mailing Address PO Box 9891

City  
ArlingtonState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

148684.12

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 05 2023

Transaction ID : A07D6840AAA654A5C994

Amount of Each Receipt this Period

500.00

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not  
affected.Full Name (Last, First, Middle Initial)  
Landheer, Ben, J., ,

Mailing Address 104 S Stewart Ave

City  
FremontState  
MIZip Code  
49412-1624FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

None

Retired

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 30 2023

Transaction ID : A840BA473C14E4509B46

Amount of Each Receipt this Period

500.00

☐ Memo ItemFull Name (Last, First, Middle Initial)  
Thomas, Michael, , ,

Mailing Address 3053 Andrews Drive Northwest

City  
AtlantaState  
GAZip Code  
30305FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Thomas Financial Group

Chairman

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 04 2023

Transaction ID : A5B79B0621D964497807

Amount of Each Receipt this Period

500.00

☐ Memo Item

Earmarked (Non-Directed) through WinRed

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

1000.00

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 PageFOR LINE NUMBER:  
(check only one)

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|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

WinRed

A.

Mailing Address PO Box 9891

City

Arlington

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

148684.12

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 12  |   | 07  |   | 2023        |

Transaction ID : AEC3F99BEEED4CA5B9E

Amount of Each Receipt this Period

500.00

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not affected.

B.

Full Name (Last, First, Middle Initial)

Payne, Christopher, W., ,

Mailing Address 5837 Carnoustie Ct

City

Ave Maria

State

FL

Zip Code

34142-5260

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Cross Potomac Consulting LLC

Consultant

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 12  |   | 05  |   | 2023        |

Transaction ID : AC80A4E0649FF45B0A14

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Earmarked (Non-Directed) through WinRed

C.

Full Name (Last, First, Middle Initial)

WinRed

Mailing Address PO Box 9891

City

Arlington

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

148684.12

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 12  |   | 08  |   | 2023        |

Transaction ID : AD10E1AC819E44CD09C5

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not affected.

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

1000.00

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 39 OF 191

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

Bischoff, Joseph, F., ,

A.

Mailing Address 7113 Marine Dr

City

Alexandria

State

VA

Zip Code

22307-1902

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information RequestedOccupation  
Consultant

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|     |   |     |   |             |  |
|-----|---|-----|---|-------------|--|
| M M | / | D D | / | Y Y Y Y Y Y |  |
| 12  |   | 06  |   | 2023        |  |

Transaction ID : AE4DD4F9651CD41A8A16

Amount of Each Receipt this Period

500.00

☐ Memo Item

Earmarked (Non-Directed) through WinRed

Full Name (Last, First, Middle Initial)

WinRed

B.

Mailing Address PO Box 9891

City

Arlington

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

148684.12

Date of Receipt

|     |   |     |   |             |  |
|-----|---|-----|---|-------------|--|
| M M | / | D D | / | Y Y Y Y Y Y |  |
| 12  |   | 11  |   | 2023        |  |

Transaction ID : A5D28CC90149341F1BD8

Amount of Each Receipt this Period

500.00

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not affected.

Full Name (Last, First, Middle Initial)

Johnston, Lee, A., ,

C.

Mailing Address 3748 E Southgate Dr

City

Midland

State

MI

Zip Code

48640-8507

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Johnston Contracting Inc.Occupation  
Engineer

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

|     |   |     |   |             |  |
|-----|---|-----|---|-------------|--|
| M M | / | D D | / | Y Y Y Y Y Y |  |
| 12  |   | 06  |   | 2023        |  |

Transaction ID : A4CCD2749F33B4C34944

Amount of Each Receipt this Period

5000.00

☐ Memo Item

5500.00

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 40 OF 191

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

Johnston, Lee, A., ,

A. Mailing Address 3748 E Southgate Dr

City  
MidlandState  
MIZip Code  
48640-8507FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Johnston Contracting Inc.Occupation  
Engineer

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 12  |   | 06  |   | 2023        |

Transaction ID : A98EDD74E74654E59961

Amount of Each Receipt this Period

- 1700.00

☒ Memo Item  
Redesignation From

Full Name (Last, First, Middle Initial)

Johnston, Lee, A., ,

B. Mailing Address 3748 E Southgate Dr

City  
MidlandState  
MIZip Code  
48640-8507FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Johnston Contracting Inc.Occupation  
Engineer

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 12  |   | 06  |   | 2023        |

Transaction ID : A8D558FE7B94246CC8B1

Amount of Each Receipt this Period

1700.00

☒ Memo Item  
Redesignation To

Full Name (Last, First, Middle Initial)

Sell, Tom, , ,

C. Mailing Address 2915 19th St

City  
LubbockState  
TXZip Code  
79410-1505FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Combest, Sell & AssociatesOccupation  
Consultant

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 12  |   | 06  |   | 2023        |

Transaction ID : ACB8A27AD7C694169BE9

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
Earmarked (Non-Directed) through WinRed

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

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

1000.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

WinRed

A.

Mailing Address PO Box 9891

City

Arlington

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

148684.12

Date of Receipt

|     |   |     |   |             |  |
|-----|---|-----|---|-------------|--|
| M M | / | D D | / | Y Y Y Y Y Y |  |
| 12  |   | 11  |   | 2023        |  |

Transaction ID : AE77F077638F8481886E

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not  
affected.

B.

Full Name (Last, First, Middle Initial)

Hagen, Robert, , ,

Mailing Address 3980 N Euclid Ave

City

Bay City

State

MI

Zip Code

48706

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Hagen Ford

Car Dealer

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

612.50

Date of Receipt

|     |   |     |   |             |  |
|-----|---|-----|---|-------------|--|
| M M | / | D D | / | Y Y Y Y Y Y |  |
| 12  |   | 11  |   | 2023        |  |

Transaction ID : A455803F7DDB44526A65

Amount of Each Receipt this Period

50.00

☐ Memo Item

Earmarked (Non-Directed) through WinRed

C.

Full Name (Last, First, Middle Initial)

WinRed

Mailing Address PO Box 9891

City

Arlington

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

148684.12

Date of Receipt

|     |   |     |   |             |  |
|-----|---|-----|---|-------------|--|
| M M | / | D D | / | Y Y Y Y Y Y |  |
| 12  |   | 14  |   | 2023        |  |

Transaction ID : A5A1C2C64B0F94CBF9B5

Amount of Each Receipt this Period

50.00

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not  
affected.

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

50.00

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 PageFOR LINE NUMBER:  
(check only one)

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|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

Sok, Justin, , ,

A.

Mailing Address 534 23rd PI NE

City

Washington

State

DC

Zip Code

20002

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Rich Feuer AndersonOccupation  
Gov't Affairs Consultant

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12  |   | 11  |   | 2023    |

Transaction ID : ACBA28FC624B543E2B2C

Amount of Each Receipt this Period

250.00

☐ Memo Item

Earmarked (Non-Directed) through WinRed

Full Name (Last, First, Middle Initial)

WinRed

B.

Mailing Address PO Box 9891

City

Arlington

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

148684.12

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12  |   | 14  |   | 2023    |

Transaction ID : A7623731C1A904F8EBB1

Amount of Each Receipt this Period

250.00

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not affected.

Full Name (Last, First, Middle Initial)

Johnson, H. Fisk, , ,

C.

Mailing Address 555 Main Street  
Suite 500

City

Racine

State

WI

Zip Code

53403-4616

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
S.C. Johnson & Son, Inc.Occupation  
Chairman / CEO

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12  |   | 12  |   | 2023    |

Transaction ID : AC9984670B6D64B13995

Amount of Each Receipt this Period

2000.00

☐ Memo Item

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

2250.00

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 PageFOR LINE NUMBER:  
(check only one)

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|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

Broydrick, William, , ,

A.

Mailing Address 102 Saint Lawrence Street

City

DEWEY BEACH

State

DE

Zip Code

19971

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BROYDRICK AND ASSOCIATES

Occupation

Consultant

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 1 | 3 |   | 2 | 0 | 2 | 3 |

Transaction ID : A9A770A2C2CBD4153B0E

Amount of Each Receipt this Period

500.00

☐ Memo Item

Earmarked (Non-Directed) through WinRed

Full Name (Last, First, Middle Initial)

WinRed

B.

Mailing Address PO Box 9891

City

Arlington

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

148684.12

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 1 | 8 |   | 2 | 0 | 2 | 3 |

Transaction ID : ABDE3C57EC76841489DA

Amount of Each Receipt this Period

500.00

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not affected.

Full Name (Last, First, Middle Initial)

Clark, Bessie, F., ,

C.

Mailing Address 2013 Sequoia Ct

City

Weidman

State

MI

Zip Code

48893-8833

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 1 | 4 |   | 2 | 0 | 2 | 3 |

Transaction ID : A7FD24311227A48C3B0D

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

550.00

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 44 OF 191

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

Schauman, Ronald, J., ,

A. Mailing Address 10212 Willows Bend Ct

City  
FreelandState  
MIZip Code  
48623-9137FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Schaumans, Inc.Occupation  
Builder / Developer

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 12  |   | 14  |   | 2023        |

Transaction ID : AEF17D0BC0CB74427BDA

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Smith, W. Sidney, , ,

B. Mailing Address 108 S University Ave  
Ste 6City  
Mount PleasantState  
MIZip Code  
48858-2327FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Smith Equities Corp.Occupation  
Real Estate Developer

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 12  |   | 14  |   | 2023        |

Transaction ID : A306A66C323FA45AE8F4

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Thibault, Mark, R., ,

C. Mailing Address 642 Lincoln Rd

City  
Grosse PointeState  
MIZip Code  
48230-1220FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NoneOccupation  
Retired

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 12  |   | 14  |   | 2023        |

Transaction ID : AF7145161BCBC4AFFA50

Amount of Each Receipt this Period

300.00

☐ Memo Item

3800.00

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 PageFOR LINE NUMBER:  
(check only one)

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|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

Richman, Karyn, , ,

A.

Mailing Address 641 E Street NE

City

Washington

State

DC

Zip Code

20002

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information RequestedOccupation  
Consultant

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 12  |   | 16  |   | 2023        |

Transaction ID : A8BF987448E5E4ED2803

Amount of Each Receipt this Period

500.00

☐ Memo Item

Earmarked (Non-Directed) through WinRed

B.

Full Name (Last, First, Middle Initial)

WinRed

Mailing Address PO Box 9891

City

Arlington

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

148684.12

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 12  |   | 21  |   | 2023        |

Transaction ID : A9C831A4587E64DB3AD6

Amount of Each Receipt this Period

500.00

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not affected.

C.

Full Name (Last, First, Middle Initial)

Cook, Dan, , ,

Mailing Address PO Box 620445

City

Woodside

State

CA

Zip Code

94062

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Lyten, Inc

Occupation

Executive

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 12  |   | 17  |   | 2023        |

Transaction ID : A39D2D25D3922404E88F

Amount of Each Receipt this Period

500.00

☐ Memo Item

Earmarked (Non-Directed) through WinRed

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

1000.00

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 PageFOR LINE NUMBER:  
(check only one)

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|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

WinRed

A.

Mailing Address PO Box 9891

City

Arlington

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

148684.12

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 2 | 1 |   | 2 | 0 | 3 |   |

Transaction ID : AC68E022C87B54F2B803

Amount of Each Receipt this Period

500.00

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not  
affected.

B.

Full Name (Last, First, Middle Initial)

Battistoni, Joel, C., ,

Mailing Address 25 SW Ruellen Rd

City

Stevenson

State

WA

Zip Code

98648-9100

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Portland Tacoma Consulting LLC

Owner / Consultant

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 1 | 9 |   | 2 | 0 | 3 |   |

Transaction ID : A6E5654539EEB4A938F9

Amount of Each Receipt this Period

3000.00

☐ Memo Item

C.

Full Name (Last, First, Middle Initial)

Black, William, M., , Jr.

Mailing Address 10 Player Grove Ct

City

Spring

State

TX

Zip Code

77382-2124

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Black &amp; Rossi LLC

Founder &amp; CEO

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 1 | 9 |   | 2 | 0 | 3 |   |

Transaction ID : A0315B5F7A0674ACEAA0

Amount of Each Receipt this Period

3000.00

☐ Memo Item

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

6000.00

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 47 OF 191

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

Hubert II, Laverne, P., ,

A.

Mailing Address 870 E FM 772

City

Riviera

State

TX

Zip Code

78379-3593

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information RequestedOccupation  
Principal / Consultant

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 12 |   |   | 19 |   |   | 2023 |   |   |   |

Transaction ID : A792982B1D3A340E2828

Amount of Each Receipt this Period

250.00

☐ Memo Item

B.

Full Name (Last, First, Middle Initial)

Kozakiewicz, Daniel, L., ,

Mailing Address 5002 Foxcroft Dr

City

Midland

State

MI

Zip Code

48642-3299

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NoneOccupation  
Retired

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 12 |   |   | 19 |   |   | 2023 |   |   |   |

Transaction ID : AA459DB2D631045F5A15

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Earmarked (Non-Directed) through WinRed

C.

Full Name (Last, First, Middle Initial)

WinRed

Mailing Address PO Box 9891

City

Arlington

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

148684.12

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 12 |   |   | 22 |   |   | 2023 |   |   |   |

Transaction ID : AA575D91017F048CEBF4

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not  
affected.

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

1250.00

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 PageFOR LINE NUMBER:  
(check only one)

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|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

Mika, Matthew, D., ,

A.

Mailing Address 2016 D St NE

Apt 3

City

Washington

State

DC

Zip Code

20002-6725

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AmericanHort

Occupation

VP, Advocacy &amp; Govt Affairs

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1520.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 1 | 9 |   | 2 | 0 | 2 | 3 |

Transaction ID : A88650CDBF18C43CF86F

Amount of Each Receipt this Period

1000.00



Memo Item

B.

Full Name (Last, First, Middle Initial)

Moskwa, Patti, Ann, ,

Mailing Address PO Box 904

City

Mackinac Island

State

MI

Zip Code

49757-0904

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Horn's Bar

Occupation

Business Owner

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

575.06

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 1 | 9 |   | 2 | 0 | 2 | 3 |

Transaction ID : A6C4B4C3D827C441B85E

Amount of Each Receipt this Period

8.34



Memo Item

Earmarked (Non-Directed) through WinRed

C.

Full Name (Last, First, Middle Initial)

WinRed

Mailing Address PO Box 9891

City

Arlington

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

148684.12

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 2 | 2 |   | 2 | 0 | 2 | 3 |

Transaction ID : A3DCE2634741B4ADF9B3

Amount of Each Receipt this Period

8.34



Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not  
affected.

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

1008.34

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 PageFOR LINE NUMBER:  
(check only one)

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|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

Russell, Randall, M., ,

A.

Mailing Address 1919 S Eads St

Ste 103

City

Arlington

State

VA

Zip Code

22202-3028

FEC ID number of contributing  
federal political committee.

C

Name of Employer

The Russell Group

Occupation

Consultant

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 1 | 9 |   | 2 | 0 | 3 |   |

Transaction ID : A6D01B862715846B8BBE

Amount of Each Receipt this Period

1000.00



Memo Item

Full Name (Last, First, Middle Initial)

Sault Ste. Marie Tribe Chippewa Indians

B.

Mailing Address 523 Ashmun St

City

Sault Sainte Marie

State

MI

Zip Code

49783-1907

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2900.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 1 | 9 |   | 2 | 0 | 3 |   |

Transaction ID : ADA80C344BC7049A4991

Amount of Each Receipt this Period

2900.00



Memo Item

Full Name (Last, First, Middle Initial)

Brody, Michael, , ,

C.

Mailing Address 3299 K St NW

Apt 401

City

Washington

State

DC

Zip Code

20007-4447

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Brody Group LLC

Occupation

Consultant

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 2 | 0 |   | 2 | 0 | 3 |   |

Transaction ID : AC467BDD8DD44BBAA19

Amount of Each Receipt this Period

500.00



Memo Item

Earmarked (Non-Directed) through WinRed

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

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

4400.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

WinRed

A.

Mailing Address PO Box 9891

City

Arlington

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

148684.12

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 2 | 6 |   | 2 | 0 | 2 | 3 |

Transaction ID : A37C7688263F64FB7850

Amount of Each Receipt this Period

500.00

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not  
affected.

B.

Full Name (Last, First, Middle Initial)

Kepler, David, E., ,

Mailing Address 912 Turtle Cv

City

Sanford

State

MI

Zip Code

48657-9342

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

None

Retired

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

6732.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 2 | 0 |   | 2 | 0 | 2 | 3 |

Transaction ID : AA5DD623DA9C3423E8AB

Amount of Each Receipt this Period

132.00

☐ Memo Item

Refunded excess contribution on 12/27/23

C.

Full Name (Last, First, Middle Initial)

WinRed

Mailing Address PO Box 9891

City

Arlington

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

148684.12

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 2 | 6 |   | 2 | 0 | 2 | 3 |

Transaction ID : A7EAFDA7089F34289B3A

Amount of Each Receipt this Period

132.00

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not  
affected.

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

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

132.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

Kepler, David, E., ,

A.

Mailing Address 912 Turtle Cv

City

Sanford

State

MI

Zip Code

48657-9342

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

6732.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 2 | 0 |   | 2 | 0 | 2 | 3 |

Transaction ID : A4E493EA467164C09801

Amount of Each Receipt this Period

- 3300.00



Memo Item

Redesignation From

B.

Full Name (Last, First, Middle Initial)

Kepler, David, E., ,

Mailing Address 912 Turtle Cv

City

Sanford

State

MI

Zip Code

48657-9342

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

6732.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 2 | 0 |   | 2 | 0 | 2 | 3 |

Transaction ID : A0A05751BB3184B5FA93

Amount of Each Receipt this Period

3300.00



Memo Item

Redesignation To

C.

Full Name (Last, First, Middle Initial)

Kepler, David, E., ,

Mailing Address 912 Turtle Cv

City

Sanford

State

MI

Zip Code

48657-9342

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

6732.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 2 | 0 |   | 2 | 0 | 2 | 3 |

Transaction ID : A641B5B29FD4749F0BE8

Amount of Each Receipt this Period

3300.00



Memo Item

Earmarked (Non-Directed) through WinRed

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

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

3300.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

WinRed

A. Mailing Address PO Box 9891

City  
ArlingtonState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

148684.12

Date of Receipt

M M / D D / Y Y Y Y Y  
12 26 2023

Transaction ID : A6C8EDA526CBB457798B

Amount of Each Receipt this Period

3300.00

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not  
affected.B. Full Name (Last, First, Middle Initial)  
Kepler, Patricia, A., ,

Mailing Address 912 Turtle Cove

City  
SanfordState  
MIZip Code  
48657-9342FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

None

Homemaker

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6732.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 20 2023

Transaction ID : A599C2CB8B9BF4CFBA40

Amount of Each Receipt this Period

- 3300.00

☒ Memo Item

Redesignation From

C. Full Name (Last, First, Middle Initial)  
Kepler, Patricia, A., ,

Mailing Address 912 Turtle Cove

City  
SanfordState  
MIZip Code  
48657-9342FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

None

Homemaker

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6732.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 20 2023

Transaction ID : A75009D561FCC4052B10

Amount of Each Receipt this Period

3300.00

☒ Memo Item

Redesignation To

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

0.00

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 PageFOR LINE NUMBER:  
(check only one)

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|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

Kepler, Patricia, A., ,

A.

Mailing Address 912 Turtle Cove

City

Sanford

State

MI

Zip Code

48657-9342

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Homemaker

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

6732.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 2 | 0 |   | 2 | 0 | 2 | 3 |

Transaction ID : AF37BD7C716CC41DF83F

Amount of Each Receipt this Period

3300.00



Memo Item

Earmarked (Non-Directed) through WinRed

B.

Full Name (Last, First, Middle Initial)

WinRed

Mailing Address PO Box 9891

City

Arlington

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

148684.12

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 2 | 6 |   | 2 | 0 | 2 | 3 |

Transaction ID : A254349AE25814591BEB

Amount of Each Receipt this Period

3300.00



Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not affected.

C.

Full Name (Last, First, Middle Initial)

Kepler, Patricia, A., ,

Mailing Address 912 Turtle Cove

City

Sanford

State

MI

Zip Code

48657-9342

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Homemaker

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

6732.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 2 | 0 |   | 2 | 0 | 2 | 3 |

Transaction ID : AECEAB9A0900B462B9E6

Amount of Each Receipt this Period

132.00



Memo Item

Refunded excess contribution on 12/27/23

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

3432.00

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 PageFOR LINE NUMBER:  
(check only one)

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|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

WinRed

A.

Mailing Address PO Box 9891

City  
ArlingtonState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

148684.12

Date of Receipt

M M / D D / Y Y Y Y Y  
12 26 2023

Transaction ID : A4E7DDE1077B54ACA8C6

Amount of Each Receipt this Period

132.00

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not  
affected.

B.

Full Name (Last, First, Middle Initial)

Veurink, Gary, R., ,

Mailing Address 4951 Rosabelle Beach Ave

City  
HollandState  
MIZip Code  
49424-1030FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

None

Retired

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 20 2023

Transaction ID : AC45919D6A3B54E06962

Amount of Each Receipt this Period

1300.00

☐ Memo Item

Earmarked (Non-Directed) through WinRed

C.

Full Name (Last, First, Middle Initial)

WinRed

Mailing Address PO Box 9891

City  
ArlingtonState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

148684.12

Date of Receipt

M M / D D / Y Y Y Y Y  
12 26 2023

Transaction ID : A0D9BA4A503344B00B00

Amount of Each Receipt this Period

1300.00

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not  
affected.

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

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

1300.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

Veurink, Ruth, M., ,

A.

Mailing Address 4951 Rosabelle Beach Ave

City

Holland

State

MI

Zip Code

49424-1030

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Homemaker

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 2 | 0 |   | 2 | 0 | 2 | 3 |

Transaction ID : AE9F16C1076174768B88

Amount of Each Receipt this Period

1300.00



Memo Item

Earmarked (Non-Directed) through WinRed

Full Name (Last, First, Middle Initial)

WinRed

B.

Mailing Address PO Box 9891

City

Arlington

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

148684.12

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 2 | 6 |   | 2 | 0 | 2 | 3 |

Transaction ID : A9043B994627440DF8F2

Amount of Each Receipt this Period

1300.00



Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not  
affected.

Full Name (Last, First, Middle Initial)

Sutter, Brian, , ,

C.

Mailing Address 212 N Quaker Ln

City

Alexandria

State

VA

Zip Code

22304-1819

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Capital Hill Consulting Group

Occupation

Partner &amp; Senior VP

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 2 | 7 |   | 2 | 0 | 2 | 3 |

Transaction ID : ACBAFAD1C79F045B69E0

Amount of Each Receipt this Period

1500.00



Memo Item

Earmarked (Non-Directed) through WinRed

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

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

2800.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 56 OF 191

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

WinRed

A.

Mailing Address PO Box 9891

City

Arlington

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2024



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

148684.12

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 12  |   | 31  |   | 2023        |

Transaction ID : AC3809F0291504091B10

Amount of Each Receipt this Period

1500.00

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not affected.

B.

Full Name (Last, First, Middle Initial)

Tiffany, Lyle, B., ,

Mailing Address 2267 Pontiac Trl

City

Ann Arbor

State

MI

Zip Code

48105-1224

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

None

Retired

Receipt For: 2024



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

700.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 12  |   | 28  |   | 2023        |

Transaction ID : A41C0AB692AB24D228D6

Amount of Each Receipt this Period

50.00

☐ Memo Item

Earmarked (Non-Directed) through WinRed

C.

Full Name (Last, First, Middle Initial)

WinRed

Mailing Address PO Box 9891

City

Arlington

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2024



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

148684.12

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 12  |   | 31  |   | 2023        |

Transaction ID : AD1E89B2A744342E29B6

Amount of Each Receipt this Period

50.00

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not affected.

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

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

50.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

Hodgson, Chris, , ,

A. Mailing Address 800 Maine Avenue, SW, 7th Floor

City

Washington

State

DC

Zip Code

20024

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information RequestedOccupation  
Principal

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 3 | 1 |   | 2 | 0 | 3 |   |

Transaction ID : A9C8E8F8E06554E2C94E

Amount of Each Receipt this Period

500.00

☐ Memo Item

Earmarked (Non-Directed) through WinRed

Full Name (Last, First, Middle Initial)

WinRed

B. Mailing Address PO Box 9891

City

Arlington

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

148684.12

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 3 | 1 |   | 2 | 0 | 3 |   |

Transaction ID : ABAA63D7D2C374954B78

Amount of Each Receipt this Period

500.00

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not affected.

Full Name (Last, First, Middle Initial)

C. 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

☐ Memo Item

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

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

500.00

136902.28

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 58 OF 191

|                              |                              |                                         |                              |
|------------------------------|------------------------------|-----------------------------------------|------------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| 12                           | 13a                          | 13b                                     | 14                           |
|                              |                              |                                         | 15                           |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

Horsepower PAC

A.

Mailing Address 1731 Blue Grass Rd

City

Lansing

State

MI

Zip Code

48906-1337

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

999.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 1 | 1 |   | 2 | 0 | 2 | 3 |

Transaction ID : AEA5AB84569464DCF9E2

Amount of Each Receipt this Period

999.00



Memo Item

Contribution from non-federal committee - verified  
narrmissible funds

B.

Full Name (Last, First, Middle Initial)

Toyota Motor North America, Inc PAC (Toyota/Lexus PAC)

Mailing Address 325 7th St NW  
Ste 1000

City

Washington

State

DC

Zip Code

20004-2801

FEC ID number of contributing  
federal political committee.

C

C00542365

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 1 | 7 |   | 2 | 0 | 2 | 3 |

Transaction ID : A0251F4EA34EE499ABC3

Amount of Each Receipt this Period

1000.00



Memo Item

C.

Full Name (Last, First, Middle Initial)

Syngenta Corporation Employee PAC

Mailing Address 1775 Pennsylvania Ave NW  
Ste 600

City

Washington

State

DC

Zip Code

20006-4602

FEC ID number of contributing  
federal political committee.

C

C00363945

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 1 | 9 |   | 2 | 0 | 2 | 3 |

Transaction ID : AE1708072D67542DAA04

Amount of Each Receipt this Period

2500.00



Memo Item

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

4499.00

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 PageFOR LINE NUMBER:  
(check only one)

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|                              |                              |                                         |                              |
|------------------------------|------------------------------|-----------------------------------------|------------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| 12                           | 13a                          | 13b                                     | 14                           |
|                              |                              |                                         | 15                           |

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NAME OF COMMITTEE (In Full)

**Moolenaar for Congress**

Full Name (Last, First, Middle Initial)

Davita Inc. PAC (DaPAC)

**A.**

Mailing Address 32275 32nd Ave S

City

Federal Way

State

WA

Zip Code

98001-9616

FEC ID number of contributing  
federal political committee.**C** C00340943

Name of Employer

Occupation

Receipt For: 2024



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 3 | 0 |   | 2 | 0 | 2 | 3 |

**Transaction ID : A851ACB37E14841B28D8**

Amount of Each Receipt this Period

1000.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

American Association Of Oral And Maxillofacial Surgeons PAC

Mailing Address 9700 Bryn Mawr Ave

City

Rosemont

State

IL

Zip Code

60018-5701

FEC ID number of contributing  
federal political committee.**C** C00005660

Name of Employer

Occupation

Receipt For: 2024



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 8 |   | 2 | 0 | 2 | 3 |

**Transaction ID : AE8E61715AD8D47308FE**

Amount of Each Receipt this Period

2500.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

CAP-PAC SSF of The Nat'l Community Action Foundation Inc

Mailing Address PO Box 78214

City

Washington

State

DC

Zip Code

20013-9214

FEC ID number of contributing  
federal political committee.**C** C00163048

Name of Employer

Occupation

Receipt For: 2024



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 8 |   | 2 | 0 | 2 | 3 |

**Transaction ID : ACC4BE0F8C077483AAE0**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

4500.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 60 OF 191

|                              |                              |                                         |                              |                             |
|------------------------------|------------------------------|-----------------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                           | 13a                          | 13b                                     | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

Energy Marketers of America Small Business Committee PAC

A.

Mailing Address 300 New Jersey Ave NW

Ste 924

City

Washington

State

DC

Zip Code

20001-2030

FEC ID number of contributing  
federal political committee.

C c00035204

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 11  |   | 08  |   | 2023        |

Transaction ID : A47AF00F690EC4C88AF8

Amount of Each Receipt this Period

1000.00



Memo Item

B.

Full Name (Last, First, Middle Initial)

Oshkosh Corporation Employees PAC (OCEPAC)

Mailing Address P.o. Box 2566 1917 Four Wheel Dr

City

Oshkosh

State

WI

Zip Code

54903-2566

FEC ID number of contributing  
federal political committee.

C C00304477

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 11  |   | 08  |   | 2023        |

Transaction ID : AD2E2A8E8E96D4298BD0

Amount of Each Receipt this Period

2500.00



Memo Item

C.

Full Name (Last, First, Middle Initial)

CME Group, Inc. PAC (CME/CBOT/NYMEX PAC)

Mailing Address 20 S Wacker Drive

City

Chicago

State

IL

Zip Code

60606-7431

FEC ID number of contributing  
federal political committee.

C C00076299

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 11  |   | 10  |   | 2023        |

Transaction ID : AED7186F19FD14178B6C

Amount of Each Receipt this Period

1000.00



Memo Item

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

4500.00

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 61 OF 191

|                              |                              |                                         |                              |
|------------------------------|------------------------------|-----------------------------------------|------------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| 12                           | 13a                          | 13b                                     | 14                           |
|                              |                              |                                         | 15                           |

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NAME OF COMMITTEE (In Full)

**Moolenaar for Congress**

Full Name (Last, First, Middle Initial)

American Academy Of Dermatology Association PAC (SkinPAC)

**A.**Mailing Address 1201 Pennsylvania Ave NW  
Ste 540City  
WashingtonState  
DCZip Code  
20004-2463FEC ID number of contributing  
federal political committee.**C** C00359539

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11  |   | 20  |   | 2023    |

Transaction ID : A08ECBAA7B04C464F873

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

American College Of Cardiology PAC

**B.**

Mailing Address 2400 N St NW

City  
WashingtonState  
DCZip Code  
20037-1153FEC ID number of contributing  
federal political committee.**C** C00375360

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11  |   | 20  |   | 2023    |

Transaction ID : A7E7FA4A035FF49AF870

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

General Dynamics Corporation PAC (GDC PAC)

**C.**

Mailing Address 11011 Sunset Hills Rd

City  
RestonState  
VAZip Code  
20190-5311FEC ID number of contributing  
federal political committee.**C** C00078451

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4500.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11  |   | 20  |   | 2023    |

Transaction ID : ACB62319019B84DE1BCD

Amount of Each Receipt this Period

1000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶

3000.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 62 OF 191

|                              |                              |                                         |                              |                             |
|------------------------------|------------------------------|-----------------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                           | 13a                          | 13b                                     | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

Michigan Sugar Company Growers PAC

A.

Mailing Address 122 Uptown Dr

Unit 300

City

Bay City

State

MI

Zip Code

48708-5627

FEC ID number of contributing  
federal political committee.

C C00384354

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 2 | 0 |   | 2 | 0 | 2 | 3 |

Transaction ID : A7ED00BE8AD5E44DB91D

Amount of Each Receipt this Period

5000.00



Memo Item

B.

Full Name (Last, First, Middle Initial)

The Boeing Company PAC (BPAC)

Mailing Address 929 Long Bridge Dr

City

Arlington

State

VA

Zip Code

22202-4208

FEC ID number of contributing  
federal political committee.

C C00142711

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

6000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 2 | 0 |   | 2 | 0 | 2 | 3 |

Transaction ID : AFDE711AE90A14C14976

Amount of Each Receipt this Period

1000.00



Memo Item

C.

Full Name (Last, First, Middle Initial)

American Podiatric Medical Association PAC

Mailing Address 11400 Rockville Pike

Ste 220

City

Rockville

State

MD

Zip Code

20852-3004

FEC ID number of contributing  
federal political committee.

C C00008839

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 0 | 1 |   | 2 | 0 | 2 | 3 |

Transaction ID : AC756EC49162B4514B7B

Amount of Each Receipt this Period

1000.00



Memo Item

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

7000.00

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 PageFOR LINE NUMBER:  
(check only one)

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|                              |                              |                                         |                              |                             |
|------------------------------|------------------------------|-----------------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                           | 13a                          | 13b                                     | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

Creating A Majority Party Action Committee (C.A.M.P.A.C.)

A.

Mailing Address 5915 Eastman Ave

Ste 100

City

Midland

State

MI

Zip Code

48640-6824

FEC ID number of contributing  
federal political committee.

C C00347476

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 12  |   | 04  |   | 2023        |

Transaction ID : AF4D62A3B7AEA4D6C820

Amount of Each Receipt this Period

5000.00

☐ Memo Item

B.

Full Name (Last, First, Middle Initial)

Valent U.S.A. LLC PAC

Mailing Address 800 Maine Ave SW

FI 7

City

Washington

State

DC

Zip Code

20024-2818

FEC ID number of contributing  
federal political committee.

C C00650986

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 12  |   | 05  |   | 2023        |

Transaction ID : AF0D7503756464718834

Amount of Each Receipt this Period

1000.00

☐ Memo Item

C.

Full Name (Last, First, Middle Initial)

Charter Schools Action PAC

Mailing Address PO Box 710993

City

Herndon

State

VA

Zip Code

20171-0993

FEC ID number of contributing  
federal political committee.

C C00576215

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 12  |   | 08  |   | 2023        |

Transaction ID : A68E70F9D895141CE8B4

Amount of Each Receipt this Period

1500.00

☐ Memo Item

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

7500.00

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 PageFOR LINE NUMBER:  
(check only one)

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|                              |                              |                                         |                              |
|------------------------------|------------------------------|-----------------------------------------|------------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| 12                           | 13a                          | 13b                                     | 14                           |
|                              |                              |                                         | 15                           |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

National Automobile Dealers Assn PAC (NADA PAC)

A.

Mailing Address 8400 Westpark Dr

Ste 500

City

Tysons

State

VA

Zip Code

22102-5116

FEC ID number of contributing  
federal political committee.

C C00040998

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 12  |   | 14  |   | 2023        |

Transaction ID : A03EDA9139E5249D49C9

Amount of Each Receipt this Period

5000.00

☐ Memo Item

B.

Full Name (Last, First, Middle Initial)

Alticor PAC

Mailing Address 7575 Fulton St E

City

Ada

State

MI

Zip Code

49355-0001

FEC ID number of contributing  
federal political committee.

C C00034884

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 12  |   | 19  |   | 2023        |

Transaction ID : AE19F6563F2A24D299F8

Amount of Each Receipt this Period

2500.00

☐ Memo Item

C.

Full Name (Last, First, Middle Initial)

American Academy Of Ophthalmology Inc Political Committee (OphthPAC)

Mailing Address 655 Beach St

City

San Francisco

State

CA

Zip Code

94109-1342

FEC ID number of contributing  
federal political committee.

C C00196246

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 12  |   | 19  |   | 2023        |

Transaction ID : AA6B3A7F0D3374182A20

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

8500.00

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 PageFOR LINE NUMBER:  
(check only one)

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|                              |                              |                                         |                              |
|------------------------------|------------------------------|-----------------------------------------|------------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| 12                           | 13a                          | 13b                                     | 14                           |
|                              |                              |                                         | 15                           |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)  
American Chemistry Council PAC

Mailing Address 700 2nd St NE

City  
WashingtonState  
DCZip Code  
20002-8100FEC ID number of contributing  
federal political committee.

C C00252338

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 19 2023

Transaction ID : A3EB0B7377F344AFEAD0

Amount of Each Receipt this Period

1000.00

☐ Memo ItemFull Name (Last, First, Middle Initial)  
American Chiropractic Association PAC (ACA-PAC)Mailing Address 1701 Clarendon Blvd  
Ste 200City  
ArlingtonState  
VAZip Code  
22209-2700FEC ID number of contributing  
federal political committee.

C C00102764

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 19 2023

Transaction ID : AB500041060F04896AB9

Amount of Each Receipt this Period

1000.00

☐ Memo ItemFull Name (Last, First, Middle Initial)  
American Veterinary Medical Association PAC (AVMA)

Mailing Address 1910 Sunderland PI NW

City  
WashingtonState  
DCZip Code  
20036-1608FEC ID number of contributing  
federal political committee.

C C00114132

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 19 2023

Transaction ID : A3EB49D4DE6634F04B35

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

3000.00

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 66 OF 191

|                              |                              |                                         |                              |
|------------------------------|------------------------------|-----------------------------------------|------------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| 12                           | 13a                          | 13b                                     | 14                           |
|                              |                              |                                         | 15                           |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

Bradford White Corporation PAC ('Bwc Pac')

Mailing Address 725 Talamore Dr

City

Ambler

State

PA

Zip Code

19002-1873

FEC ID number of contributing  
federal political committee.

C C00690099

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 12  |   | 19  |   | 2023        |

Transaction ID : A418DD12C85B34EE3A98

Amount of Each Receipt this Period

1500.00



Memo Item

Full Name (Last, First, Middle Initial)

CAP-PAC SSF of The Nat'l Community Action Foundation Inc

Mailing Address PO Box 78214

City

Washington

State

DC

Zip Code

20013-9214

FEC ID number of contributing  
federal political committee.

C C00163048

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

4500.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 12  |   | 19  |   | 2023        |

Transaction ID : AEBD5EFC EE90E4B11A53

Amount of Each Receipt this Period

1000.00



Memo Item

Full Name (Last, First, Middle Initial)

Chevron Employees PAC - Chevron Corporation

Mailing Address 6001 Bollinger Canyon Rd  
Rm B2100

City

San Ramon

State

CA

Zip Code

94583-2324

FEC ID number of contributing  
federal political committee.

C C00035006

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 12  |   | 19  |   | 2023        |

Transaction ID : AB7B7620346A84188A92

Amount of Each Receipt this Period

1000.00



Memo Item

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

3500.00

**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 PageFOR LINE NUMBER:  
(check only one)

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|                              |                              |                                         |                              |
|------------------------------|------------------------------|-----------------------------------------|------------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| 12                           | 13a                          | 13b                                     | 14                           |
|                              |                              |                                         | 15                           |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

Croplife America PAC

A.

Mailing Address 4201 Wilson Blvd

Ste 700

City

Arlington

State

VA

Zip Code

22203-4454

FEC ID number of contributing  
federal political committee.

C C00248849

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 1 | 9 |   | 2 | 0 | 2 | 3 |

Transaction ID : A1785F8B96674482581C

Amount of Each Receipt this Period

1000.00



Memo Item

B.

Full Name (Last, First, Middle Initial)

Doordash, Inc. PAC (DashPAC)

Mailing Address 28 Liberty Ship Way

Ste 2815

City

Sausalito

State

CA

Zip Code

94965-3321

FEC ID number of contributing  
federal political committee.

C C00820167

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 1 | 9 |   | 2 | 0 | 2 | 3 |

Transaction ID : A147CB25F09AB4615948

Amount of Each Receipt this Period

1000.00



Memo Item

C.

Full Name (Last, First, Middle Initial)

Elevance Health, Inc. PAC (Elevance Health PAC)

Mailing Address 1001 Pennsylvania Ave NW

Ste 710

City

Washington

State

DC

Zip Code

20004-2513

FEC ID number of contributing  
federal political committee.

C C00197228

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 1 | 9 |   | 2 | 0 | 2 | 3 |

Transaction ID : A7620ED003FF84B0E89F

Amount of Each Receipt this Period

1000.00



Memo Item

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

3000.00

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 PageFOR LINE NUMBER:  
(check only one)

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|                              |                              |                                         |                              |
|------------------------------|------------------------------|-----------------------------------------|------------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| 12                           | 13a                          | 13b                                     | 14                           |
|                              |                              |                                         | 15                           |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

Heineken USA Inc Good Government Fund (HUSA)

A.

Mailing Address 360 Hamilton Ave

Ste 1103

City

White Plains

State

NY

Zip Code

10601-1841

FEC ID number of contributing  
federal political committee.

C C00358234

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12  |   | 19  |   | 2023    |

Transaction ID : A707AA4FB86474409AF6

Amount of Each Receipt this Period

1000.00



Memo Item

B.

Full Name (Last, First, Middle Initial)

KochPAC - Koch Industries, Inc. PAC

Mailing Address 600 14th Street NW

Suite 800

City

Washington

State

DC

Zip Code

20005-2099

FEC ID number of contributing  
federal political committee.

C C00236489

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12  |   | 19  |   | 2023    |

Transaction ID : A2671CA37DA6843F9B3A

Amount of Each Receipt this Period

1000.00



Memo Item

C.

Full Name (Last, First, Middle Initial)

National Beer Wholesalers Assn PAC (NBWA PAC)

Mailing Address 1101 King St

Ste 600

City

Alexandria

State

VA

Zip Code

22314-2965

FEC ID number of contributing  
federal political committee.

C C00144766

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12  |   | 19  |   | 2023    |

Transaction ID : A09D162B448EB4894AB9

Amount of Each Receipt this Period

1000.00



Memo Item

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

3000.00

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: PAGE 69 OF 191

(check only one)

|                              |                              |                                         |                              |
|------------------------------|------------------------------|-----------------------------------------|------------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| 12                           | 13a                          | 13b                                     | 14                           |
|                              |                              |                                         | 15                           |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

National Cattlemen's Beef Association PAC (NCBA-PAC)

Mailing Address 1275 Pennsylvania Ave NW  
Ste 801City  
WashingtonState  
DCZip Code  
20004-2434FEC ID number of contributing  
federal political committee.

C C00028787

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 19 2023

Transaction ID : A6BFFEFCBD2EC4AF9949

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

National Corn Growers Association PAC - CornPAC

Mailing Address 20 F St NW  
Ste 600City  
WashingtonState  
DCZip Code  
20001-6707FEC ID number of contributing  
federal political committee.

C C00376343

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 19 2023

Transaction ID : A1F6A0891036A4D9CAE2

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

National Emergency Medicine PAC / American College Of Emergency Physicians

Mailing Address 4950 W Royal Ln

City  
IrvingState  
TXZip Code  
75063-2524FEC ID number of contributing  
federal political committee.

C C00140061

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 19 2023

Transaction ID : A1D6310CAED75402C82A

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

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

5000.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 70 OF 191

|                              |                              |                                         |                              |                             |
|------------------------------|------------------------------|-----------------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                           | 13a                          | 13b                                     | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

National Rural Electric Cooperative Association America's Electric Cooperatives PAC (NRECA)

A.

Mailing Address 4301 Wilson Blvd

City

Arlington

State

VA

Zip Code

22203-4419

FEC ID number of contributing  
federal political committee.

C C00002972

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 12  |   | 19  |   | 2023        |

Transaction ID : A2684C1857C02420FB4A

Amount of Each Receipt this Period

1000.00



Memo Item

B.

Full Name (Last, First, Middle Initial)

National Sorghum Producers PAC

Mailing Address 4201 N Interstate 27

City

Lubbock

State

TX

Zip Code

79403-7507

FEC ID number of contributing  
federal political committee.

C C00475673

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 12  |   | 19  |   | 2023        |

Transaction ID : A38E4BD752151451AA20

Amount of Each Receipt this Period

1000.00



Memo Item

C.

Full Name (Last, First, Middle Initial)

National Turkey Federation PAC (TURPAC)

Mailing Address 1225 New York Ave NW  
Ste 400

City

Washington

State

DC

Zip Code

20005-6404

FEC ID number of contributing  
federal political committee.

C C00076182

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 12  |   | 19  |   | 2023        |

Transaction ID : A34270462837D4E2F8E3

Amount of Each Receipt this Period

2500.00



Memo Item

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

4500.00

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 71 OF 191

|                              |                              |                                         |                              |                             |
|------------------------------|------------------------------|-----------------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                           | 13a                          | 13b                                     | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

Nike Inc Federal PAC (Nike Federal PAC)

A.

Mailing Address One Bowerman Drive

City

Beaverton

State

OR

Zip Code

97005-0979

FEC ID number of contributing  
federal political committee.

C C00142786

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 12  |   | 19  |   | 2023        |

Transaction ID : AD1E9E47AE1004F12AF0

Amount of Each Receipt this Period

1000.00



Memo Item

B.

Full Name (Last, First, Middle Initial)

PAC Of The American Association Of Orthopaedic Surgeons--PAC Of AAOS

Mailing Address 317 Massachusetts Ave NE

FI 1

City

Washington

State

DC

Zip Code

20002-5769

FEC ID number of contributing  
federal political committee.

C C00343137

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 12  |   | 19  |   | 2023        |

Transaction ID : A3B0592AA3E064DE38DC

Amount of Each Receipt this Period

1000.00



Memo Item

C.

Full Name (Last, First, Middle Initial)

Rain and Hail Insurance Society PAC

Mailing Address 9200 Northpark Dr

Ste 300

City

Johnston

State

IA

Zip Code

50131-3006

FEC ID number of contributing  
federal political committee.

C C00279505

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 12  |   | 19  |   | 2023        |

Transaction ID : AE6B67BAE41B44DB1B29

Amount of Each Receipt this Period

1000.00



Memo Item

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

3000.00

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 PageFOR LINE NUMBER:  
(check only one)

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|                              |                              |                                         |                              |                             |
|------------------------------|------------------------------|-----------------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                           | 13a                          | 13b                                     | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

S. C. Johnson &amp; Son, Inc. PAC

A.

Mailing Address 1525 Howe St

City  
RacineState  
WIZip Code  
53403-2237FEC ID number of contributing  
federal political committee.

C C00342246

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 19 2023

Transaction ID : A719CF7EE21CB4FC9B82

Amount of Each Receipt this Period

2000.00

☐ Memo Item

B.

Full Name (Last, First, Middle Initial)

Society Of American Florists PAC (SAFPAC)

Mailing Address 1001 N Fairfax St  
Ste 201City  
AlexandriaState  
VAZip Code  
22314-1587FEC ID number of contributing  
federal political committee.

C C00111302

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 19 2023

Transaction ID : A66E1503541D34589B33

Amount of Each Receipt this Period

500.00

☐ Memo Item

C.

Full Name (Last, First, Middle Initial)

United Egg Association EggPAC

Mailing Address 6455 E Johns Xing  
Ste 410City  
Johns CreekState  
GAZip Code  
30097-1568FEC ID number of contributing  
federal political committee.

C C00172841

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 19 2023

Transaction ID : AA1F19184509F45029D5

Amount of Each Receipt this Period

1000.00

☐ Memo Item

3500.00

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 PageFOR LINE NUMBER:  
(check only one)

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|                              |                              |                                         |                              |
|------------------------------|------------------------------|-----------------------------------------|------------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| 12                           | 13a                          | 13b                                     | 14                           |
|                              |                              |                                         | 15                           |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

United States Telecom Association PAC (TELECOMPAC))

A.

Mailing Address 601 New Jersey Ave NW

Ste 600

City

Washington

State

DC

Zip Code

20001-2993

FEC ID number of contributing  
federal political committee.

C C00000984

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 1 | 9 |   | 2 | 0 | 2 | 3 |

Transaction ID : A6B0B06E3A9BF4B15AB9

Amount of Each Receipt this Period

250.00



Memo Item

B.

Full Name (Last, First, Middle Initial)

The Boeing Company PAC (BPAC)

Mailing Address 929 Long Bridge Dr

City

Arlington

State

VA

Zip Code

22202-4208

FEC ID number of contributing  
federal political committee.

C C00142711

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 2 | 7 |   | 2 | 0 | 2 | 3 |

Transaction ID : AF230467FC9334DD6B1D

Amount of Each Receipt this Period

1000.00



Memo Item

C.

Full Name (Last, First, Middle Initial)

American Academy Of Family Physicians PAC

Mailing Address 1133 Connecticut Ave NW

Ste 1100

City

Washington

State

DC

Zip Code

20036-4342

FEC ID number of contributing  
federal political committee.

C C00411553

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 3 | 1 |   | 2 | 0 | 2 | 3 |

Transaction ID : A89A022999FDA41968C6

Amount of Each Receipt this Period

1000.00



Memo Item

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

2250.00

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 PageFOR LINE NUMBER:  
(check only one)

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|                              |                              |                                         |                              |
|------------------------------|------------------------------|-----------------------------------------|------------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| 12                           | 13a                          | 13b                                     | 14                           |
|                              |                              |                                         | 15                           |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

AT&amp;T Inc. Employee Federal PAC

Mailing Address 208 S Akard St

Ste 1812

City

Dallas

State

TX

Zip Code

75202-4206

FEC ID number of contributing  
federal political committee.

C C00109017

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 12  |   | 31  |   | 2023        |

Transaction ID : AC84F8AC7EDCD46DD93C

Amount of Each Receipt this Period

1500.00



Memo Item

Full Name (Last, First, Middle Initial)

Charter Communications Inc. PAC

Mailing Address 400 Atlantic St

Fl 10

City

Stamford

State

CT

Zip Code

06901-3512

FEC ID number of contributing  
federal political committee.

C C00426775

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 12  |   | 31  |   | 2023        |

Transaction ID : A4A44F9CFB8504588B31

Amount of Each Receipt this Period

2500.00



Memo Item

Full Name (Last, First, Middle Initial)

Corteva, Inc. Employees PAC (Corteva Agriscience PAC)

Mailing Address 601 New Jersey Ave NW

Ste 630

City

Washington

State

DC

Zip Code

20001-3051

FEC ID number of contributing  
federal political committee.

C C00247981

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 12  |   | 31  |   | 2023        |

Transaction ID : A3AC13E41A52E4488A9D

Amount of Each Receipt this Period

1000.00



Memo Item

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

5000.00

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 PageFOR LINE NUMBER:  
(check only one)

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|                              |                              |                                         |                              |                             |
|------------------------------|------------------------------|-----------------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                           | 13a                          | 13b                                     | 14                           |                             |

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NAME OF COMMITTEE (In Full)

**Moolenaar for Congress**Full Name (Last, First, Middle Initial)  
Fluor Corporation PAC (Fluor Pac)

Mailing Address 6700 Las Colinas Blvd

City  
IrvingState  
TXZip Code  
75039-2902FEC ID number of contributing  
federal political committee.**C** C00034132

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12  |   | 31  |   | 2023    |

Transaction ID : A7AAE2D78D3724C4E9C6

Amount of Each Receipt this Period

1000.00

☐ Memo ItemFull Name (Last, First, Middle Initial)  
Independent Community Bankers PACMailing Address 1615 L St NW  
Ste 900City  
WashingtonState  
DCZip Code  
20036-5623FEC ID number of contributing  
federal political committee.**C** C00032698

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12  |   | 31  |   | 2023    |

Transaction ID : A2C65AFDAAA0A484B8FA

Amount of Each Receipt this Period

2000.00

☐ Memo ItemFull Name (Last, First, Middle Initial)  
Microsoft Corporation Stakeholders Voluntary PAC - MSVPAC

Mailing Address 1 Microsoft Way

City  
RedmondState  
WAZip Code  
98052-8300FEC ID number of contributing  
federal political committee.**C** C00227546

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12  |   | 31  |   | 2023    |

Transaction ID : A9A35380191C4413AB0B

Amount of Each Receipt this Period

1000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶

4000.00

**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 PageFOR LINE NUMBER:  
(check only one)

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|                              |                              |                                         |                              |                             |
|------------------------------|------------------------------|-----------------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                           | 13a                          | 13b                                     | 14                           |                             |

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NAME OF COMMITTEE (In Full)

**Moolenaar for Congress**

Full Name (Last, First, Middle Initial)

Molina Healthcare Inc PAC

**A.**

Mailing Address 200 Oceangate

Ste 100

City

Long Beach

State

CA

Zip Code

90802-4317

FEC ID number of contributing  
federal political committee.**C** C00430256

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 12  |   | 31  |   | 2023        |

Transaction ID : AFEE13ACE8338476C844

Amount of Each Receipt this Period

1000.00



Memo Item

**B.**

Full Name (Last, First, Middle Initial)

National Potato Council Potato Political Action Committee

Mailing Address 50 F St NW

Ste 900

City

Washington

State

DC

Zip Code

20001-1530

FEC ID number of contributing  
federal political committee.**C** C00154104

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 12  |   | 31  |   | 2023        |

Transaction ID : A9C55B3684C0247A2948

Amount of Each Receipt this Period

1000.00



Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Space Exploration Technologies Corp PAC

Mailing Address 1155 F St NW

Ste 475

City

Washington

State

DC

Zip Code

20004-1343

FEC ID number of contributing  
federal political committee.**C** C00411116

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 12  |   | 31  |   | 2023        |

Transaction ID : AC7A8937F2C2F4774AE4

Amount of Each Receipt this Period

5000.00



Memo Item

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

7000.00

**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 PageFOR LINE NUMBER:  
(check only one)

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|                              |                              |                                         |                              |
|------------------------------|------------------------------|-----------------------------------------|------------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| 12                           | 13a                          | 13b                                     | 14                           |
|                              |                              |                                         | 15                           |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

United States Peanut PAC (US Peanut Pac)

A. Mailing Address 313 Massachusetts Ave NE

City  
WashingtonState  
DCZip Code  
20002-5701FEC ID number of contributing  
federal political committee.

C C00502807

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 31 2023

Transaction ID : A7EF1801CF3814E52A73

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

UnitedHealth Group Inc. PAC

B. Mailing Address 701 Pennsylvania Ave NW  
Ste 200City  
WashingtonState  
DCZip Code  
20004-3610FEC ID number of contributing  
federal political committee.

C C00274431

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 31 2023

Transaction ID : ABBFCDB8E65C6461DA69

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. 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

Amount of Each Receipt this Period

☐ Memo Item

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

3500.00

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

89749.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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|                                        |                              |                              |                              |                             |
|----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 11a           | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13a | <input type="checkbox"/> 13b | <input type="checkbox"/> 14  | <input type="checkbox"/> 15 |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

Harshbarger Moolenaar Victory Fund

Mailing Address PO Box 183

City

Hudson

State

WI

Zip Code

54016-0183

FEC ID number of contributing  
federal political committee.

C C00841650

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

15275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 06 2023

Transaction ID : A21FD9E2E25964905BE1

Amount of Each Receipt this Period

14175.00

☐ Memo Item  
Transfer From JFC

Full Name (Last, First, Middle Initial)

McCloskey, Bradley, J., ,

Mailing Address 186 Westchester Way

City

Birmingham

State

MI

Zip Code

48009-1551

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

University Compounding Pharmacy

Pharmacist

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 07 2023

Transaction ID : AF5E8EAAFA0AF455C98C

Amount of Each Receipt this Period

1250.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

Peake, Ryan, G., ,

Mailing Address 913 Anderson Mill Dr

City

Vicksburg

State

MI

Zip Code

49097-7762

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Information Requested

Information Requested

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 07 2023

Transaction ID : ACA94DC9F78AC467EB77

Amount of Each Receipt this Period

625.00

☒ Memo Item

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

14175.00

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 PageFOR LINE NUMBER:  
(check only one)

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|                                        |                              |                              |                              |                             |
|----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 11a           | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13a | <input type="checkbox"/> 13b | <input type="checkbox"/> 14  | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

Curtis, Lawrence, D., ,

Mailing Address 60855 Valley View Blvd

City

Mattawan

State

MI

Zip Code

49071-8513

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information RequestedOccupation  
Information Requested

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 07 2023

Transaction ID : A1A68895A466E400AA10

Amount of Each Receipt this Period

625.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

Hill, David, W., ,

Mailing Address 3470 S Columbine Cir

City

Englewood

State

CO

Zip Code

80113-7607

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information RequestedOccupation  
Information Requested

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 07 2023

Transaction ID : A74053684C4544F63A4E

Amount of Each Receipt this Period

250.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

Besteman, Jonathan, J., ,

Mailing Address 4257 Smith Dr

City

Deerfield

State

WI

Zip Code

53531-9610

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information RequestedOccupation  
Information Requested

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

125.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 07 2023

Transaction ID : A6D746227AF89426BB9D

Amount of Each Receipt this Period

125.00

☒ Memo Item

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

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

0.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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|                                        |                              |                              |                              |                             |
|----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 11a           | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13a | <input type="checkbox"/> 13b | <input type="checkbox"/> 14  | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

McCloskey, Erika, M., ,

A. Mailing Address 186 Westchester Way

City  
BirminghamState  
MIZip Code  
48009-1551FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Worldwide ExpressOccupation  
Account Manager

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 07 2023

Transaction ID : A0B3E367AAEFC45B3AE6

Amount of Each Receipt this Period

1250.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

Popyk, Scott, T., ,

B. Mailing Address 21174 Dundee Dr

City  
NoviState  
MIZip Code  
48375-4740FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Health DimensionsOccupation  
Pharmacist

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 07 2023

Transaction ID : AAD5DD93EFA3E4F749E9

Amount of Each Receipt this Period

750.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

Miller, David, J., ,

C. Mailing Address 7945 Morse Lake Ave SE

City  
AltoState  
MIZip Code  
49302-9639FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Keystone PharmacyOccupation  
Pharmacist

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 07 2023

Transaction ID : A4B74965A36B04562A76

Amount of Each Receipt this Period

750.00

☒ Memo Item

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

0.00

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 PageFOR LINE NUMBER:  
(check only one)

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|                                        |                              |                              |                              |                             |
|----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 11a           | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13a | <input type="checkbox"/> 13b | <input type="checkbox"/> 14  | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

Lovo, Jasper, , ,

A.

Mailing Address 31 Rosedown Pl

City  
SpringState  
TXZip Code  
77382-4416FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Woodlands Compounding PharmOccupation  
Pharmacist

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 07 2023

Transaction ID : A6CB5AF4C44694F64864

Amount of Each Receipt this Period

750.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

Patel, Gopesh, , ,

B.

Mailing Address 12 East St

City  
New Hyde ParkState  
NYZip Code  
11040-1323FEC ID number of contributing  
federal political committee.

C

Name of Employer  
VLS Pharmacy Inc.Occupation  
Pharmacist

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 07 2023

Transaction ID : A92BF7AD0246740BAAB0

Amount of Each Receipt this Period

750.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

Graham, Eric, M., ,

C.

Mailing Address 3506 Sandhill Ln

City  
PortageState  
MIZip Code  
49024-5515FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Red Crown PharmacyOccupation  
Pharmacist

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 07 2023

Transaction ID : AFE1C97C9A0E245BFA60

Amount of Each Receipt this Period

250.00

☒ Memo Item

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

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

0.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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|                                        |                              |                              |                              |                             |
|----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 11a           | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13a | <input type="checkbox"/> 13b | <input type="checkbox"/> 14  | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

Collins, Michael, E., ,

Mailing Address 5409 Clydesdale Ln

City  
SaginawState  
MIZip Code  
48603-2825FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Healthway Compounding PharmacyOccupation  
President / Pharmacist

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 07 2023

Transaction ID : A80504E3CDB6F40ABB1C

Amount of Each Receipt this Period

500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

Herr, John, J., ,

Mailing Address 34 Spruce Ln

City  
North HaledonState  
NJZip Code  
07508-3129FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Town & Country CompoundingOccupation  
Compounding Pharmacist

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 07 2023

Transaction ID : A2887196974AC43D0994

Amount of Each Receipt this Period

250.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

Holt, Clifford, E., ,

Mailing Address 338 W Refuge Rd

City  
IvinsState  
UTZip Code  
84738-1315FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Utah Family PharmaciesOccupation  
Pharmacist

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 07 2023

Transaction ID : A381DAF77D2724F858CE

Amount of Each Receipt this Period

500.00

☒ Memo Item

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

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

0.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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|                                        |                              |                              |                              |                             |
|----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 11a           | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13a | <input type="checkbox"/> 13b | <input type="checkbox"/> 14  | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

Blaire, Michael, R., ,

A.

Mailing Address 10921 N 140th Way

City

Scottsdale

State

AZ

Zip Code

85259-4615

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Wedgewood Pharmacy

Occupation

Pharmacist

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 07 2023

Transaction ID : AB5250EBB6ED4478B8AB

Amount of Each Receipt this Period

750.00



Memo Item

B.

Full Name (Last, First, Middle Initial)

Hrncir, James, , ,

Mailing Address 1812 Northern Oak Cir

City

Irving

State

TX

Zip Code

75063-8418

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Las Colinas Pharmacy

Occupation

Registered Pharmacist

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 13 2023

Transaction ID : AB49D7EBE93534EDE832

Amount of Each Receipt this Period

250.00



Memo Item

C.

Full Name (Last, First, Middle Initial)

Pytlarz, Alexander, M., ,

Mailing Address 101 Fareham Pl N

City

Saint Petersburg

State

FL

Zip Code

33701-2970

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Infuserve America

Occupation

Pharmacist

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 07 2023

Transaction ID : AE31A31C950664BD8A6F

Amount of Each Receipt this Period

500.00



Memo Item

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

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

0.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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|                                        |                              |                              |                              |                             |
|----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 11a           | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13a | <input type="checkbox"/> 13b | <input type="checkbox"/> 14  | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

Lake, Gregory, M., ,

A. Mailing Address 11405 N Ursa Minor Dr

City

Mayflower Mnt

State

UT

Zip Code

84032-1759

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Letco Medical

Occupation

Owner

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

150.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 07 2023

Transaction ID : A43F33BA87208462B88B

Amount of Each Receipt this Period

150.00



Memo Item

Full Name (Last, First, Middle Initial)

Hodges, Shawn, , ,

B. Mailing Address 1677 Burnt Hickory Rd NW

City

Marietta

State

GA

Zip Code

30064-1309

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Revelation Pharma

Occupation

Pharmacist

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 07 2023

Transaction ID : A1B7AA702154E46D59A4

Amount of Each Receipt this Period

750.00



Memo Item

Full Name (Last, First, Middle Initial)

Anderson, Lisa, E., ,

C. Mailing Address 12160 S Cherry Ln

City

Olathe

State

KS

Zip Code

66061-8790

FEC ID number of contributing  
federal political committee.

C

Name of Employer

O'Brien Pharmacy

Occupation

Owner

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 07 2023

Transaction ID : A13CF9DA1C8884200863

Amount of Each Receipt this Period

1650.00



Memo Item

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

0.00

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 PageFOR LINE NUMBER:  
(check only one)

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|                                        |                              |                              |                              |                             |
|----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 11a           | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13a | <input type="checkbox"/> 13b | <input type="checkbox"/> 14  | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

Reeves, Andrew, J., ,

A. Mailing Address 8589 Sierra Madre Trl

City  
KalamazooState  
MIZip Code  
49009-6908FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Optimed Specialty PharmacyOccupation  
CEO

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 07 2023

Transaction ID : A7211BC43B5C8418BB9D

Amount of Each Receipt this Period

250.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

Hundley, Jeffrey, A., ,

B. Mailing Address 80 Ottawa Ave NW  
Ste 410City  
Grand RapidsState  
MIZip Code  
49503-2648FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Colburn Hundley, Inc.Occupation  
President

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 07 2023

Transaction ID : A4583352B619D439A865

Amount of Each Receipt this Period

250.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

DeNeui, Daniel, D., ,

C. Mailing Address 4505 Bowman Dr

City  
ColleyvilleState  
TXZip Code  
76034-4326FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BioTE MedicalOccupation  
COO

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 07 2023

Transaction ID : A389B331A26D84DB29B6

Amount of Each Receipt this Period

1250.00

☒ Memo Item

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

0.00

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 PageFOR LINE NUMBER:  
(check only one)

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|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| <input checked="" type="checkbox"/> 12  | <input type="checkbox"/> 13a | <input type="checkbox"/> 13b | <input type="checkbox"/> 14  | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

Harshbarger Moolenaar Victory Fund

Mailing Address PO Box 183

City

Hudson

State

WI

Zip Code

54016-0183

FEC ID number of contributing  
federal political committee.

C C00841650

Name of Employer

Occupation

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

15275.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 | / | 0 | 6 | / | 2 | 0 | 2 | 3 |

Transaction ID : AA5D68C64277C44ED983

Amount of Each Receipt this Period

350.00

☐ Memo Item  
Transfer from JFC

Full Name (Last, First, Middle Initial)

Anderson, Lisa, E., ,

Mailing Address 12160 S Cherry Ln

City

Olathe

State

KS

Zip Code

66061-8790

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

O'Brien Pharmacy

Owner

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

2000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | / | 0 | 7 | / | 2 | 0 | 2 | 3 |

Transaction ID : A0EF5DCDC1D664D9895B

Amount of Each Receipt this Period

350.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

Western Michigan Victory Fund

Mailing Address 228 S Washington St  
Ste 115

City

Alexandria

State

VA

Zip Code

22314-5404

FEC ID number of contributing  
federal political committee.

C C00782631

Name of Employer

Occupation

Receipt For: 2024

☒ Primary  
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

30400.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | / | 1 | 9 | / | 2 | 0 | 2 | 3 |

Transaction ID : A56E6642775244E0395E

Amount of Each Receipt this Period

10300.00

☐ Memo Item  
Transfer from JFC

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

10650.00

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 PageFOR LINE NUMBER:  
(check only one)

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|                                        |                              |                              |                              |                             |
|----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 11a           | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13a | <input type="checkbox"/> 13b | <input type="checkbox"/> 14  | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

Hendrickson, John, T., ,

A. Mailing Address 2350 Onekama Dr SE

City

Grand Rapids

State

MI

Zip Code

49506-5329

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 17 2023

Transaction ID : A757C7E0834B24F81B86

Amount of Each Receipt this Period

250.00



Memo Item

Full Name (Last, First, Middle Initial)

VandeBunte, Paul, A., ,

B. Mailing Address 687 Lugers Rd

City

Holland

State

MI

Zip Code

49423-6846

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

125.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 23 2023

Transaction ID : AE1D1CD98C03148128C9

Amount of Each Receipt this Period

125.00



Memo Item

Full Name (Last, First, Middle Initial)

Fody, Nancy, K., ,

C. Mailing Address 6574 Partridge Ln

City

Holland

State

MI

Zip Code

49423-8965

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 01 2023

Transaction ID : AA4B5C426E0A34933A81

Amount of Each Receipt this Period

1250.00



Memo Item

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

0.00

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 PageFOR LINE NUMBER:  
(check only one)

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|                                        |                              |                              |                              |                             |
|----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 11a           | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13a | <input type="checkbox"/> 13b | <input type="checkbox"/> 14  | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

Wynalda, Connie, A., ,

Mailing Address 420 9 Mile Rd NE

City

Comstock Park

State

MI

Zip Code

49321-9683

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Homemaker

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 1 | 6 |   | 2 | 0 | 2 | 3 |

Transaction ID : A88D356AB683A40C8AAE

Amount of Each Receipt this Period

2500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

Langerak, Michael, J., ,

Mailing Address 6612 Barry St

City

Hudsonville

State

MI

Zip Code

49426-9507

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Langerak Roof Systems

Occupation

Vice President

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 1 | 6 |   | 2 | 0 | 2 | 3 |

Transaction ID : A455FB8404427426F9C8

Amount of Each Receipt this Period

250.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

DeCamp, Douglas, C., ,

Mailing Address 3485 W M 179 Hwy

City

Hastings

State

MI

Zip Code

49058-7646

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Flexfab Horizons International

Occupation

CEO

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 1 | 6 |   | 2 | 0 | 2 | 3 |

Transaction ID : A2BF2F326389D4E9CB52

Amount of Each Receipt this Period

500.00

☒ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 89 OF 191

|                                        |                              |                              |                              |                             |
|----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 11a           | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13a | <input type="checkbox"/> 13b | <input type="checkbox"/> 14  | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

Thomas, Bradley, H., ,

A.

Mailing Address 1811 4 Mile Rd NE

City

Grand Rapids

State

MI

Zip Code

49525-2442

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Progressive AEOccupation  
CEO

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1250.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 | / | 1 | 6 | / | 2 | 0 | 2 | 3 |

Transaction ID : AADB35ED27DE8445AA96

Amount of Each Receipt this Period

1250.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

Boylen, Robert, C., ,

B.

Mailing Address PO Box 1707

City

Grand Rapids

State

MI

Zip Code

49501-1707

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Crystal View Capital, LLCOccupation  
Investment Advisor

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

50.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | / | 0 | 6 | / | 2 | 0 | 2 | 3 |

Transaction ID : AF61E8F3CF79C419CB51

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

Bowen, Daniel, J., ,

C.

Mailing Address 2750 Reeds Lake Blvd SE

City

Grand Rapids

State

MI

Zip Code

49506-2051

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Dempsey VenturesOccupation  
Owner

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1250.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | / | 1 | 7 | / | 2 | 0 | 2 | 3 |

Transaction ID : A82689D25AE7440A69A7

Amount of Each Receipt this Period

1250.00

☒ Memo Item

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

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

0.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 90 OF 191

|                                        |                              |                              |                              |                             |
|----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 11a           | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13a | <input type="checkbox"/> 13b | <input type="checkbox"/> 14  | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

Geenen, Charles, A., ,

A.

Mailing Address 1276 Beach Dr

City

Holland

State

MI

Zip Code

49423-4483

FEC ID number of contributing  
federal political committee.

C

Name of Employer

GDK Construction Company

Occupation

President

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 | / | 1 | 6 | / | 2 | 0 | 2 | 3 |

Transaction ID : A7B100F9BB7AA4FB3864

Amount of Each Receipt this Period

500.00

☒ Memo Item

B.

Full Name (Last, First, Middle Initial)

Huizenga, J. C., , ,

Mailing Address 3755 36th St SE

Ste 100

City

Grand Rapids

State

MI

Zip Code

49512-3143

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Huizenga Manufacturing Group

Occupation

Executive

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1250.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 | / | 1 | 6 | / | 2 | 0 | 2 | 3 |

Transaction ID : AC987FC12C97E4D8CB1C

Amount of Each Receipt this Period

1250.00

☒ Memo Item

C.

Full Name (Last, First, Middle Initial)

Rooks, Jonathan, L., ,

Mailing Address 75 W Walton Ave

Ste A

City

Muskegon

State

MI

Zip Code

49440-1349

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Parkland Property Management, Inc.

Occupation

President

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

3250.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | / | 1 | 7 | / | 2 | 0 | 2 | 3 |

Transaction ID : A9B802B18822843A4864

Amount of Each Receipt this Period

1250.00

☒ Memo Item

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

0.00

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

24825.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 91 OF 191

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input type="checkbox"/> 11a           | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| <input type="checkbox"/> 12            | <input type="checkbox"/> 13a | <input type="checkbox"/> 13b | <input type="checkbox"/> 14  |
| <input checked="" type="checkbox"/> 15 |                              |                              |                              |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

Isabella Bank

A.

Mailing Address PO Box 100

City

Mount Pleasant

State

MI

Zip Code

48804-0100

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

4113.17

Date of Receipt

M M / D D / Y Y Y Y Y  
10 31 2023

Transaction ID : A061AEBD64885400B9BD

Amount of Each Receipt this Period

1539.27

☐ Memo Item  
Interest income

B.

Full Name (Last, First, Middle Initial)

Isabella Bank

Mailing Address PO Box 100

City

Mount Pleasant

State

MI

Zip Code

48804-0100

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

4119.22

Date of Receipt

M M / D D / Y Y Y Y Y  
11 06 2023

Transaction ID : A072F735832B84F15A0A

Amount of Each Receipt this Period

6.05

☐ Memo Item  
Interest income

C.

Full Name (Last, First, Middle Initial)

Isabella Bank

Mailing Address PO Box 100

City

Mount Pleasant

State

MI

Zip Code

48804-0100

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

5762.13

Date of Receipt

M M / D D / Y Y Y Y Y  
11 30 2023

Transaction ID : A50E8695ABB124EE8AF0

Amount of Each Receipt this Period

1639.65

☐ Memo Item  
Interest income

3184.97

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 92 OF 191

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input type="checkbox"/> 11a           | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| <input type="checkbox"/> 12            | <input type="checkbox"/> 13a | <input type="checkbox"/> 13b | <input type="checkbox"/> 14  |
| <input checked="" type="checkbox"/> 15 |                              |                              |                              |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

Isabella Bank

A.

Mailing Address PO Box 100

City

Mount Pleasant

State

MI

Zip Code

48804-0100

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

5762.13

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 30 / 2023D D / Y Y Y Y Y  
30 / 2023Y Y Y Y Y  
2023

Transaction ID : A9CA826B8BF4843B48B2

Amount of Each Receipt this Period

3.26

☐ Memo Item

Interest income

B.

Full Name (Last, First, Middle Initial)

Isabella Bank

Mailing Address PO Box 100

City

Mount Pleasant

State

MI

Zip Code

48804-0100

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

7502.26

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 31 / 2023D D / Y Y Y Y Y  
31 / 2023Y Y Y Y Y  
2023

Transaction ID : A3E009E0784424B62853

Amount of Each Receipt this Period

3.56

☐ Memo Item

December interest income

C.

Full Name (Last, First, Middle Initial)

Isabella Bank

Mailing Address PO Box 100

City

Mount Pleasant

State

MI

Zip Code

48804-0100

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

7502.26

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 31 / 2023D D / Y Y Y Y Y  
31 / 2023Y Y Y Y Y  
2023

Transaction ID : A8251BEB656C14EF183F

Amount of Each Receipt this Period

1736.57

☐ Memo Item

December interest income

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

1743.39

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

4928.36

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 93 OF 191

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. Andrews Hooper Pavlik, PLC**Mailing Address 5915 Eastman Ave  
Ste 100City  
MidlandState  
MIZip Code  
48640-6824Purpose of Disbursement  
Accounting Services

001

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 0 | 2 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

9170.00

Transaction ID : B99ACA8AEAF4B44B4B21

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. PayPal, Inc.**

Mailing Address 2211 N 1st St

City  
San JoseState  
CAZip Code  
95131-2021Purpose of Disbursement  
Credit Card Processing Fee

001

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 0 | 2 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

30.00

Transaction ID : BCBC523E1EB9D4497B1B

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Topfundraising.com LLC**

Mailing Address 7545 Shagwood St SE

City  
CaledoniaState  
MIZip Code  
49316-7969Purpose of Disbursement  
Fundraising Consulting - In-House

003

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 0 | 2 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

2000.00

Transaction ID : B785FED26AAF546BEB94

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

11200.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 94 OF 191

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. Cardmember Service**

Mailing Address PO Box 94014

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 04  |   | 2023    |

City  
PalatineState  
ILZip Code  
60094-4014

FEC Identification Number

C

Purpose of Disbursement  
Credit card payment - itemized

002

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

9631.02

Transaction ID : B16F504384C9C4B27B39

☐ Memo Item

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. Oskar Scots**

Mailing Address 9353 Cherry Valley Ave SE

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 08  |   | 10  |   | 2023    |

City  
CaledoniaState  
MIZip Code  
49316-9506

FEC Identification Number

C

Purpose of Disbursement  
Meal

002

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

32.17

Transaction ID : B5C9F4CCAA695470F850

☒ Memo Item

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. Delta Airlines**

Mailing Address 1030 Delta Boulevard

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 08  |   | 10  |   | 2023    |

City  
AtlantaState  
GAZip Code  
30354-1989

FEC Identification Number

C

Purpose of Disbursement  
Airfare for official event

002

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

448.20

Transaction ID : BFCBA3FDAF6B44DA7AF9

☒ Memo Item

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).....▶

9631.02

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 95 OF 191

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. Capitol Hill Club**

Mailing Address 300 1st Street SE

City  
WashingtonState  
DCZip Code  
20003-1801Purpose of Disbursement  
Dues

001

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 1 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

150.00

Transaction ID : BB823344EB4354C6CB6D

☒ Memo Item**B. Postmaster Midland - USPS**

Mailing Address 2900 Rodd Street

City  
MidlandState  
MIZip Code  
48640-4483Purpose of Disbursement  
Shipping

001

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 1 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

9.00

Transaction ID : BF268555C34624A59841

☒ Memo Item**C. Schubergs Bar**

Mailing Address 109 N Michigan Avenue

City  
Big RapidsState  
MIZip Code  
49307-1401Purpose of Disbursement  
Meals

002

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 1 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

45.75

Transaction ID : BDFCAF21699D946F1AB1

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 96 OF 191

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. Capitol Hill Club**

Mailing Address 300 1st Street SE

City  
WashingtonState  
DCZip Code  
20003-1801Purpose of Disbursement  
Dues, meals

001

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 1 | 2 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

426.41

Transaction ID : B1BFCA270C2A240F2810

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Black Star Farms**

Mailing Address 10844 E Revold Rd

City  
Suttons BayState  
MIZip Code  
49682-9703Purpose of Disbursement  
Food, beverage, accommodations for event

003

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 1 | 5 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

6276.81

Transaction ID : BDA295DD264ED4AF28B1

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Subway - Caledonia**

Mailing Address 9175 Cherry Valley Ave SE

City  
CaledoniaState  
MIZip Code  
49316-9746Purpose of Disbursement  
Staff Meals

002

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 1 | 6 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

52.21

Transaction ID : BF1D3461F16DD480183B

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 97 OF 191

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. Uccello's**

Mailing Address 8256 Broadmoor Ave SE

City  
CaledoniaState  
MIZip Code  
49316-8389Purpose of Disbursement  
Business Meeting Meals

001

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 1 | 6 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

48.29

Transaction ID : B50A78B8A05394DC0A9F

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Tie The Knot Bouquets**

Mailing Address 11978 W Watergate Rd

City  
CadillacState  
MIZip Code  
49601-9421Purpose of Disbursement  
Flowers

001

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 1 | 7 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

190.80

Transaction ID : B281298F915A049F1AF2

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Zoom Video Communications Inc.**Mailing Address 55 Almaden Blvd  
6th FloorCity  
San JoseState  
CAZip Code  
95113-1608Purpose of Disbursement  
Meeting Services

003

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 1 | 8 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

14.41

Transaction ID : B930693602D864C769F2

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 98 OF 191

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. Burger King - Greenville**

Mailing Address 1704 W Washington St

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 1 | 9 |   | 2 | 0 | 2 | 3 |

City  
GreenvilleState  
MIZip Code  
48838-2619

FEC Identification Number

C

Purpose of Disbursement  
Meal

002

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

14.19

Transaction ID : B282D21454D7044B6909

☒ Memo Item

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. Sam's Club - Comstock**

Mailing Address 3901 Alpine Ave NW

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 1 | 9 |   | 2 | 0 | 2 | 3 |

City  
Comstock ParkState  
MIZip Code  
49321-8350

FEC Identification Number

C

Purpose of Disbursement  
Parade Candy

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

974.40

Transaction ID : BF2545E98FA0F44BE967

☒ Memo Item

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. Dairy Queen - Greenville**

Mailing Address 1015 W Washington St

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 1 | 9 |   | 2 | 0 | 2 | 3 |

City  
GreenvilleState  
MIZip Code  
48838-2617

FEC Identification Number

C

Purpose of Disbursement  
Meal

002

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

4.23

Transaction ID : B35F84849C01C46D0A21

☒ Memo Item

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).....▶

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 99 OF 191

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. Applebee's Greenville**

Mailing Address 615 S Greenville W Dr

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 2 | 0 |   | 2 | 0 | 2 | 3 |

City  
GreenvilleState  
MIZip Code  
48838-3534

FEC Identification Number

C

Purpose of Disbursement  
Staff Meeting Meals

002

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

53.91

Transaction ID : B8C87CCE34F4249AC86C

☒ Memo Item

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. Marty's Bar**

Mailing Address 123 S Main St

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 2 | 1 |   | 2 | 0 | 2 | 3 |

City  
Mt PleasantState  
MIZip Code  
48858-2330

FEC Identification Number

C

Purpose of Disbursement  
Staff meals

002

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

44.25

Transaction ID : B1B33562478B2466196B

☒ Memo Item

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. FedEx**Mailing Address 3875 Airways  
Module H3 Department 4634

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 2 | 2 |   | 2 | 0 | 2 | 3 |

City  
MemphisState  
TNZip Code  
38116-5070

FEC Identification Number

C

Purpose of Disbursement  
Shipping

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

30.98

Transaction ID : BFCF7A6F0A4864F0AA6C

☒ Memo Item

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).....▶

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 100 OF 191

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. Riverside Family Restaurant**

Mailing Address 8295 Midland Rd

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 2 | 2 |   | 2 | 0 | 2 | 3 |

City  
FreelandState  
MIZip Code  
48623-9002

FEC Identification Number

C

Purpose of Disbursement  
Staff Meals

002

Candidate Name

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) ▼ |                          |         |

Amount of Each Disbursement this Period

72.32

Transaction ID : B630D63D3EEFC4790864

☒ Memo Item

State:

District:

Full Name (Last, First, Middle Initial)

**B. The H Hotel**

Mailing Address 111 W Main St

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 2 | 2 |   | 2 | 0 | 2 | 3 |

City  
MidlandState  
MIZip Code  
48640-5155

FEC Identification Number

C

Purpose of Disbursement  
Business meeting meals

001

Candidate Name

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) ▼ |                          |         |

Amount of Each Disbursement this Period

60.88

Transaction ID : BF03F76117B25478AAD9

☒ Memo Item

State:

District:

Full Name (Last, First, Middle Initial)

**C. Burger King - Greenville**

Mailing Address 1704 W Washington St

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 2 | 3 |   | 2 | 0 | 2 | 3 |

City  
GreenvilleState  
MIZip Code  
48838-2619

FEC Identification Number

C

Purpose of Disbursement  
Meal

002

Candidate Name

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) ▼ |                          |         |

Amount of Each Disbursement this Period

14.19

Transaction ID : B5FFDBF1AA3764303B54

☒ Memo Item

State:

District:

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

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 101 OF 191

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. BP - Caledonia**

Mailing Address 9633 Cherry Valley Ave SE

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 2 | 4 |   | 2 | 0 | 2 | 3 |

City  
CaledoniaState  
MIZip Code  
49316-9566

FEC Identification Number

C

Purpose of Disbursement  
Meal

002

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

4.20

Transaction ID : B3C10CD4036F94A049E7

☒ Memo Item

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. Apple Computer, Inc.**

Mailing Address 1 Infinite Loop

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 2 | 5 |   | 2 | 0 | 2 | 3 |

City  
CupertinoState  
CAZip Code  
95014-2083

FEC Identification Number

C

Purpose of Disbursement  
Phone app

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

0.99

Transaction ID : BE0ED0F59CA324BF3B32

☒ Memo Item

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. Rite Aid - Caledonia**

Mailing Address 9377 Cherry Valley Ave SE

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 2 | 9 |   | 2 | 0 | 2 | 3 |

City  
CaledoniaState  
MIZip Code  
49316-8420

FEC Identification Number

C

Purpose of Disbursement  
Supplies

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

50.86

Transaction ID : B7F3427EBFCE641EFB0B

☒ Memo Item

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).....▶

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 102 OF 191

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. Sympathy Floral Store**

Mailing Address 407 E Fort St

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 08  |   | 31  |   | 2023    |

City  
DetroitState  
MIZip Code  
48226-2940

FEC Identification Number

C

Purpose of Disbursement  
Flowers

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

89.99

Transaction ID : BEB3EAE8FC174A05966

☒ Memo Item

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. Sympathy Floral Store**

Mailing Address 407 E Fort St

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 08  |   | 31  |   | 2023    |

City  
DetroitState  
MIZip Code  
48226-2940

FEC Identification Number

C

Purpose of Disbursement  
Flowers

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

105.89

Transaction ID : B5526F1F0018A4FCF8BF

☒ Memo Item

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. Blue Bridge Market - GR**

Mailing Address 5500 44th St SE

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 01  |   | 2023    |

City  
Grand RapidsState  
MIZip Code  
49512-4055

FEC Identification Number

C

Purpose of Disbursement  
Meal

002

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

18.00

Transaction ID : B49C566A8156F4888997

☒ Memo Item

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).....▶

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 103 OF 191

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. FedEx**Mailing Address 3875 Airways  
Module H3 Department 4634

City Memphis State TN Zip Code 38116-5070

Purpose of Disbursement  
Shipping

001

Candidate Name

Category/  
TypeOffice 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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 0 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

50.67

Transaction ID : B0E3536C1B27B4311AAA

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Caledonia Storage**

Mailing Address 10330 Cherry Valley Ave SE

City Caledonia State MI Zip Code 49316-7326

Purpose of Disbursement  
Storage Unit Rental

001

Candidate Name

Category/  
TypeOffice 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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 0 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

100.00

Transaction ID : B54E03FBA52344B92912

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Mount Vernon Inn Restaurant**

Mailing Address 3200 Mount Vernon Memorial Hwy

City Mount Vernon State VA Zip Code 22121

Purpose of Disbursement  
Staff Meals

002

Candidate Name

Category/  
TypeOffice 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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 0 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

144.00

Transaction ID : BAE67B933C9CC42D08F3

☒ Memo Item

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

0.00

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 104 OF 191

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. Uber Technologies, Inc.**

Mailing Address 800 Market St

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 02  |   | 2023    |

City  
San FranciscoState  
CAZip Code  
94102-3033

FEC Identification Number

C

Purpose of Disbursement  
Transportation Expense

002

Amount of Each Disbursement this Period

50.49

Candidate Name

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:

Transaction ID : BFB5646E1E8E1419F986

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Subway - Caledonia**

Mailing Address 9175 Cherry Valley Ave SE

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 04  |   | 2023    |

City  
CaledoniaState  
MIZip Code  
49316-9746

FEC Identification Number

C

Purpose of Disbursement  
Staff Meals

002

Amount of Each Disbursement this Period

28.63

Candidate Name

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:

Transaction ID : BD5EDA9145B7D4E1581D

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Uber Technologies, Inc.**

Mailing Address 800 Market St

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 04  |   | 2023    |

City  
San FranciscoState  
CAZip Code  
94102-3033

FEC Identification Number

C

Purpose of Disbursement  
Transportation Expense

002

Amount of Each Disbursement this Period

23.90

Candidate Name

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:

Transaction ID : BC220E75B0BF64E0FB9E

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 105 OF 191

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. Hooks Solutions LLC**

Mailing Address PO Box 15474

City  
WashingtonState  
DCZip Code  
20003Purpose of Disbursement  
Fundraising Consulting - In-House

003

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 0 | 4 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

16875.00

Transaction ID : BA7BF97C0ADF34866B85

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Hooks Solutions LLC**

Mailing Address PO Box 15474

City  
WashingtonState  
DCZip Code  
20003Purpose of Disbursement  
Fundraising Expenses - Itemized subject to limit

003

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 0 | 4 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

285.77

Transaction ID : B228F640856354164B6E

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Uber Technologies, Inc.**

Mailing Address 800 Market St

City  
San FranciscoState  
CAZip Code  
94102-3033Purpose of Disbursement  
Transportation Expense

002

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 2 | 3 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

15.98

Transaction ID : BD040101F40EB43659B4

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

17160.77

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 106 OF 191

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. Uber Technologies, Inc.**

Mailing Address 800 Market St

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 7 |   | 2 | 0 | 2 | 3 |

City  
San FranciscoState  
CAZip Code  
94102-3033

FEC Identification Number

C

Purpose of Disbursement  
Transportation Expense

002

Amount of Each Disbursement this Period

10.97

Transaction ID : B8CEF14F17FD344B2995

☒ Memo Item

Candidate Name

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)

**B. Uber Technologies, Inc.**

Mailing Address 800 Market St

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 7 |   | 2 | 0 | 2 | 3 |

City  
San FranciscoState  
CAZip Code  
94102-3033

FEC Identification Number

C

Purpose of Disbursement  
Transportation Expense

002

Amount of Each Disbursement this Period

9.70

Transaction ID : B4BEDF8C8975743468BC

☒ Memo Item

Candidate Name

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. Staples**Mailing Address 1250 H Street NW  
Suite 100

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 0 | 1 |   | 2 | 0 | 2 | 3 |

City  
WashingtonState  
DCZip Code  
20005-3952

FEC Identification Number

C

Purpose of Disbursement  
Event supplies

003

Amount of Each Disbursement this Period

96.00

Transaction ID : BE2EE7E112904407B833

☒ Memo Item

Candidate Name

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).....▶

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 107 OF 191

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. Uber Technologies, Inc.**

Mailing Address 800 Market St

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 2 | 4 |   | 2 | 0 | 2 | 3 |

City  
San FranciscoState  
CAZip Code  
94102-3033

FEC Identification Number

C

Purpose of Disbursement  
Transportation Expense

002

Amount of Each Disbursement this Period

31.95

Transaction ID : B7078FDF579D84F408B0

☒ Memo Item

Candidate Name

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)

**B. Harris Teeter**

Mailing Address 401 M Street SE

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 2 | 5 |   | 2 | 0 | 2 | 3 |

City  
WashingtonState  
DCZip Code  
20003-3469

FEC Identification Number

C

Purpose of Disbursement  
Event supplies

003

Amount of Each Disbursement this Period

37.78

Transaction ID : B9431BD8C1BA44AA3983

☒ Memo Item

Candidate Name

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. Bonchon Navy Yard**

Mailing Address 1015 Half St SE

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 2 | 5 |   | 2 | 0 | 2 | 3 |

City  
WashingtonState  
DCZip Code  
20003-3654

FEC Identification Number

C

Purpose of Disbursement  
Food for event

003

Amount of Each Disbursement this Period

60.64

Transaction ID : BE773DFD5846C40ED834

☒ Memo Item

Candidate Name

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).....▶

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 108 OF 191

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. Capitol Hill Club**

Mailing Address 300 1st Street SE

City  
WashingtonState  
DCZip Code  
20003-1801Purpose of Disbursement  
Meeting meal

003

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 1 | 3 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

22.75

Transaction ID : BF05149E841B744F6AF9

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. A & A Storage**

Mailing Address PO Box 55

City  
MidlandState  
MIZip Code  
48640-0055Purpose of Disbursement  
Storage Unit Rental

001

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 0 | 5 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

110.00

Transaction ID : B23781CACDE4F432B92B

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Jordan, Damon, J., ,**Mailing Address 11127 52nd Ave  
D1City  
AllendaleState  
MIZip Code  
49401-9108Purpose of Disbursement  
Mileage Reimbursement

002

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 0 | 5 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

107.88

Transaction ID : BEAF8A654D8C24019A46

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

217.88

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 109 OF 191

|                                               |                             |                              |                              |
|-----------------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="checked" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                           | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. Red Rock Strategies**

Mailing Address 9500 W Flamingo Rd

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 0 | 5 |   | 2 | 0 | 2 | 3 |

City  
Las VegasState  
NVZip Code  
89147-5719

FEC Identification Number

C

Purpose of Disbursement  
Digital Consulting - In-House

004

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

3000.00

Transaction ID : B9F96E0A7B26944CB908

☐ Memo Item

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. Red Rock Strategies**

Mailing Address 9500 W Flamingo Rd

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 0 | 5 |   | 2 | 0 | 2 | 3 |

City  
Las VegasState  
NVZip Code  
89147-5719

FEC Identification Number

C

Purpose of Disbursement  
Fundraising - Commissions

003

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

26.76

Transaction ID : B06B91D8FD0A042A6A41

☐ Memo Item

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. Red Rock Strategies**

Mailing Address 9500 W Flamingo Rd

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 0 | 5 |   | 2 | 0 | 2 | 3 |

City  
Las VegasState  
NVZip Code  
89147-5719

FEC Identification Number

C

Purpose of Disbursement  
Subscription - Itemized subj to limit

004

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

569.50

Transaction ID : BCDD7A9E3CCBE41B39D1

☐ Memo Item

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).....▶

3596.26

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 110 OF 191

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. Mailchimp**Mailing Address 675 Ponce De Leon Ave NE  
Ste 5000City  
AtlantaState  
GAZip Code  
30308-2172Purpose of Disbursement  
Subscription

004

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 1 | 5 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

569.50

Transaction ID : B6487748D8F1F473C85D

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. WinRed Technical Services LLC**

Mailing Address 1776 Wilson Blvd

City  
ArlingtonState  
VAZip Code  
22219Purpose of Disbursement  
Credit Card Processing Fee

003

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 0 | 5 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1.97

Transaction ID : BC77ED80E4CE14F96953

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Butzke, Gabriel, T., ,**

Mailing Address 243 W Orleans St

City  
OtsegoState  
MIZip Code  
49078-1141Purpose of Disbursement  
Mileage Reimbursement

002

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 0 | 6 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

440.80

Transaction ID : B4A8886124A964B79AA8

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

442.77

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 111 OF 191

|                                               |                             |                              |                              |
|-----------------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="checked" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                           | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. WinRed Technical Services LLC**

Mailing Address 1776 Wilson Blvd

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 10  | 06  | 2023    |

City  
ArlingtonState  
VAZip Code  
22219

FEC Identification Number

C

Purpose of Disbursement  
Credit Card Processing Fee

003

Amount of Each Disbursement this Period

39.47

Transaction ID : B15B54B480FDC449089F

☐ Memo Item

Candidate Name

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)

**B. Verizon Wireless**

Mailing Address PO Box 15062

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 10  | 08  | 2023    |

City  
AlbanyState  
NYZip Code  
12212-5062

FEC Identification Number

C

Purpose of Disbursement  
Cell phones, data access

001

Amount of Each Disbursement this Period

32.12

Transaction ID : B23C9A5BE55BD4A4B8EF

☐ Memo Item

Candidate Name

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. Mostrom, Jeremiah, , ,**

Mailing Address 8188 96th St SE

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 10  | 10  | 2023    |

City  
AltoState  
MIZip Code  
49302-9503

FEC Identification Number

C

Purpose of Disbursement  
In-kind:Food and Beverage for Event

Candidate Name

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).....▶

1651.52

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 112 OF 191

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. Verizon Wireless**

Mailing Address PO Box 15062

City  
AlbanyState  
NYZip Code  
12212-5062Purpose of Disbursement  
Cell phones, data access

001

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 1 | 0 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

446.63

Transaction ID : BF5854EA390F541BC9A6

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Maloney, Ashton, M., ,**

Mailing Address 6104 Partridge Ln

City  
MidlandState  
MIZip Code  
48640-2112Purpose of Disbursement  
Mileage Reimbursement

002

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 1 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

487.20

Transaction ID : B80080ACC5AA9491D972

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WinRed Technical Services LLC**

Mailing Address 1776 Wilson Blvd

City  
ArlingtonState  
VAZip Code  
22219Purpose of Disbursement  
Credit Card Processing Fee

003

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 1 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1.57

Transaction ID : BE0C5BCB60952496897B

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

935.40

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 113 OF 191

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. PayPal, Inc.**

Mailing Address 2211 N 1st St

City  
San JoseState  
CAZip Code  
95131-2021Purpose of Disbursement  
Credit Card Processing Fee

001

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 1 | 2 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

54.30

Transaction ID : BA3524F087B52479A875

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WinRed Technical Services LLC**

Mailing Address 1776 Wilson Blvd

City  
ArlingtonState  
VAZip Code  
22219Purpose of Disbursement  
Credit Card Processing Fee

003

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 1 | 2 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1.51

Transaction ID : BA124DD3535C24638929

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Butzke, Gabriel, T., ,**

Mailing Address 243 W Orleans St

City  
OtsegoState  
MIZip Code  
49078-1141Purpose of Disbursement  
Wages

001

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 1 | 3 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

220.75

Transaction ID : BB040B5CCE6B24EFBB42

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

276.56

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 114 OF 191

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. Coker, Emmah, M., ,**

Mailing Address 511 Wilcox Pkwy

City  
ClareState  
MIZip Code  
48617-8903Purpose of Disbursement  
Wages

001

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 1 | 3 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

110.38

Transaction ID : B2D145544285C4D79A7E

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Davenport, Jacob, P., ,**

Mailing Address 527 Lafayette St

City  
LowellState  
MIZip Code  
49331-1124Purpose of Disbursement  
Wages

001

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 1 | 3 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

110.37

Transaction ID : BC8570D7D87C544E9A02

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Grand Rapids Right To Life**

Mailing Address PO Box 901

City  
WyomingState  
MIZip Code  
49509-0901Purpose of Disbursement  
Donation for Annual Dinner Event

001

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 1 | 3 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

250.00

Transaction ID : B838E948EF2BC4A42A7C

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

470.75

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 115 OF 191

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. Grand Rapids Right To Life**

Mailing Address PO Box 901

City  
WyomingState  
MIZip Code  
49509-0901Purpose of Disbursement  
Event tickets

001

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 1 | 3 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

100.00

Transaction ID : B6AAD77522DB74686AE7

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Jordan, Damon, J., ,**Mailing Address 11127 52nd Ave  
D1City  
AllendaleState  
MIZip Code  
49401-9108Purpose of Disbursement  
Wages

001

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 1 | 3 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

367.91

Transaction ID : B9CE048451D5644E88CE

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Maloney, Ashton, M., ,**

Mailing Address 6104 Partridge Ln

City  
MidlandState  
MIZip Code  
48640-2112Purpose of Disbursement  
Wages

001

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 1 | 3 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

716.70

Transaction ID : B7EF021FE13404663900

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1184.61

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 116 OF 191

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. WinRed Technical Services LLC**

Mailing Address 1776 Wilson Blvd

City  
ArlingtonState  
VAZip Code  
22219Purpose of Disbursement  
Credit Card Processing Fee

003

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 1 | 3 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1.07

Transaction ID : B48AAC5F3C5F24CC3AB1

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Aristotle International, Inc.**

Mailing Address PO Box 716045

City  
PhiladelphiaState  
PAZip Code  
19171-6045Purpose of Disbursement  
Campaign Reporting Software

001

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 1 | 5 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

575.00

Transaction ID : BE4D1913531C34A24BFB

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. PayPal, Inc.**

Mailing Address 2211 N 1st St

City  
San JoseState  
CAZip Code  
95131-2021Purpose of Disbursement  
Credit Card Processing Fee

001

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 1 | 6 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

135.30

Transaction ID : B9ACF4A6DF9D44CD4A3C

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

711.37

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 117 OF 191

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. Topfundraising.com LLC**

Mailing Address 7545 Shagwood St SE

City  
CaledoniaState  
MIZip Code  
49316-7969Purpose of Disbursement  
Fundraising Expenses - Itemized subject to limit

003

Candidate Name

Category/  
TypeOffice 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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 1 | 6 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

596.68

Transaction ID : B920E63F340E241E59B5

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Staples**

Mailing Address 5110 28th Street SE

City  
Grand RapidsState  
MIZip Code  
49512-2049Purpose of Disbursement  
Supplies for Event

003

Candidate Name

Category/  
TypeOffice 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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 0 | 9 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

79.50

Transaction ID : BB6EE9C70B7B14B83ACE

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Wealthy Street Bakery**

Mailing Address 610 Wealthy St SE

City  
Grand RapidsState  
MIZip Code  
49503-5432Purpose of Disbursement  
Catering for Event

003

Candidate Name

Category/  
TypeOffice 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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 1 | 0 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

517.18

Transaction ID : B2F5EAD9541B44BB98F3

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

596.68

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 118 OF 191

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. WinRed Technical Services LLC**

Mailing Address 1776 Wilson Blvd

City  
ArlingtonState  
VAZip Code  
22219Purpose of Disbursement  
Credit Card Processing Fee

003

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 1 | 6 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1.97

Transaction ID : B2E9B23850F79446A9E8

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Newaygo County Right To Life**

Mailing Address 3677 S Osborn Ave

City  
FremontState  
MIZip Code  
49412-7653Purpose of Disbursement  
Donation for Annual Dinner Event

001

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 1 | 7 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

50.00

Transaction ID : B561F223519884B79ABB

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Newaygo County Right To Life**

Mailing Address 3677 S Osborn Ave

City  
FremontState  
MIZip Code  
49412-7653Purpose of Disbursement  
Ticket for Annual Dinner Event

001

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 1 | 7 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

30.00

Transaction ID : B1D784A4850E64521B86

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

81.97

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 119 OF 191

|                                               |                             |                              |                              |
|-----------------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="checked" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                           | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. United States Treasury**

Mailing Address 1500 Pennsylvania Ave NW

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 17  |   | 2023    |

City  
WashingtonState  
DCZip Code  
20220-0001

FEC Identification Number

C

Purpose of Disbursement  
Payroll Taxes

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

355.96

Transaction ID : BA08FFBDEC5F149B49BA

☐ Memo Item

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. WinRed Technical Services LLC**

Mailing Address 1776 Wilson Blvd

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 18  |   | 2023    |

City  
ArlingtonState  
VAZip Code  
22219

FEC Identification Number

C

Purpose of Disbursement  
Credit Card Processing Fee

003

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1.19

Transaction ID : BE873790FF22945B6BCD

☐ Memo Item

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 - SWT**

Mailing Address PO Box 30324

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 20  |   | 2023    |

City  
LansingState  
MIZip Code  
48909-7824

FEC Identification Number

C

Purpose of Disbursement  
Michigan withholding tax

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

215.69

Transaction ID : B8F71214FE625490D8C4

☐ Memo Item

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).....▶

572.84

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 120 OF 191

|                                               |                             |                              |                              |
|-----------------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="checked" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                           | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. WinRed Technical Services LLC**

Mailing Address 1776 Wilson Blvd

City  
ArlingtonState  
VAZip Code  
22219Purpose of Disbursement  
Credit Card Processing Fee

003

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 4 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

0.33

Transaction ID : BDD56EA484C6E4A30AA4

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Andrews Hooper Pavlik, PLC**Mailing Address 5915 Eastman Ave  
Ste 100City  
MidlandState  
MIZip Code  
48640-6824Purpose of Disbursement  
Accounting Services

001

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 6 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

9500.00

Transaction ID : BF63412196A7548D9B1E

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WinRed Technical Services LLC**

Mailing Address 1776 Wilson Blvd

City  
ArlingtonState  
VAZip Code  
22219Purpose of Disbursement  
Credit Card Processing Fee

003

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 6 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

9.93

Transaction ID : B451F0B85FD474CDA92E

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

9510.26

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 121 OF 191

|                                               |                             |                              |                              |
|-----------------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="checked" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                           | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. WinRed Technical Services LLC**

Mailing Address 1776 Wilson Blvd

City  
ArlingtonState  
VAZip Code  
22219Purpose of Disbursement  
Credit Card Processing Fee

003

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 3 | 0 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

9.87

Transaction ID : B2279F2333DF140C49FB

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WinRed Technical Services LLC**

Mailing Address 1776 Wilson Blvd

City  
ArlingtonState  
VAZip Code  
22219Purpose of Disbursement  
Credit Card Processing Fee

003

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 3 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

0.44

Transaction ID : B81A1D2CA57C5411EB81

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Maloney, Ashton, M., ,**

Mailing Address 6104 Partridge Ln

City  
MidlandState  
MIZip Code  
48640-2112Purpose of Disbursement  
Mileage Reimbursement

002

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

478.50

Transaction ID : B5E91A8839FED420EBCC

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

488.81

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 122 OF 191

|                                               |                             |                              |                              |
|-----------------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="checked" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                           | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. PayPal, Inc.**

Mailing Address 2211 N 1st St

City  
San JoseState  
CAZip Code  
95131-2021Purpose of Disbursement  
Credit Card Processing Fee

001

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

30.00

Transaction ID : B7F0BF4AFD597462D9F0

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. QRP, Inc.**

Mailing Address 3000 James Savage Rd

City  
MidlandState  
MIZip Code  
48642-6533Purpose of Disbursement  
Printing - Door Hangers, Lit Cards

004

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1858.49

Transaction ID : B21DF37E11301425FB2F

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. QRP, Inc.**

Mailing Address 3000 James Savage Rd

City  
MidlandState  
MIZip Code  
48642-6533Purpose of Disbursement  
Printing - Business Cards, Nominating Petitions, UPS - Itemized

001

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

3746.72

Transaction ID : B59229B26BDBC418E8B8

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

5635.21

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 123 OF 191

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. The Voyageur Company LLC**

Mailing Address 1151 Orchard Circle

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 5 |   | 2 | 0 | 2 | 3 |

City  
Saint PaulState  
MNZip Code  
55118-4146

FEC Identification Number

C

Purpose of Disbursement  
Printing - Nominating Petitions

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

3081.48

Transaction ID : B7D2D76B21AC141E3963

☒ Memo Item

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. WinRed Technical Services LLC**

Mailing Address 1776 Wilson Blvd

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 1 |   | 2 | 0 | 2 | 3 |

City  
ArlingtonState  
VAZip Code  
22219

FEC Identification Number

C

Purpose of Disbursement  
Credit Card Processing Fee

003

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

126.27

Transaction ID : B4A82E056F9D147CCA3B

☐ Memo Item

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. Coker, Emmah, M., ,**

Mailing Address 511 Wilcox Pkwy

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 2 |   | 2 | 0 | 2 | 3 |

City  
ClareState  
MIZip Code  
48617-8903

FEC Identification Number

C

Purpose of Disbursement  
Mileage Reimbursement

002

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

256.36

Transaction ID : B2C118BD0D9DF46C4910

☐ Memo Item

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).....▶

382.63

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 124 OF 191

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. PayPal, Inc.**

Mailing Address 2211 N 1st St

City  
San JoseState  
CAZip Code  
95131-2021Purpose of Disbursement  
Credit Card Processing Fee

001

Candidate Name

Category/  
TypeOffice 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:

Date of Disbursement

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 11 |   |   | 02 |   |   | 2023 |   |   |   |

FEC Identification Number

C

Amount of Each Disbursement this Period

233.10

Transaction ID : BD9D90B49F4934A28BFE

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WinRed Technical Services LLC**

Mailing Address 1776 Wilson Blvd

City  
ArlingtonState  
VAZip Code  
22219Purpose of Disbursement  
Credit Card Processing Fee

003

Candidate Name

Category/  
TypeOffice 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:

Date of Disbursement

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 11 |   |   | 02 |   |   | 2023 |   |   |   |

FEC Identification Number

C

Amount of Each Disbursement this Period

3.15

Transaction ID : B73DF54C445854B2DAE1

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WinRed Technical Services LLC**

Mailing Address 1776 Wilson Blvd

City  
ArlingtonState  
VAZip Code  
22219Purpose of Disbursement  
Credit Card Processing Fee

003

Candidate Name

Category/  
TypeOffice 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:

Date of Disbursement

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 11 |   |   | 02 |   |   | 2023 |   |   |   |

FEC Identification Number

C

Amount of Each Disbursement this Period

9.93

Transaction ID : B6FB38985A24540E7B9A

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

246.18

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 125 OF 191

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. Cardmember Service**

Mailing Address PO Box 94014

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 3 |   | 2 | 0 | 2 | 3 |

City  
PalatineState  
ILZip Code  
60094-4014

FEC Identification Number

C

Purpose of Disbursement  
Credit card payment - itemized

002

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1245.20

Transaction ID : B56F722B29AA4403EACC

☐ Memo Item

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. Caledonia Storage**

Mailing Address 10330 Cherry Valley Ave SE

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 0 | 1 |   | 2 | 0 | 2 | 3 |

City  
CaledoniaState  
MIZip Code  
49316-7326

FEC Identification Number

C

Purpose of Disbursement  
Storage Unit Rental

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

100.00

Transaction ID : B855A4B4C286C440292A

☒ Memo Item

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. Uber Technologies, Inc.**

Mailing Address 800 Market St

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 0 | 1 |   | 2 | 0 | 2 | 3 |

City  
San FranciscoState  
CAZip Code  
94102-3033

FEC Identification Number

C

Purpose of Disbursement  
Transportation Expense

002

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

54.45

Transaction ID : BCE8F9CEAA3454247AF5

☒ Memo Item

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).....▶

1245.20

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 126 OF 191

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. Uber Technologies, Inc.**

Mailing Address 800 Market St

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 01  |   | 2023    |

City  
San FranciscoState  
CAZip Code  
94102-3033

FEC Identification Number

C

Purpose of Disbursement  
Transportation Expense

002

Amount of Each Disbursement this Period

71.01

Transaction ID : B5C119AEFF8BA4D939B4

☒ Memo Item

Candidate Name

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)

**B. Staples**

Mailing Address 1517 Joe Mann Boulevard

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 02  |   | 2023    |

City  
MidlandState  
MIZip Code  
48642-8902

FEC Identification Number

C

Purpose of Disbursement  
Office Supplies

001

Amount of Each Disbursement this Period

134.59

Transaction ID : BB77F5FBC2A1947D9A9A

☒ Memo Item

Candidate Name

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. FedEx**Mailing Address 3875 Airways  
Module H3 Department 4634

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 03  |   | 2023    |

City  
MemphisState  
TNZip Code  
38116-5070

FEC Identification Number

C

Purpose of Disbursement  
Shipping

001

Amount of Each Disbursement this Period

23.94

Transaction ID : B2D01BE1298024C85A2B

☒ Memo Item

Candidate Name

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).....▶

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 127 OF 191

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. Postmaster Midland - USPS**

Mailing Address 2900 Rodd Street

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 0 | 3 |   | 2 | 0 | 2 | 3 |

City  
MidlandState  
MIZip Code  
48640-4483

FEC Identification Number

C

Purpose of Disbursement  
Shipping

001

Amount of Each Disbursement this Period

7.75

Transaction ID : B4669BE616F3E433792C

☒ Memo Item

Candidate Name

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)

**B. Level Up Sweet Green**

Mailing Address 1343 4th Street

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 0 | 3 |   | 2 | 0 | 2 | 3 |

City  
Santa MonicaState  
CAZip Code  
90401

FEC Identification Number

C

Purpose of Disbursement  
Meals

002

Amount of Each Disbursement this Period

16.45

Transaction ID : BC0ABCF09D83F468EAA0

☒ Memo Item

Candidate Name

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. KFC/Taco Bell - Clare**

Mailing Address 10384 S Clare Ave

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 0 | 5 |   | 2 | 0 | 2 | 3 |

City  
ClareState  
MIZip Code  
48617-9733

FEC Identification Number

C

Purpose of Disbursement  
Meals

002

Amount of Each Disbursement this Period

15.53

Transaction ID : BC7D02014DD894D2BAC3

☒ Memo Item

Candidate Name

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).....▶

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 128 OF 191

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. Chipotle - GR**

Mailing Address 3300 Alpine Ave NW

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 05  |   | 2023    |

City  
Grand RapidsState  
MIZip Code  
49544-1642

FEC Identification Number

C

Purpose of Disbursement  
Meal

002

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

18.71

Transaction ID : BBC5A6298AB3F404A879

☒ Memo Item

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. Bistro Cacao**

Mailing Address 316 Massachusetts Ave NE

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 06  |   | 2023    |

City  
WashingtonState  
DCZip Code  
20002-5702

FEC Identification Number

C

Purpose of Disbursement  
Event Deposit

003

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

200.00

Transaction ID : B5A1C6FACB53441DA836

☒ Memo Item

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. Sam's Club - Comstock**

Mailing Address 3901 Alpine Ave NW

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 07  |   | 2023    |

City  
Comstock ParkState  
MIZip Code  
49321-8350

FEC Identification Number

C

Purpose of Disbursement  
Parade Candy

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

487.20

Transaction ID : B29FBE6AE3E784F7198D

☒ Memo Item

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).....▶

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 129 OF 191

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. Rockford Brewing Company**

Mailing Address 12 E Bridge St

City  
RockfordState  
MIZip Code  
49341-1265Purpose of Disbursement  
Staff Meals

002

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 0 | 8 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

64.47

Transaction ID : BA38A42D1E9B04335B76

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. FedEx**Mailing Address 3875 Airways  
Module H3 Department 4634City  
MemphisState  
TNZip Code  
38116-5070Purpose of Disbursement  
Shipping

001

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 1 | 0 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

51.10

Transaction ID : B03FB78B3A584488E933

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Cardmember Service**

Mailing Address PO Box 94014

City  
PalatineState  
ILZip Code  
60094-4014Purpose of Disbursement  
Credit card payment - itemized

002

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 3 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

6437.00

Transaction ID : B671A299F775C4F62AE4

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

6437.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 130 OF 191

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. Arby's - Muskegon**

Mailing Address 1745 E. Apple Avenue

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 11  |   | 2001    |

City  
MuskegonState  
MIZip Code  
49442-4242

FEC Identification Number

C

Purpose of Disbursement  
Meals

002

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

23.40

Transaction ID : BFCF4925D63E04D7FB77

☒ Memo Item

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. Island Slice Pizzeria**

Mailing Address 7248 Main Street

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 24  |   | 2001    |

City  
Mackinac IslandState  
MIZip Code  
49757

FEC Identification Number

C

Purpose of Disbursement  
Meal

002

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

11.66

Transaction ID : BB5FDB17594924341AF1

☒ Memo Item

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. Subway - Caledonia**

Mailing Address 9175 Cherry Valley Ave SE

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 11  |   | 2023    |

City  
CaledoniaState  
MIZip Code  
49316-9746

FEC Identification Number

C

Purpose of Disbursement  
Staff Meals

002

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

26.19

Transaction ID : B65983874EB3849579ED

☒ Memo Item

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).....▶

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 131 OF 191

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. Shepler's Ferry**

Mailing Address 556 E Central Ave

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 1 | 2 |   | 2 | 0 | 2 | 3 |

City  
Mackinaw CityState  
MIZip Code  
49701-9695

FEC Identification Number

C

Purpose of Disbursement  
Parking, ferry expense

002

Amount of Each Disbursement this Period

204.00

Transaction ID : B91E593FFE07442FDBD3

☒ Memo Item

Candidate Name

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)

**B. Michigan GOP - Admin Account**

Mailing Address 520 Seymour Ave

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 1 | 2 |   | 2 | 0 | 2 | 3 |

City  
LansingState  
MIZip Code  
48933-1118

FEC Identification Number

C

Purpose of Disbursement  
Lodging for Conference

002

Amount of Each Disbursement this Period

1770.00

Transaction ID : BC8B53ADE7E034F08935

☒ Memo Item

Candidate Name

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. Pete's Diner**

Mailing Address 212 2nd Street SE

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 1 | 3 |   | 2 | 0 | 2 | 3 |

City  
WashingtonState  
DCZip Code  
20003-1943

FEC Identification Number

C

Purpose of Disbursement  
Meal

002

Amount of Each Disbursement this Period

38.84

Transaction ID : B984DF71190094BF9B7C

☒ Memo Item

Candidate Name

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).....▶

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 132 OF 191

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. Talay Thai Restaurant**

Mailing Address 406 First Street

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 13  |   | 2023    |

City  
WashingtonState  
DCZip Code  
20003-1869

FEC Identification Number

C

Purpose of Disbursement  
Meal

002

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

42.09

Transaction ID : B77737C1BC93443C39D7

☒ Memo Item

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. DC Parking Meters**

Mailing Address 600 East Street NW

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 13  |   | 2023    |

City  
WashingtonState  
DCZip Code  
20004-2203

FEC Identification Number

C

Purpose of Disbursement  
Parking

002

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

12.00

Transaction ID : BABBF94CBF4A447FAAB6

☒ Memo Item

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. Capitol Hill Club**

Mailing Address 300 1st Street SE

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 15  |   | 2023    |

City  
WashingtonState  
DCZip Code  
20003-1801

FEC Identification Number

C

Purpose of Disbursement  
Dues, meals

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

204.60

Transaction ID : B367EDA5257F2442DA19

☒ Memo Item

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).....▶

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 133 OF 191

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. RSVP Catering**

Mailing Address 2930 Prosperity Ave

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 1 | 8 |   | 2 | 0 | 2 | 3 |

City  
FairfaxState  
VAZip Code  
22031-2209

FEC Identification Number

C

Purpose of Disbursement  
Catering for event

003

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1692.47

Transaction ID : B622130B2CC844D76844

☒ Memo Item

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. Zoom Video Communications Inc.**Mailing Address 55 Almaden Blvd  
6th Floor

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 1 | 8 |   | 2 | 0 | 2 | 3 |

City  
San JoseState  
CAZip Code  
95113-1608

FEC Identification Number

C

Purpose of Disbursement  
Meeting Services

003

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

14.41

Transaction ID : B4925233D378C4B4F848

☒ Memo Item

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. Bullfeathers**

Mailing Address 410 1st Street SE

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 1 | 9 |   | 2 | 0 | 2 | 3 |

City  
WashingtonState  
DCZip Code  
20003-1819

FEC Identification Number

C

Purpose of Disbursement  
Meals

002

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

64.80

Transaction ID : BFBEE4EE7417E467C9F1

☒ Memo Item

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).....▶

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 134 OF 191

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. Purebuttons**

Mailing Address 2991 Interstate Pkwy

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 19  |   | 2023    |

City  
BrunswickState  
OHZip Code  
44212-4327

FEC Identification Number

C

Purpose of Disbursement  
Event Buttons

004

Amount of Each Disbursement this Period

110.68

Transaction ID : BDA4BA0F15E5A4269802

☒ Memo Item

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**B. We the Pizza**

Mailing Address 305 Pennsylvania Avenue SE

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 21  |   | 2023    |

City  
WashingtonState  
DCZip Code  
20003-1148

FEC Identification Number

C

Purpose of Disbursement  
Staff meals

001

Amount of Each Disbursement this Period

100.63

Transaction ID : BEF87CD2FDE6A43C5B98

☒ Memo Item

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**C. Uber Technologies, Inc.**

Mailing Address 800 Market St

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 21  |   | 2023    |

City  
San FranciscoState  
CAZip Code  
94102-3033

FEC Identification Number

C

Purpose of Disbursement  
Transportation Expense

002

Amount of Each Disbursement this Period

26.30

Transaction ID : BA48273298A2E478ABE1

☒ Memo Item

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

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

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 135 OF 191

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. Members' Dining Room**

Mailing Address US Capitol Building Room 117

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 2 | 1 |   | 2 | 0 | 2 | 3 |

City  
WashingtonState  
DCZip Code  
20515-0001

FEC Identification Number

C

Purpose of Disbursement  
Staff Meals

001

Amount of Each Disbursement this Period

321.00

Transaction ID : B72A0FBA489134739942

☒ Memo Item

Candidate Name

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)

**B. The Grand Hotel**

Mailing Address 286 Grand Avenue

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 2 | 2 |   | 2 | 0 | 2 | 3 |

City  
Mackinac IslandState  
MIZip Code  
49757

FEC Identification Number

C

Purpose of Disbursement  
Meals

002

Amount of Each Disbursement this Period

103.88

Transaction ID : B8599A5BD4C044816957

☒ Memo Item

Candidate Name

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. Shepler's Ferry**

Mailing Address 556 E Central Ave

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 2 | 2 |   | 2 | 0 | 2 | 3 |

City  
Mackinaw CityState  
MIZip Code  
49701-9695

FEC Identification Number

C

Purpose of Disbursement  
Parking

002

Amount of Each Disbursement this Period

40.00

Transaction ID : BBE8F67326AC14E67AA0

☒ Memo Item

Candidate Name

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).....▶

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 136 OF 191

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. Great Turtle Brewery & Distillery**

Mailing Address 1359 Hoban St

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 22  |   | 2023    |

City  
Mackinac IslandState  
MIZip Code  
49757-5151

FEC Identification Number

C

Purpose of Disbursement  
Meals

002

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

103.03

Transaction ID : B8E3758FF8F1A4D62B0B

☒ Memo Item

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. Subway - Clare**

Mailing Address 10197 S Clare Ave

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 22  |   | 2023    |

City  
ClareState  
MIZip Code  
48617-8924

FEC Identification Number

C

Purpose of Disbursement  
Meal

002

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

10.77

Transaction ID : B6F333E8227FB460A92E

☒ Memo Item

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. Great Turtle Brewery & Distillery**

Mailing Address 1359 Hoban St

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 23  |   | 2023    |

City  
Mackinac IslandState  
MIZip Code  
49757-5151

FEC Identification Number

C

Purpose of Disbursement  
Meal

002

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

48.28

Transaction ID : B19754B513CB7436A837

☒ Memo Item

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).....▶

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 137 OF 191

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. Murray Hotel**

Mailing Address 7260 Main St

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 23  |   | 2023    |

City  
Mackinac IslandState  
MIZip Code  
49757

FEC Identification Number

C

Purpose of Disbursement  
Meal

002

Amount of Each Disbursement this Period

13.77

Transaction ID : B4A2A18C529304A0F82F

☒ Memo Item

Candidate Name

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)

**B. Patrick Doud's Pub**

Mailing Address 7304 Main St

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 23  |   | 2023    |

City  
Mackinac IslandState  
MIZip Code  
49757

FEC Identification Number

C

Purpose of Disbursement  
Meal

002

Amount of Each Disbursement this Period

34.62

Transaction ID : BA50A2D4E4EC449D8B05

☒ Memo Item

Candidate Name

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. Yankee Rebel Tavern**

Mailing Address 1493 Astor Street

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 23  |   | 2023    |

City  
Mackinac IslandState  
MIZip Code  
49757-5113

FEC Identification Number

C

Purpose of Disbursement  
Meals

002

Amount of Each Disbursement this Period

50.51

Transaction ID : B4016E88A059C43BFB58

☒ Memo Item

Candidate Name

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).....▶

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

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|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. The Gate House**

Mailing Address 286 Grand Avenue

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 2 | 3 |   | 2 | 0 | 2 | 3 |

City  
Mackinac IslandState  
MIZip Code  
49757

FEC Identification Number

C

Purpose of Disbursement  
Staff Meals

002

Amount of Each Disbursement this Period

155.07

Transaction ID : B16AC44B3C3854DB5B22

☒ Memo Item

Candidate Name

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)

**B. Shepler's Ferry**

Mailing Address 556 E Central Ave

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 2 | 4 |   | 2 | 0 | 2 | 3 |

City  
Mackinaw CityState  
MIZip Code  
49701-9695

FEC Identification Number

C

Purpose of Disbursement  
Parking

002

Amount of Each Disbursement this Period

80.00

Transaction ID : B4D2B707DC39D4652B61

☒ Memo Item

Candidate Name

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. Yankee Rebel Tavern**

Mailing Address 1493 Astor Street

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 2 | 4 |   | 2 | 0 | 2 | 3 |

City  
Mackinac IslandState  
MIZip Code  
49757-5113

FEC Identification Number

C

Purpose of Disbursement  
Food for Meeting

001

Amount of Each Disbursement this Period

258.00

Transaction ID : BEFE7C518D09E4F61BA6

☒ Memo Item

Candidate Name

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).....▶

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 139 OF 191

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. Shepler's Ferry**

Mailing Address 556 E Central Ave

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 2 | 4 |   | 2 | 0 | 2 | 3 |

City  
Mackinaw CityState  
MIZip Code  
49701-9695

FEC Identification Number

|   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|---|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| C |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|---|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|

Purpose of Disbursement  
Parking

002

Amount of Each Disbursement this Period

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |
|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|-------|
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 40.00 |
|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|-------|

Transaction ID : BA08A4F75075646229AB

☒ Memo Item

Candidate Name

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)

**B. Pancake House**

Mailing Address 7245 Main St

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 2 | 4 |   | 2 | 0 | 2 | 3 |

City  
Mackinac IslandState  
MIZip Code  
49757

FEC Identification Number

|   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|---|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| C |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|---|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|

Purpose of Disbursement  
Food for Meeting

001

Amount of Each Disbursement this Period

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |
|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|-------|
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 80.30 |
|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|-------|

Transaction ID : B1D0E21CDCE4F47C387E

☒ Memo Item

Candidate Name

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. Apple Computer, Inc.**

Mailing Address 1 Infinite Loop

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 2 | 5 |   | 2 | 0 | 2 | 3 |

City  
CupertinoState  
CAZip Code  
95014-2083

FEC Identification Number

|   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|---|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| C |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|---|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|

Purpose of Disbursement  
Phone app

001

Amount of Each Disbursement this Period

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |      |
|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|------|
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 0.99 |
|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|------|

Transaction ID : B6A56CD132FE64E4F842

☒ Memo Item

Candidate Name

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).....▶

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |      |
|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|------|
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 0.00 |
|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|------|

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 140 OF 191

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. Subway - Caledonia**

Mailing Address 9175 Cherry Valley Ave SE

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 2 | 5 |   | 2 | 0 | 2 | 3 |

City  
CaledoniaState  
MIZip Code  
49316-9746

FEC Identification Number

C

Purpose of Disbursement  
Staff Meals

002

Amount of Each Disbursement this Period

40.08

Transaction ID : B4CECD14254B3454A82A

☒ Memo Item

Candidate Name

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)

**B. Schneider's Liquor Co**

Mailing Address 300 Massachusetts Ave NE

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 2 | 5 |   | 2 | 0 | 2 | 3 |

City  
WashingtonState  
DCZip Code  
20002-5702

FEC Identification Number

C

Purpose of Disbursement  
Beverages for event

003

Amount of Each Disbursement this Period

122.64

Transaction ID : BD6A6B5ECDE364634B5E

☒ Memo Item

Candidate Name

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. Zoup - GR**

Mailing Address 4021 Cascade Rd SE

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 2 | 5 |   | 2 | 0 | 2 | 3 |

City  
Grand RapidsState  
MIZip Code  
49546-2177

FEC Identification Number

C

Purpose of Disbursement  
Meals

002

Amount of Each Disbursement this Period

29.39

Transaction ID : BCB871516C9B7445AB7A

☒ Memo Item

Candidate Name

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).....▶

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 141 OF 191

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. Starbucks**

Mailing Address 5070 28th Street SE

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 2 | 5 |   | 2 | 0 | 2 | 3 |

City  
Grand RapidsState  
MIZip Code  
49512-7703

FEC Identification Number

C

Purpose of Disbursement  
Meal

002

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

9.28

Transaction ID : BF8627814E15D4F89806

☒ Memo Item

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. Level Up Sweet Green**

Mailing Address 1343 4th Street

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 2 | 6 |   | 2 | 0 | 2 | 3 |

City  
Santa MonicaState  
CAZip Code  
90401

FEC Identification Number

C

Purpose of Disbursement  
Meals

002

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

15.16

Transaction ID : B1F714F4881944F5DA22

☒ Memo Item

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. Los Hermanos**

Mailing Address 161 E Center St

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 2 | 7 |   | 2 | 0 | 2 | 3 |

City  
IthacaState  
MIZip Code  
48847-1411

FEC Identification Number

C

Purpose of Disbursement  
Staff Meals

002

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

35.59

Transaction ID : BD87C5CFA9C6741D49C7

☒ Memo Item

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).....▶

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 142 OF 191

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. Sonoma Restaurant**

Mailing Address 223 Pennsylvania Ave SE

City  
WashingtonState  
DCZip Code  
20003Purpose of Disbursement  
Food and beverage for event

003

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 2 | 7 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

192.85

Transaction ID : BAC5B3E8A0D6C450D869

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. MBRF, Inc.**

Mailing Address 4319 Argyle Ter Nw

City  
WashingtonState  
DCZip Code  
20011-4243Purpose of Disbursement  
Catering for event

003

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 2 | 7 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

272.93

Transaction ID : BBD50AE2B821B4779B92

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Boulevard Lounge**

Mailing Address 316 South Saginaw Road

City  
MidlandState  
MIZip Code  
48640-4500Purpose of Disbursement  
Meals

002

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 2 | 9 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

26.04

Transaction ID : BF39701D9DBE04202859

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 143 OF 191

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. Subway - Rayburn Building**

Mailing Address 45 Independence Avenue SW

City  
WashingtonState  
DCZip Code  
20515-0001Purpose of Disbursement  
Meal

002

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 2 | 9 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

10.75

Transaction ID : B76D6EFA1AFD343479EB

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Topfundraising.com LLC**

Mailing Address 7545 Shagwood St SE

City  
CaledoniaState  
MIZip Code  
49316-7969Purpose of Disbursement  
Fundraising Consulting - In-House

003

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 3 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

2000.00

Transaction ID : B4D950814539E4E1E8C8

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Red Rock Strategies**

Mailing Address 9500 W Flamingo Rd

City  
Las VegasState  
NVZip Code  
89147-5719Purpose of Disbursement  
Fundraising - Commissions

003

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 6 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

41.22

Transaction ID : BE8FF42AA9BAB4691B96

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

2041.22

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 144 OF 191

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. Red Rock Strategies**

Mailing Address 9500 W Flamingo Rd

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11  |   | 06  |   | 2023    |

City  
Las VegasState  
NVZip Code  
89147-5719

FEC Identification Number

C

Purpose of Disbursement  
Digital Consulting - In-House

004

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

3000.00

Transaction ID : BAFFDD7E939C24041B4C

☐ Memo Item

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. Red Rock Strategies**

Mailing Address 9500 W Flamingo Rd

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11  |   | 06  |   | 2023    |

City  
Las VegasState  
NVZip Code  
89147-5719

FEC Identification Number

C

Purpose of Disbursement  
Subscription - Itemized subj to limit

004

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

569.50

Transaction ID : BC8A0FF75DE214F03941

☐ Memo Item

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. Mailchimp**Mailing Address 675 Ponce De Leon Ave NE  
Ste 5000

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11  |   | 06  |   | 2023    |

City  
AtlantaState  
GAZip Code  
30308-2172

FEC Identification Number

C

Purpose of Disbursement  
Subscription

004

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

569.50

Transaction ID : BED300B6F3B104CAD875

☒ Memo Item

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).....▶

3569.50

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 145 OF 191

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. WinRed Technical Services LLC**

Mailing Address 1776 Wilson Blvd

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11  |   | 06  |   | 2023    |

City  
ArlingtonState  
VAZip Code  
22219

FEC Identification Number

C

Purpose of Disbursement  
Credit Card Processing Fee

003

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

299.44

Transaction ID : BEE3C343A69C941128FB

☐ Memo Item

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. Bear, Josiah, A., ,**

Mailing Address 4461 Holt Rd

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11  |   | 07  |   | 2023    |

City  
HoltState  
MIZip Code  
48842-1683

FEC Identification Number

C

Purpose of Disbursement  
Mileage Reimbursement

002

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

326.54

Transaction ID : B399BA57296EE4D83B29

☐ Memo Item

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. The Voyageur Company LLC**

Mailing Address 1151 Orchard Circle

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11  |   | 07  |   | 2023    |

City  
Saint PaulState  
MNZip Code  
55118-4146

FEC Identification Number

C

Purpose of Disbursement  
Direct Mailing - In-House

003

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

12087.51

Transaction ID : BF54ACB04E26E49C990E

☐ Memo Item

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).....▶

12713.49

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 146 OF 191

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. WinRed Technical Services LLC**

Mailing Address 1776 Wilson Blvd

City  
ArlingtonState  
VAZip Code  
22219Purpose of Disbursement  
Credit Card Processing Fee

003

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 7 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

197.00

Transaction ID : BFA758079B90B4FDC866

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Verizon Wireless**

Mailing Address PO Box 15062

City  
AlbanyState  
NYZip Code  
12212-5062Purpose of Disbursement  
Cell phones, data access

001

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 8 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

32.12

Transaction ID : B6A510E7E86F44847972

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WinRed Technical Services LLC**

Mailing Address 1776 Wilson Blvd

City  
ArlingtonState  
VAZip Code  
22219Purpose of Disbursement  
Credit Card Processing Fee

003

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 8 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

39.47

Transaction ID : B8DB585541DF34468832

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

268.59

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 147 OF 191

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. WinRed Technical Services LLC**

Mailing Address 1776 Wilson Blvd

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 9 |   | 2 | 0 | 2 | 3 |

City  
ArlingtonState  
VAZip Code  
22219

FEC Identification Number

C

Purpose of Disbursement  
Credit Card Processing Fee

003

Amount of Each Disbursement this Period

0.20

Transaction ID : BCB9541E5D500424A8FD

☐ Memo Item

Candidate Name

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)

**B. A & A Storage**

Mailing Address PO Box 55

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 1 | 0 |   | 2 | 0 | 2 | 3 |

City  
MidlandState  
MIZip Code  
48640-0055

FEC Identification Number

C

Purpose of Disbursement  
Storage Unit Rental

001

Amount of Each Disbursement this Period

55.00

Transaction ID : B03801F684541444DB25

☐ Memo Item

Candidate Name

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. Moolenaar, Amy, K., ,**Mailing Address 10201 E Cross Roads Cir  
# 24

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 1 | 0 |   | 2 | 0 | 2 | 3 |

City  
CaledoniaState  
MIZip Code  
49316-9658

FEC Identification Number

C

Purpose of Disbursement  
Mileage Reimbursement

002

Amount of Each Disbursement this Period

66.70

Transaction ID : B3F0D9B8946644260929

☐ Memo Item

Candidate Name

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).....▶

121.90

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 148 OF 191

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. Verizon Wireless**

Mailing Address PO Box 15062

City  
AlbanyState  
NYZip Code  
12212-5062Purpose of Disbursement  
Cell phones, data access

001

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 1 | 0 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

457.65

Transaction ID : BC5A983FD432540B0851

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WinRed Technical Services LLC**

Mailing Address 1776 Wilson Blvd

City  
ArlingtonState  
VAZip Code  
22219Purpose of Disbursement  
Credit Card Processing Fee

003

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 1 | 3 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

0.07

Transaction ID : B20ABD11CCABD4B2D949

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Butzke, Gabriel, T., ,**

Mailing Address 243 W Orleans St

City  
OtsegoState  
MIZip Code  
49078-1141Purpose of Disbursement  
Mileage Reimbursement

002

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 1 | 4 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

545.20

Transaction ID : B35CC1C617CA94519A37

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1002.92

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 149 OF 191

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. PayPal, Inc.**

Mailing Address 2211 N 1st St

City  
San JoseState  
CAZip Code  
95131-2021Purpose of Disbursement  
Credit Card Processing Fee

001

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 1 | 4 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1.65

Transaction ID : B3C674ADC091B46D091B

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WinRed Technical Services LLC**

Mailing Address 1776 Wilson Blvd

City  
ArlingtonState  
VAZip Code  
22219Purpose of Disbursement  
Credit Card Processing Fee

003

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 1 | 4 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

39.40

Transaction ID : BC48C6AD1AD6E4465B64

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Advantage, Inc.**

Mailing Address 9420 Bonita Beach Rd SE

City  
Bonita SpringsState  
FLZip Code  
34135-4774Purpose of Disbursement  
Monthly subscription - App

005

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 1 | 5 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

865.00

Transaction ID : B3F7746722B2E4D8FA16

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

906.05

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 150 OF 191

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. Aristotle International, Inc.**

Mailing Address PO Box 716045

City  
PhiladelphiaState  
PAZip Code  
19171-6045Purpose of Disbursement  
Campaign Reporting Software

001

Candidate Name

Category/  
TypeOffice 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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 1 | 5 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

575.00

Transaction ID : BFE9A9507DF8A411AA4E

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Butzke, Gabriel, T., ,**

Mailing Address 243 W Orleans St

City  
OtsegoState  
MIZip Code  
49078-1141Purpose of Disbursement  
Wages

001

Candidate Name

Category/  
TypeOffice 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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 1 | 5 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1705.99

Transaction ID : B69CFD56950DC433AA2D

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Coker, Emmah, M., ,**

Mailing Address 511 Wilcox Pkwy

City  
ClareState  
MIZip Code  
48617-8903Purpose of Disbursement  
Wages

001

Candidate Name

Category/  
TypeOffice 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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 1 | 5 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

855.42

Transaction ID : BF1FB13F91BF54B17952

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

3136.41

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 151 OF 191

|                                               |                             |                              |                              |
|-----------------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="checked" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                           | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. Davenport, Jacob, P., ,**

Mailing Address 527 Lafayette St

City  
LowellState  
MIZip Code  
49331-1124Purpose of Disbursement  
Wages

001

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 1 | 5 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

110.38

Transaction ID : B1BCA78A18E9B4EF2B53

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Hooks Solutions LLC**

Mailing Address PO Box 15474

City  
WashingtonState  
DCZip Code  
20003Purpose of Disbursement  
Fundraising - Commissions

003

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 1 | 5 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

11815.00

Transaction ID : BA5A49A2BC7D04C5587E

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Hooks Solutions LLC**

Mailing Address PO Box 15474

City  
WashingtonState  
DCZip Code  
20003Purpose of Disbursement  
Fundraising Expenses - Itemized subject to limit

003

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 1 | 5 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1761.27

Transaction ID : B413E4487B9794B7FA16

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

13686.65

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 152 OF 191

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. American Airlines**

Mailing Address 8944 Branchwood Trail

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  |   | 27  |   | 2023    |

City  
Fort WorthState  
TXZip Code  
76116-9618

FEC Identification Number

C

Purpose of Disbursement  
Airfare for fundraising event

002

Amount of Each Disbursement this Period

1526.43

Transaction ID : B231FFF5E06E245D38DE

☒ Memo Item

Candidate Name

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)

**B. Uber Technologies, Inc.**

Mailing Address 800 Market St

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 07  |   | 17  |   | 2023    |

City  
San FranciscoState  
CAZip Code  
94102-3033

FEC Identification Number

C

Purpose of Disbursement  
Transportation Expense

002

Amount of Each Disbursement this Period

14.99

Transaction ID : B8AB4EF5E60E349D1943

☒ Memo Item

Candidate Name

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. Uber Technologies, Inc.**

Mailing Address 800 Market St

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 07  |   | 18  |   | 2023    |

City  
San FranciscoState  
CAZip Code  
94102-3033

FEC Identification Number

C

Purpose of Disbursement  
Transportation Expense

002

Amount of Each Disbursement this Period

17.32

Transaction ID : B22F78D2CE0494307BE1

☒ Memo Item

Candidate Name

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).....▶

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 153 OF 191

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. Uber Technologies, Inc.**

Mailing Address 800 Market St

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 8 |   | 2 | 0 | 2 | 3 |

City  
San FranciscoState  
CAZip Code  
94102-3033

FEC Identification Number

C

Purpose of Disbursement  
Transportation Expense

002

Amount of Each Disbursement this Period

27.78

Candidate Name

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) ▼ |                          |         |

Transaction ID : BDA6F2AA8EE434D7BBAC

☒ Memo Item

State:

District:

Full Name (Last, First, Middle Initial)

**B. Staples**Mailing Address 1250 H Street NW  
Suite 100

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 0 | 1 |   | 2 | 0 | 2 | 3 |

City  
WashingtonState  
DCZip Code  
20005-3952

FEC Identification Number

C

Purpose of Disbursement  
Event supplies

003

Amount of Each Disbursement this Period

174.75

Candidate Name

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) ▼ |                          |         |

Transaction ID : BCE02C072686B42F1A81

☒ Memo Item

State:

District:

Full Name (Last, First, Middle Initial)

**C. Jordan, Damon, J., ,**Mailing Address 11127 52nd Ave  
D1

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 1 | 5 |   | 2 | 0 | 2 | 3 |

City  
AllendaleState  
MIZip Code  
49401-9108

FEC Identification Number

C

Purpose of Disbursement  
Wages

001

Amount of Each Disbursement this Period

1788.58

Candidate Name

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) ▼ |                          |         |

Transaction ID : B17331861AB0C489189F

☐ Memo Item

State:

District:

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

1788.58

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 154 OF 191

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. Maloney, Ashton, M., ,**

Mailing Address 6104 Partridge Ln

City  
MidlandState  
MIZip Code  
48640-2112Purpose of Disbursement  
Wages

001

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 1 | 5 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

716.70

Transaction ID : B1F8AF16A0BF64E2AA2A

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. QRP, Inc.**

Mailing Address 3000 James Savage Rd

City  
MidlandState  
MIZip Code  
48642-6533Purpose of Disbursement  
Printing - campaign stationary

004

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 1 | 5 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

594.84

Transaction ID : B2F7EC8C1211F444D8BF

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WinRed Technical Services LLC**

Mailing Address 1776 Wilson Blvd

City  
ArlingtonState  
VAZip Code  
22219Purpose of Disbursement  
Credit Card Processing Fee

003

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 1 | 6 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

3.28

Transaction ID : B8C71D2B186E64847B3B

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1314.82

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 155 OF 191

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. United States Treasury**

Mailing Address 1500 Pennsylvania Ave NW

City  
WashingtonState  
DCZip Code  
20220-0001Purpose of Disbursement  
Payroll Taxes

001

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 1 | 7 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1118.76

Transaction ID : B0E8CE1ED672A4F16A2D

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Andrews Hooper Pavlik, PLC**Mailing Address 5915 Eastman Ave  
Ste 100City  
MidlandState  
MIZip Code  
48640-6824Purpose of Disbursement  
Accounting Services

001

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 2 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

12080.00

Transaction ID : BB5BAC66FF4B4471D857

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WinRed Technical Services LLC**

Mailing Address 1776 Wilson Blvd

City  
ArlingtonState  
VAZip Code  
22219Purpose of Disbursement  
Credit Card Processing Fee

003

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 2 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

39.40

Transaction ID : B0AAF4302D59D40E2A98

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

13238.16

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 156 OF 191

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. WinRed Technical Services LLC**

Mailing Address 1776 Wilson Blvd

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11  |   | 24  |   | 2023    |

City  
ArlingtonState  
VAZip Code  
22219

FEC Identification Number

C

Purpose of Disbursement  
Credit Card Processing Fee

003

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1.36

Transaction ID : B2AB2B59E439043F199F

☐ Memo Item

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. WinRed Technical Services LLC**

Mailing Address 1776 Wilson Blvd

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11  |   | 27  |   | 2023    |

City  
ArlingtonState  
VAZip Code  
22219

FEC Identification Number

C

Purpose of Disbursement  
Credit Card Processing Fee

003

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

0.08

Transaction ID : B61BA7292E5B148519BB

☐ Memo Item

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. WinRed Technical Services LLC**

Mailing Address 1776 Wilson Blvd

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11  |   | 29  |   | 2023    |

City  
ArlingtonState  
VAZip Code  
22219

FEC Identification Number

C

Purpose of Disbursement  
Credit Card Processing Fee

003

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

0.99

Transaction ID : B4FA297DA231942798C6

☐ Memo Item

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).....▶

2.43

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 157 OF 191

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. A & A Storage**

Mailing Address PO Box 55

City  
MidlandState  
MIZip Code  
48640-0055Purpose of Disbursement  
Storage Unit Rental

001

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 3 | 0 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

55.00

Transaction ID : B4F7D44BC59ED44E0AC5

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Coker, Emmah, M., ,**

Mailing Address 511 Wilcox Pkwy

City  
ClareState  
MIZip Code  
48617-8903Purpose of Disbursement  
Mileage Reimbursement

002

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 3 | 0 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

228.52

Transaction ID : BACFD194AD2F5422CA30

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Second District GOP Committee Of Michigan - Admin Account**

Mailing Address 2541 E Raymond Rd

City  
Twin LakeState  
MIZip Code  
49457-9401Purpose of Disbursement  
Event sponsorship

004

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 3 | 0 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : B6473DD612087479CBD6

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

783.52

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 158 OF 191

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. WinRed Technical Services LLC**

Mailing Address 1776 Wilson Blvd

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11  |   | 30  |   | 2023    |

City  
ArlingtonState  
VAZip Code  
22219

FEC Identification Number

C

Purpose of Disbursement  
Credit Card Processing Fee

003

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

2.98

Transaction ID : BC627F351B1CA4E37A8B

☐ Memo Item

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, Inc.**

Mailing Address 2211 N 1st St

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12  |   | 01  |   | 2023    |

City  
San JoseState  
CAZip Code  
95131-2021

FEC Identification Number

C

Purpose of Disbursement  
Credit Card Processing Fee

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

30.00

Transaction ID : B3C15F94F2AFE44A2B24

☐ Memo Item

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. WinRed Technical Services LLC**

Mailing Address 1776 Wilson Blvd

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12  |   | 01  |   | 2023    |

City  
ArlingtonState  
VAZip Code  
22219

FEC Identification Number

C

Purpose of Disbursement  
Credit Card Processing Fee

003

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

2.36

Transaction ID : BA133CCE67364486A8D0

☐ Memo Item

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).....▶

35.34

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 159 OF 191

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. Cardmember Service**

Mailing Address PO Box 94014

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12  |   | 04  |   | 2023    |

City  
PalatineState  
ILZip Code  
60094-4014

FEC Identification Number

C

Purpose of Disbursement  
Credit card payment - itemized

002

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

3567.15

Transaction ID : BBE1517658E98437F97A

☐ Memo Item

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. FireRock Grille**

Mailing Address 7177 Kalamazoo Ave SE

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 16  |   | 2023    |

City  
CaledoniaState  
MIZip Code  
49316-9126

FEC Identification Number

C

Purpose of Disbursement  
Staff Meals

002

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

161.44

Transaction ID : BE387AAE232974D258C3

☒ Memo Item

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. Capitol Hill Club**

Mailing Address 300 1st Street SE

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 16  |   | 2023    |

City  
WashingtonState  
DCZip Code  
20003-1801

FEC Identification Number

C

Purpose of Disbursement  
Dues, meals

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

369.50

Transaction ID : BBE90989B7E9048EDACE

☒ Memo Item

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).....▶

3567.15

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 160 OF 191

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. Capitol Hill Club**

Mailing Address 300 1st Street SE

City  
WashingtonState  
DCZip Code  
20003-1801Purpose of Disbursement  
Dues, meals

001

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 1 | 6 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

353.74

Transaction ID : B9D4EAC1AF149468E9E0

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Capitol Hill Club**

Mailing Address 300 1st Street SE

City  
WashingtonState  
DCZip Code  
20003-1801Purpose of Disbursement  
Catering for event

003

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 1 | 6 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

163.80

Transaction ID : B5588E13544344DDAAAC

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Bittersweet Catering**

Mailing Address 103 1/2 N Alfred St

City  
AlexandriaState  
VAZip Code  
22314-3010Purpose of Disbursement  
Catering for event

003

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 1 | 7 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

569.97

Transaction ID : BF7A7D81A064445EC9B4

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 161 OF 191

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. Members' Dining Room**

Mailing Address US Capitol Building Room 117

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 17  |   | 2023    |

City  
WashingtonState  
DCZip Code  
20515-0001

FEC Identification Number

C

Purpose of Disbursement  
Meal

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

42.20

Transaction ID : B8CC772377C85403D8D2

☒ Memo Item

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. USPS - Grand Rapids**

Mailing Address 3970 S Greenbrooke Dr SE

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 17  |   | 2023    |

City  
Grand RapidsState  
MIZip Code  
49512-5455

FEC Identification Number

C

Purpose of Disbursement  
Postage

003

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

165.27

Transaction ID : B0830AF81BBD848E8A64

☒ Memo Item

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. Zoom Video Communications Inc.**Mailing Address 55 Almaden Blvd  
6th Floor

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 18  |   | 2023    |

City  
San JoseState  
CAZip Code  
95113-1608

FEC Identification Number

C

Purpose of Disbursement  
Meeting Services

003

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

14.41

Transaction ID : B816FA4BAF9F04B08BAE

☒ Memo Item

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).....▶

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 162 OF 191

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. Tie The Knot Bouquets**

Mailing Address 11978 W Watergate Rd

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 1 | 9 |   | 2 | 0 | 2 | 3 |

City  
CadillacState  
MIZip Code  
49601-9421

FEC Identification Number

C

Purpose of Disbursement  
Flowers

001

Amount of Each Disbursement this Period

87.98

Transaction ID : B4CF6CC2BA1554998A61

☒ Memo Item

Candidate Name

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)

**B. Uber Technologies, Inc.**

Mailing Address 800 Market St

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 1 | 9 |   | 2 | 0 | 2 | 3 |

City  
San FranciscoState  
CAZip Code  
94102-3033

FEC Identification Number

C

Purpose of Disbursement  
Transportation Expense

002

Amount of Each Disbursement this Period

16.71

Transaction ID : B875336FDD75F46F2A7B

☒ Memo Item

Candidate Name

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. FedEx**Mailing Address 3875 Airways  
Module H3 Department 4634

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 1 | 9 |   | 2 | 0 | 2 | 3 |

City  
MemphisState  
TNZip Code  
38116-5070

FEC Identification Number

C

Purpose of Disbursement  
Shipping

001

Amount of Each Disbursement this Period

26.57

Transaction ID : B1A5885C8263749C6848

☒ Memo Item

Candidate Name

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).....▶

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 163 OF 191

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. Uber Technologies, Inc.**

Mailing Address 800 Market St

City  
San FranciscoState  
CAZip Code  
94102-3033Purpose of Disbursement  
Transportation Expense

002

Candidate Name

Category/  
TypeOffice 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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 0 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

30.49

Transaction ID : B51B9C1AADC3D422695E

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Bonchon Navy Yard**

Mailing Address 1015 Half St SE

City  
WashingtonState  
DCZip Code  
20003-3654Purpose of Disbursement  
Staff, Office meals

002

Candidate Name

Category/  
TypeOffice 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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 6 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

319.61

Transaction ID : BB700C39C92944E9A9F9

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Subway - Caledonia**

Mailing Address 9175 Cherry Valley Ave SE

City  
CaledoniaState  
MIZip Code  
49316-9746Purpose of Disbursement  
Staff Meals

002

Candidate Name

Category/  
TypeOffice 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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 3 | 0 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

81.27

Transaction ID : B0176D56C94754CDBBE1

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 164 OF 191

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. Caledonia Storage**

Mailing Address 10330 Cherry Valley Ave SE

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 1 |   | 2 | 0 | 2 | 3 |

City  
CaledoniaState  
MIZip Code  
49316-7326

FEC Identification Number

C

Purpose of Disbursement  
Storage Unit Rental

001

Amount of Each Disbursement this Period

100.00

Transaction ID : BBB084A34B02D4AA49F9

☒ Memo Item

Candidate Name

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)

**B. Level Up Sweet Green**

Mailing Address 1343 4th Street

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 2 |   | 2 | 0 | 2 | 3 |

City  
Santa MonicaState  
CAZip Code  
90401

FEC Identification Number

C

Purpose of Disbursement  
Meals

002

Amount of Each Disbursement this Period

14.80

Transaction ID : BF9C89C2EEFA04455810

☒ Memo Item

Candidate Name

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. The UPS Store**

Mailing Address 2014 N Saginaw Road

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 8 |   | 2 | 0 | 2 | 3 |

City  
MidlandState  
MIZip Code  
48640

FEC Identification Number

C

Purpose of Disbursement  
Shipping

001

Amount of Each Disbursement this Period

82.31

Transaction ID : BB7A5B7CBA28645908A8

☒ Memo Item

Candidate Name

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).....▶

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 165 OF 191

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. Postmaster Midland - USPS**

Mailing Address 2900 Rodd Street

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 8 |   | 2 | 0 | 2 | 3 |

City  
MidlandState  
MIZip Code  
48640-4483

FEC Identification Number

C

Purpose of Disbursement  
Postage stamps

001

Amount of Each Disbursement this Period

198.00

Transaction ID : B4484E5E0BABA4F0F947

☒ Memo Item

Candidate Name

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)

**B. The Red Bird Bistro**

Mailing Address 22 N Main St NE

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 8 |   | 2 | 0 | 2 | 3 |

City  
Cedar SpringsState  
MIZip Code  
49319-5102

FEC Identification Number

C

Purpose of Disbursement  
Meals

002

Amount of Each Disbursement this Period

17.83

Transaction ID : BF8E49315FF5F46198C8

☒ Memo Item

Candidate Name

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. Subway - Caledonia**

Mailing Address 9175 Cherry Valley Ave SE

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 9 |   | 2 | 0 | 2 | 3 |

City  
CaledoniaState  
MIZip Code  
49316-9746

FEC Identification Number

C

Purpose of Disbursement  
Staff Meals

002

Amount of Each Disbursement this Period

17.05

Transaction ID : B65602856917C4464A43

☒ Memo Item

Candidate Name

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).....▶

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 166 OF 191

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. S-3 Group**

Mailing Address 418 C St NE

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 9 |   | 2 | 0 | 2 | 3 |

City  
WashingtonState  
DCZip Code  
20002-5818

FEC Identification Number

C

Purpose of Disbursement  
Room rental for event

003

Amount of Each Disbursement this Period

350.00

Transaction ID : B049CB875B1804482809

☒ Memo Item

Candidate Name

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)

**B. WinRed Technical Services LLC**

Mailing Address 1776 Wilson Blvd

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 0 | 4 |   | 2 | 0 | 2 | 3 |

City  
ArlingtonState  
VAZip Code  
22219

FEC Identification Number

C

Purpose of Disbursement  
Credit Card Processing Fee

003

Amount of Each Disbursement this Period

59.10

Transaction ID : B496F04112BBB40D4965

☐ Memo Item

Candidate Name

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. Maloney, Ashton, M., ,**

Mailing Address 6104 Partridge Ln

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 0 | 5 |   | 2 | 0 | 2 | 3 |

City  
MidlandState  
MIZip Code  
48640-2112

FEC Identification Number

C

Purpose of Disbursement  
Mileage Reimbursement

002

Amount of Each Disbursement this Period

443.70

Transaction ID : B77FD885FE64348DCA03

☐ Memo Item

Candidate Name

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).....▶

502.80

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 167 OF 191

|                                               |                              |                              |                              |
|-----------------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="checked" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a                  | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. Red Rock Strategies**

Mailing Address 9500 W Flamingo Rd

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12  |   | 05  |   | 2023    |

City  
Las VegasState  
NVZip Code  
89147-5719

FEC Identification Number

C

Purpose of Disbursement  
Digital Consulting - In-House

004

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

3000.00

Transaction ID : B157047DADCF24BC1A47

☐ Memo Item

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. Red Rock Strategies**

Mailing Address 9500 W Flamingo Rd

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12  |   | 05  |   | 2023    |

City  
Las VegasState  
NVZip Code  
89147-5719

FEC Identification Number

C

Purpose of Disbursement  
Fundraising - Commissions

003

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

19.95

Transaction ID : B246A3169ACD7413FBA7

☐ Memo Item

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. Red Rock Strategies**

Mailing Address 9500 W Flamingo Rd

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12  |   | 05  |   | 2023    |

City  
Las VegasState  
NVZip Code  
89147-5719

FEC Identification Number

C

Purpose of Disbursement  
Subscription - Itemized subject to limit

004

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

569.50

Transaction ID : B0B11D60F96EF4C91BB3

☐ Memo Item

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).....▶

3589.45

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 168 OF 191

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. Mailchimp**Mailing Address 675 Ponce De Leon Ave NE  
Ste 5000City  
AtlantaState  
GAZip Code  
30308-2172Purpose of Disbursement  
Subscription

004

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

569.50

Transaction ID : BFF188AF4156D41A896E

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Topfundraising.com LLC**

Mailing Address 7545 Shagwood St SE

City  
CaledoniaState  
MIZip Code  
49316-7969Purpose of Disbursement  
Fundraising Consulting - In-House

003

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 0 | 5 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

2000.00

Transaction ID : BC147845687F442EAB8F

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. United States Treasury**

Mailing Address 1500 Pennsylvania Ave NW

City  
WashingtonState  
DCZip Code  
20220-0001Purpose of Disbursement  
Payroll Taxes

001

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 0 | 5 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

9.18

Transaction ID : BB67A9554BBBF4B558EF

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

2009.18

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 169 OF 191

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. WinRed Technical Services LLC**

Mailing Address 1776 Wilson Blvd

City  
ArlingtonState  
VAZip Code  
22219Purpose of Disbursement  
Credit Card Processing Fee

003

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 0 | 5 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

20.49

Transaction ID : B7D42F8C37EA54D67B69

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WinRed Technical Services LLC**

Mailing Address 1776 Wilson Blvd

City  
ArlingtonState  
VAZip Code  
22219Purpose of Disbursement  
Credit Card Processing Fee

003

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 0 | 6 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

22.66

Transaction ID : B338672EF61D44F89A83

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WinRed Technical Services LLC**

Mailing Address 1776 Wilson Blvd

City  
ArlingtonState  
VAZip Code  
22219Purpose of Disbursement  
Credit Card Processing Fee

003

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 0 | 7 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

21.82

Transaction ID : B2EA26AB6D8B143A7904

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

64.97

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 170 OF 191

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. Verizon Wireless**

Mailing Address PO Box 15062

City  
AlbanyState  
NYZip Code  
12212-5062Purpose of Disbursement  
Cell phones, data access

001

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 0 | 8 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

32.12

Transaction ID : B72ABBA0BB8DC450EB97

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WinRed Technical Services LLC**

Mailing Address 1776 Wilson Blvd

City  
ArlingtonState  
VAZip Code  
22219Purpose of Disbursement  
Credit Card Processing Fee

003

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 0 | 8 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

39.40

Transaction ID : BE0B16FAD39D74324B44

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Verizon Wireless**

Mailing Address PO Box 15062

City  
AlbanyState  
NYZip Code  
12212-5062Purpose of Disbursement  
Cell phones, data access

001

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 1 | 0 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

447.11

Transaction ID : BC49FE76B0D334A9EA17

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

518.63

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 171 OF 191

|                                               |                             |                              |                              |
|-----------------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="checked" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                           | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. WinRed Technical Services LLC**

Mailing Address 1776 Wilson Blvd

City  
ArlingtonState  
VAZip Code  
22219Purpose of Disbursement  
Credit Card Processing Fee

003

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 1 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

59.30

Transaction ID : BED0826E9CE0648329CC

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Butzke, Gabriel, T., ,**

Mailing Address 243 W Orleans St

City  
OtsegoState  
MIZip Code  
49078-1141Purpose of Disbursement  
Mileage Reimbursement

002

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 1 | 2 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

440.80

Transaction ID : B3058C3450C594EB2BC6

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WinRed Technical Services LLC**

Mailing Address 1776 Wilson Blvd

City  
ArlingtonState  
VAZip Code  
22219Purpose of Disbursement  
Credit Card Processing Fee

003

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 1 | 3 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

0.07

Transaction ID : BF65A358291124495911

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

500.17

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 172 OF 191

|                                               |                             |                              |                              |
|-----------------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="checked" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                           | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. WinRed Technical Services LLC**

Mailing Address 1776 Wilson Blvd

City  
ArlingtonState  
VAZip Code  
22219Purpose of Disbursement  
Credit Card Processing Fee

003

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | / | 1 | 4 | / | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

11.82

Transaction ID : BD7AA7829B1564C8DBEF

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Aristotle International, Inc.**

Mailing Address PO Box 716045

City  
PhiladelphiaState  
PAZip Code  
19171-6045Purpose of Disbursement  
Campaign Reporting Software

001

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | / | 1 | 5 | / | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

575.00

Transaction ID : B4BBA09A545C54480963

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Bear, Malachi, , ,**

Mailing Address 4461 Holt Rd

City  
HoltState  
MIZip Code  
48842-1683Purpose of Disbursement  
Wages

001

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | / | 1 | 5 | / | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

410.60

Transaction ID : B5D2EE13A061C4E618E6

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

997.42

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 173 OF 191

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. Butzke, Gabriel, T., ,**

Mailing Address 243 W Orleans St

City  
OtsegoState  
MIZip Code  
49078-1141Purpose of Disbursement  
Wages

001

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 1 | 5 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1681.00

Transaction ID : BECAAB0E5D4D64EC9848

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Coker, Emmah, M., ,**

Mailing Address 511 Wilcox Pkwy

City  
ClareState  
MIZip Code  
48617-8903Purpose of Disbursement  
Wages

001

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 1 | 5 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

855.40

Transaction ID : B9DBB036B87EF4D73B86

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Davenport, Jacob, P., ,**

Mailing Address 527 Lafayette St

City  
LowellState  
MIZip Code  
49331-1124Purpose of Disbursement  
Wages

001

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 1 | 5 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

110.38

Transaction ID : B9A8329C3D0D2424EA7C

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

2646.78

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 174 OF 191

|                                               |                             |                              |                              |
|-----------------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="checked" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                           | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. Jackson, Armani, , ,**Mailing Address 120 Halbert St  
Apt 4City  
Grand LedgeState  
MIZip Code  
48837-1278Purpose of Disbursement  
Wages

001

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 1 | 5 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

324.94

Transaction ID : B646FC14D87874CDD82E

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Jordan, Damon, J., ,**Mailing Address 11127 52nd Ave  
D1City  
AllendaleState  
MIZip Code  
49401-9108Purpose of Disbursement  
Wages

001

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 1 | 5 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1746.58

Transaction ID : B5FBF657105A546F8960

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Maloney, Ashton, M., ,**

Mailing Address 6104 Partridge Ln

City  
MidlandState  
MIZip Code  
48640-2112Purpose of Disbursement  
Wages

001

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 1 | 5 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

716.70

Transaction ID : B11B9F2A17663448CB89

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

2788.22

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 175 OF 191

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. WinRed Technical Services LLC**

Mailing Address 1776 Wilson Blvd

City  
ArlingtonState  
VAZip Code  
22219Purpose of Disbursement  
Credit Card Processing Fee

003

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 1 | 5 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

0.49

Transaction ID : BD8014F3466024E07932

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Auto Owners Insurance**

Mailing Address 6101 Anacapi Blvd

City  
LansingState  
MIZip Code  
48917-3968Purpose of Disbursement  
General Liability Insurance

001

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 1 | 8 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

375.00

Transaction ID : BEF7049A839EB444482F

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Charter Township Of Caledonia**

Mailing Address 8196 Broadmoor Ave SE

City  
CaledoniaState  
MIZip Code  
49316-9509Purpose of Disbursement  
Space rental deposit for event

003

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 1 | 8 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

200.00

Transaction ID : B63A0DB32D2DB450C934

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

575.49

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 176 OF 191

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. Charter Township Of Caledonia**

Mailing Address 8196 Broadmoor Ave SE

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12  |   | 18  |   | 2023    |

City  
CaledoniaState  
MIZip Code  
49316-9509

FEC Identification Number

C

Purpose of Disbursement  
Security Deposit for Event

003

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

500.00

Transaction ID : B87845CC9BB884BC6A88

☐ Memo Item

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. WinRed Technical Services LLC**

Mailing Address 1776 Wilson Blvd

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12  |   | 18  |   | 2023    |

City  
ArlingtonState  
VAZip Code  
22219

FEC Identification Number

C

Purpose of Disbursement  
Credit Card Processing Fee

003

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

21.75

Transaction ID : B6E609E3FB47A4B10BFF

☐ Memo Item

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. United States Treasury**

Mailing Address 1500 Pennsylvania Ave NW

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12  |   | 19  |   | 2023    |

City  
WashingtonState  
DCZip Code  
20220-0001

FEC Identification Number

C

Purpose of Disbursement  
Payroll Taxes

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

127.46

Transaction ID : BC619929B73B543F0BFB

☐ Memo Item

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).....▶

649.21

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 177 OF 191

|                                               |                             |                              |                              |
|-----------------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="checked" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                           | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. United States Treasury**

Mailing Address 1500 Pennsylvania Ave NW

City  
WashingtonState  
DCZip Code  
20220-0001Purpose of Disbursement  
Payroll Taxes

001

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 1 | 9 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1185.80

Transaction ID : BC6599D1135044326BA2

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WinRed Technical Services LLC**

Mailing Address 1776 Wilson Blvd

City  
ArlingtonState  
VAZip Code  
22219Purpose of Disbursement  
Credit Card Processing Fee

003

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 1 | 9 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1.97

Transaction ID : BDAB105FB76D548D0AB4

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Bear, Josiah, A., ,**

Mailing Address 4461 Holt Rd

City  
HoltState  
MIZip Code  
48842-1683Purpose of Disbursement  
Mileage, Expense Reimbursement - itemized subj to limit

002

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 2 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

922.28

Transaction ID : B3A47617C322D45E7A76

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

2110.05

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 178 OF 191

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. Maloney, Ashton, M., ,**

Mailing Address 6104 Partridge Ln

City  
MidlandState  
MIZip Code  
48640-2112Purpose of Disbursement  
Mileage Reimbursement

002

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 2 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

237.80

Transaction ID : B05BEAA4DD3E249C28DD

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Moolenaar, Amy, K., ,**Mailing Address 10201 E Cross Roads Cir  
# 24City  
CaledoniaState  
MIZip Code  
49316-9658Purpose of Disbursement  
Expense reimbursement - itemized subj to limits

002

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 2 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

37.40

Transaction ID : B2079A7A2941B40D08A8

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WinRed Technical Services LLC**

Mailing Address 1776 Wilson Blvd

City  
ArlingtonState  
VAZip Code  
22219Purpose of Disbursement  
Credit Card Processing Fee

003

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 2 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

39.40

Transaction ID : B6F9C8149792247BFAE3

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

314.60

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 179 OF 191

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. WinRed Technical Services LLC**

Mailing Address 1776 Wilson Blvd

City  
ArlingtonState  
VAZip Code  
22219Purpose of Disbursement  
Credit Card Processing Fee

003

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 2 | 2 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

39.73

Transaction ID : BE7EDE139C76444BABC8

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WinRed Technical Services LLC**

Mailing Address 1776 Wilson Blvd

City  
ArlingtonState  
VAZip Code  
22219Purpose of Disbursement  
Credit Card Processing Fee

003

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 2 | 6 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

392.58

Transaction ID : B85731922CBBD488FB64

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WinRed Technical Services LLC**

Mailing Address 1776 Wilson Blvd

City  
ArlingtonState  
VAZip Code  
22219Purpose of Disbursement  
Credit Card Processing Fee

003

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 2 | 7 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1.07

Transaction ID : B4AAFB41E424B4B9383F

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

433.38

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 180 OF 191

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. Bear, Malachi, , ,**

Mailing Address 4461 Holt Rd

City  
HoltState  
MIZip Code  
48842-1683Purpose of Disbursement  
Mileage Reimbursement

002

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 2 | 8 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

34.22

Transaction ID : BB76C7E9EBCCA4F5CA9A

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Bear, Malachi, , ,**

Mailing Address 4461 Holt Rd

City  
HoltState  
MIZip Code  
48842-1683Purpose of Disbursement  
Wages

001

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 2 | 9 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

185.42

Transaction ID : B03A40971B70A4B64A06

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. United States Treasury**

Mailing Address 1500 Pennsylvania Ave NW

City  
WashingtonState  
DCZip Code  
20220-0001Purpose of Disbursement  
Payroll Taxes

001

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 2 | 9 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

32.14

Transaction ID : B1962CB8753164D80990

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

251.78

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 181 OF 191

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. WinRed Technical Services LLC**

Mailing Address 1776 Wilson Blvd

City  
ArlingtonState  
VAZip Code  
22219Purpose of Disbursement  
Credit Card Processing Fee

003

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 2 | 9 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

0.42

Transaction ID : B53A47D2F43904348A5C

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Butzke, Gabriel, T., ,**

Mailing Address 243 W Orleans St

City  
OtsegoState  
MIZip Code  
49078-1141Purpose of Disbursement  
Mileage Reimbursement

002

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 3 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

272.60

Transaction ID : B19632B46531A4EACA5A

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WinRed Technical Services LLC**

Mailing Address 1776 Wilson Blvd

City  
ArlingtonState  
VAZip Code  
22219Purpose of Disbursement  
Credit Card Processing Fee

003

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 3 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

2.36

Transaction ID : BCD40059B7D9B462486F

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

275.38

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 182 OF 191

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. WinRed Technical Services LLC**

Mailing Address 1776 Wilson Blvd

City  
ArlingtonState  
VAZip Code  
22219Purpose of Disbursement  
Credit Card Processing Fee

003

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 3 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

61.27

Transaction ID : B3250D5D3A4964ADF88D

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WinRed Technical Services LLC**

Mailing Address 1776 Wilson Blvd

City  
ArlingtonState  
VAZip Code  
22219Purpose of Disbursement  
Credit Card Processing Fee

003

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 3 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

20.49

Transaction ID : B4169EE346BEF4D62BBB

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
|   |   |   |   |   |   |   |   |   |   |

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

81.76

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

149161.69

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 183 OF 191

|                                         |                              |                              |                              |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input type="checkbox"/> 17             | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input checked="" type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. Boosalis, Alex, W., ,**

Mailing Address 3805 Red Root Rd

City  
Lake OrionState  
MIZip Code  
48360-2626Purpose of Disbursement  
Refund: Refund of contribution received 9/27/2023

010

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State: District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 7 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

800.00

Transaction ID : BD2C77EACAF5B4D7CA37

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Boosalis, Alex, W., ,**

Mailing Address 3805 Red Root Rd

City  
Lake OrionState  
MIZip Code  
48360-2626Purpose of Disbursement  
Refund: Refund of contribution received 9/27/2023

010

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                          |                   |                                     |         |
|--------------------------|-------------------|-------------------------------------|---------|
| <input type="checkbox"/> | Primary           | <input checked="" type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                                     |         |

State: District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 7 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1700.00

Transaction ID : BB545A8F80D9D4F7FB0D

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Kepler, David, E., ,**

Mailing Address 912 Turtle Cv

City  
SanfordState  
MIZip Code  
48657-9342Purpose of Disbursement  
Refund: Refund of excess contribution on 12/20/23

010

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State: District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 2 | 7 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

132.00

Transaction ID : BCE827C9524F6420FBFC

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

2632.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 184 OF 191

|                                         |                              |                              |                              |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input type="checkbox"/> 17             | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input checked="" type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A.** Kepler, Patricia, A., ,

Mailing Address 912 Turtle Cove

City  
SanfordState  
MIZip Code  
48657-9342Purpose of Disbursement  
Refund: Refund of excess contribution on 12/20/23

010

Category/  
Type

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State: District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 2 | 7 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

132.00

Transaction ID : B53E4DAA8D4A3452ABC9

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
|   |   |   |   |   |   |   |   |   |   |

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
|   |   |   |   |   |   |   |   |   |   |

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

132.00

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

2764.00

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 185 OF 191

|                              |                              |                              |                                        |
|------------------------------|------------------------------|------------------------------|----------------------------------------|
| <input type="checkbox"/> 17  | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b           |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input checked="" type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. Cardmember Service**

Mailing Address PO Box 94014

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 0 | 4 |   | 2 | 0 | 2 | 3 |

City  
PalatineState  
ILZip Code  
60094-4014

FEC Identification Number

C

Purpose of Disbursement  
Credit card payment - itemized

012

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

350.00

Transaction ID : B306970EE481644D48DB

☐ Memo Item

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. The Acton Institute**

Mailing Address 98 Fulton St E

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 3 | 1 |   | 2 | 0 | 2 | 3 |

City  
Grand RapidsState  
MIZip Code  
49503-3207

FEC Identification Number

C

Purpose of Disbursement  
Ticket for Event

012

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

350.00

Transaction ID : BD3BCC8E77DA940BDA32

☒ Memo Item

Office Sought:

|                                    |
|------------------------------------|
| <input type="checkbox"/> House     |
| <input type="checkbox"/> Senate    |
| <input type="checkbox"/> President |

Disbursement For: 2024

|                                             |                                  |
|---------------------------------------------|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼  |                                  |

State:

District:

Full Name (Last, First, Middle Initial)

**C. Cardmember Service**

Mailing Address PO Box 94014

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 0 | 4 |   | 2 | 0 | 2 | 3 |

City  
PalatineState  
ILZip Code  
60094-4014

FEC Identification Number

C

Purpose of Disbursement  
Credit card payment - itemized

012

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

310.50

Transaction ID : B6C6EF0642341464498A

☐ Memo Item

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).....▶

660.50

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 186 OF 191

|                              |                              |                              |                                        |
|------------------------------|------------------------------|------------------------------|----------------------------------------|
| <input type="checkbox"/> 17  | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b           |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input checked="" type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. Midland County 4H Small Animal Auction**

Mailing Address P O Box 231

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 08  |   | 16  |   | 2023    |

City  
MidlandState  
MIZip Code  
48640-0231

FEC Identification Number

C

Purpose of Disbursement  
Livestock Auction 8/16/23

012

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

310.50

Transaction ID : BE23168DD2E994CB79EC

☒ Memo Item

Office Sought:

|                                    |
|------------------------------------|
| <input type="checkbox"/> House     |
| <input type="checkbox"/> Senate    |
| <input type="checkbox"/> President |

Disbursement For: 2024

|                                             |                                  |
|---------------------------------------------|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼  |                                  |

State:

District:

Full Name (Last, First, Middle Initial)

**B. Cardmember Service**

Mailing Address PO Box 94014

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11  |   | 03  |   | 2023    |

City  
PalatineState  
ILZip Code  
60094-4014

FEC Identification Number

C

Purpose of Disbursement  
Credit card payment - itemized

012

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1500.00

Transaction ID : BEE0E52E63F2F4714B1E

☐ Memo Item

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. Mount Vernon Ladies Association**

Mailing Address 3200 Mount Vernon Memorial Hwy

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 26  |   | 2023    |

City  
Mount VernonState  
VAZip Code  
22121

FEC Identification Number

C

Purpose of Disbursement  
Donation for Annual Event

012

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1500.00

Transaction ID : B64C2EFF3AB1D4B92BBF

☒ Memo Item

Office Sought:

|                                    |
|------------------------------------|
| <input type="checkbox"/> House     |
| <input type="checkbox"/> Senate    |
| <input type="checkbox"/> President |

Disbursement For: 2024

|                                             |                                  |
|---------------------------------------------|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼  |                                  |

State:

District:

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

1500.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 187 OF 191

|                              |                              |                              |                                        |
|------------------------------|------------------------------|------------------------------|----------------------------------------|
| <input type="checkbox"/> 17  | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b           |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input checked="" type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. The Russell Kirk Center For Cultural Renewal**

Mailing Address PO Box 4

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 6 |   | 2 | 0 | 2 | 3 |

City  
MecostaState  
MIZip Code  
49332-0004

FEC Identification Number

C

Purpose of Disbursement  
Donation for event

012

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

100.00

Transaction ID : BF3A6C6FF580C46F4BCA

☐ Memo Item

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. The International Foundation**

Mailing Address 1145 Great Oaks Blvd.

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 0 | 4 |   | 2 | 0 | 2 | 3 |

City  
RochesterState  
MIZip Code  
48307

FEC Identification Number

C

Purpose of Disbursement  
Charitable Contribution

012

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1000.00

Transaction ID : B9FDEB51B605243FFBA4

☐ Memo Item

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. Kent County Republican Committee**

Mailing Address 725 Lake Michigan Dr NW

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 0 | 5 |   | 2 | 0 | 2 | 3 |

City  
Grand RapidsState  
MIZip Code  
49504

FEC Identification Number

C

Purpose of Disbursement  
Ticket for Event - Non-Federal Committee

011

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

28.00

Transaction ID : B3B855389DD8D44E9B55

☐ Memo Item

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).....▶

1128.00

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

3288.50

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 188 OF 191

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

**Cardmember Service**

Nature of Debt (Purpose):

Credit card charge

Mailing Address PO Box 94014

City  
PalatineState  
ILZip Code  
60094-4014

Outstanding Balance Beginning This Period

310.50

Transaction ID : DBBAE54CEF9E148C2809

Amount Incurred This Period

0.00

Payment This Period

310.50

Outstanding Balance at Close of This Period

0.00

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

**Cardmember Service**

Nature of Debt (Purpose):

Credit card charges

Mailing Address PO Box 94014

City  
PalatineState  
ILZip Code  
60094-4014

Outstanding Balance Beginning This Period

350.00

Transaction ID : D98EC4C382C4349A9990

Amount Incurred This Period

0.00

Payment This Period

350.00

Outstanding Balance at Close of This Period

0.00

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

**Cardmember Service**

Nature of Debt (Purpose):

Credit card charges

Mailing Address PO Box 94014

City  
PalatineState  
ILZip Code  
60094-4014

Outstanding Balance Beginning This Period

9631.02

Transaction ID : D02088D22487D4F22BFE

Amount Incurred This Period

0.00

Payment This Period

9631.02

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional) ▶

0.00

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) ▶

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 189 OF 191

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

**Andrews Hooper Pavlik, PLC**

Nature of Debt (Purpose):

Accounting Services

Mailing Address 5915 Eastman Ave  
Ste 100City  
MidlandState  
MIZip Code  
48640-6824

Outstanding Balance Beginning This Period

9170.00

Transaction ID : DE1A23C24BF7941F3B34

Amount Incurred This Period

0.00

Payment This Period

9170.00

Outstanding Balance at Close of This Period

0.00

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

**Cardmember Service**

Nature of Debt (Purpose):

Credit card charges

Mailing Address PO Box 94014

City  
PalatineState  
ILZip Code  
60094-4014

Outstanding Balance Beginning This Period

1500.00

Transaction ID : D4FC22B3F6F754350B10

Amount Incurred This Period

0.00

Payment This Period

1500.00

Outstanding Balance at Close of This Period

0.00

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

**Cardmember Service**

Nature of Debt (Purpose):

Credit card charges

Mailing Address PO Box 94014

City  
PalatineState  
ILZip Code  
60094-4014

Outstanding Balance Beginning This Period

6437.00

Transaction ID : D303BBE3CCE2043C0889

Amount Incurred This Period

0.00

Payment This Period

6437.00

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional) ▶

0.00

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) ▶

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 190 OF 191

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

**Cardmember Service**

Nature of Debt (Purpose):

Credit card charges

Mailing Address PO Box 94014

City  
PalatineState  
ILZip Code  
60094-4014

Outstanding Balance Beginning This Period

0.00

Transaction ID : DCCADDE5591A14BD9A2A

Amount Incurred This Period

15142.75

Payment This Period

0.00

Outstanding Balance at Close of This Period

15142.75

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

**Andrews Hooper Pavlik, PLC**

Nature of Debt (Purpose):

Accounting Services

Mailing Address 5915 Eastman Ave  
Ste 100City  
MidlandState  
MIZip Code  
48640-6824

Outstanding Balance Beginning This Period

0.00

Transaction ID : DE461F919F1774063BD1

Amount Incurred This Period

9130.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

9130.00

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

**State Of Michigan - SWT**

Nature of Debt (Purpose):

Michigan withholding tax

Mailing Address PO Box 30324

City  
LansingState  
MIZip Code  
48909-7824

Outstanding Balance Beginning This Period

0.00

Transaction ID : D339F604BD9624BFAAEF

Amount Incurred This Period

610.50

Payment This Period

0.00

Outstanding Balance at Close of This Period

610.50

1) **SUBTOTALS** This Period This Page (optional) .....

24883.25

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) .....

# SCHEDULE D (FEC Form 3)

## DEBTS AND OBLIGATIONS

### Excluding Loans

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

PAGE 191 OF 191

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

Cardmember Service

Nature of Debt (Purpose):

Credit card charges

Mailing Address PO Box 94014

City  
Palatine

State  
IL

Zip Code  
60094-4014

Outstanding Balance Beginning This Period

0.00

Transaction ID : DD6E7ED5ECE1B4C68B6A

Amount Incurred This Period

2472.90

Payment This Period

0.00

Outstanding Balance at Close of This Period

2472.90

B. 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

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

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional) .....

2472.90

2) **TOTALS** This Period (last page this line number only) .....

27356.15

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) .....

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) .....

27356.15