

**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.

1 2 F E 4 M 5

Moolenaar for Congress

ADDRESS (number and street)

913 S. Saginaw Road

Suite 209

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

through

M M /

D D /

Y Y Y Y

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 Holzhauer, Kim, D., Ms.,

Signature of Treasurer

Holzhauer, Kim, D., Ms.,

Date

M M /

D D /

Y Y Y Y

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:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	1		2	0	2	5

To:

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)) ....	158079.32	1019804.98
(b) Total Contribution Refunds (from Line 20(d)) .....	130.00	7595.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	157949.32	1012209.98
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	155175.75	640838.92
(b) Total Offsets to Operating Expenditures (from Line 14) .....	0.00	500.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	155175.75	640338.92
8. Cash on Hand at Close of Reporting Period (from Line 27) .....	1693123.87	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	25820.81	

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:

MM / DD / YYYY  
10 / 01 / 2025

To:

MM / DD / YYYY  
12 / 31 / 2025**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).....

83649.98

614600.98

(ii) Unitemized .....

11929.34

27930.92

(iii) TOTAL of contributions  
from individuals ▶

95579.32

642531.90

(b) Political Party Committees.....

0.00

490.00

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

62500.00

376783.08

(d) The Candidate .....

0.00

0.00

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

158079.32

1019804.98

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

0.00

0.00

## 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.) .....

0.00

500.00

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

8907.11

40020.23

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

166986.43

1060325.21

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 05/2016)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	155175.75	640838.92
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	130.00	7595.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	130.00	7595.00
21. OTHER DISBURSEMENTS .....	2135.50	73587.10
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	157441.25	722021.02

## **III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1683578.69
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	166986.43
25. SUBTOTAL (add Line 23 and Line 24).....	1850565.12
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	157441.25
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1693123.87

**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 142

<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)

Sebolt, Andrew, , ,

**A.**

Mailing Address 2032 N 128th Ave

City

Hart

State

MI

Zip Code

49420-8252

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HomeTown PharmacyOccupation  
DIRECTOR

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

940.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	8		2	0	2	5

Transaction ID : ACF8344A5890E4A48B02

Amount of Each Receipt this Period

385.00

☐ Memo Item

In-kind:Space rental for Event

**B.**

Full Name (Last, First, Middle Initial)

Ritzer III, Joseph, E., ,

Mailing Address 1211 E Long Lake Dr

City

Harrison

State

MI

Zip Code

48625-7824

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NoneOccupation  
Retired

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	9		2	0	2	5

Transaction ID : ACBA3B7A8F69641CEB98

Amount of Each Receipt this Period

200.00

☐ Memo Item

Earmarked (Non-Directed)

**C.**

Full Name (Last, First, Middle Initial)

DeCamp, Douglas, A., ,

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 InternationalOccupation  
CEO

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	0		2	0	2	5

Transaction ID : AB406FCB52FAB4A8CA29

Amount of Each Receipt this Period

1000.00

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

1585.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**Moolenaar for Congress**

Full Name (Last, First, Middle Initial)

Deur, Jan, L., ,

**A.**

Mailing Address 2761 Scenic Dr

City

Muskegon

State

MI

Zip Code

49445-9654

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-Employed

Occupation  
CPA

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 20 2025

Transaction ID : AEC957677CA6645CFAB5

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Huizenga, J. C., , ,

**B.**

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  
Chairman

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 20 2025

Transaction ID : A22C1342911A1474FAD4

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Mashantucket Pequot Tribal Nation

**C.**

Mailing Address PO Box 3008

City

Mashantucket

State

CT

Zip Code

06338-3008

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 20 2025

Transaction ID : A65F6B41FABCC4C31842

Amount of Each Receipt this Period

3500.00

☐ Memo Item

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

6500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**Moolenaar for Congress**

Full Name (Last, First, Middle Initial)

Match-E-Be-Nash-She-Wish Band Pottawatomi Indians

Mailing Address 2872 Mission Dr

City

Shelbyville

State

MI

Zip Code

49344-9580

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 20 2025

Transaction ID : A336F375587834D78A49

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Saginaw Chippewa Indian Tribe Tribal Operations

Mailing Address 7500 E Soaring Eagle Blvd

City

Mount Pleasant

State

MI

Zip Code

48858-7801

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

6800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 20 2025

Transaction ID : A75EDFCF5D439446B924

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Shingle Springs Band of Miwok Indians

Mailing Address PO Box 1340

City

Shingle Springs

State

CA

Zip Code

95682-1340

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 20 2025

Transaction ID : A2BDAEDB559424CFCBEA

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)..... ▶

9500.00

**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)

Yocha Dehe Wintun Nation

A. Mailing Address PO Box 18

City  
BrooksState  
CAZip Code  
95606FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 20 2025

Transaction ID : A447CF5AB830A49A3AC3

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Walls, Kristie, , ,

B. Mailing Address 6188 Belding Rd

City  
BeldingState  
MIZip Code  
48809-8503FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

None

Retired

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

371.07

Date of Receipt

M M / D D / Y Y Y Y Y  
10 21 2025

Transaction ID : A0BE1B8D9DD684A8BA6F

Amount of Each Receipt this Period

350.00

☐ Memo Item

Earmarked (Non-Directed)

Full Name (Last, First, Middle Initial)

Scofield, John, D., ,

C. Mailing Address 4471 Greenwich Pkwy NW

City  
WashingtonState  
DCZip Code  
20007-2010FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

S-3 Group

Consultant

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 27 2025

Transaction ID : A56245C32CCC643BFA7D

Amount of Each Receipt this Period

200.00

☐ Memo Item

In-kind:Fundraiser event expense

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

4050.00

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 9 OF 142

<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)

Scofield, John, D., ,

**A.**

Mailing Address 4471 Greenwich Pkwy NW

City

Washington

State

DC

Zip Code

20007-2010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

S-3 Group

Occupation

Consultant

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

3700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 27 2025

Transaction ID : A7D4188FEC8749D7A4D

Amount of Each Receipt this Period

3500.00



Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Bush, Stephen, L., ,

Mailing Address PO Box 133

City

Harbor Springs

State

MI

Zip Code

49740-0133

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 28 2025

Transaction ID : AB70FF426C17F4642800

Amount of Each Receipt this Period

250.00



Memo Item

**C.**

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: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 28 2025

Transaction ID : AF427A99242904A64ACA

Amount of Each Receipt this Period

500.00



Memo Item

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

4250.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 10 OF 142

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**Moolenaar for Congress**

Full Name (Last, First, Middle Initial)

Goeders, Calvin, N., ,

**A.** Mailing Address 2712 Georgetown Dr

City  
Midland

State  
MI

Zip Code  
48642-3920

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 28 2025

Transaction ID : AA02F627E9C1F4C0695C

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Hines, Larry, W., ,

**B.** 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: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 28 2025

Transaction ID : A3644C5D4FCEC41D8A22

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Hodges, Jeffrey, A., ,

**C.** Mailing Address PO Box 932  
347 S. Hancock Street

City  
Pentwater

State  
MI

Zip Code  
49449-0932

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-Employed

Occupation  
Business Owner

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 28 2025

Transaction ID : AAA0AFF559414298835

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)..... ▶

1700.00

**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)

Hopkins, Judy, E., ,

A. Mailing Address 6238 Duncan Lake Rd

City

Middleville

State

MI

Zip Code

49333-9732

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	8		2	0	2	5

Transaction ID : A61C6914E8EB940378C0

Amount of Each Receipt this Period

150.00

☐ Memo ItemB. Full Name (Last, First, Middle Initial)  
Hornsby, Dorothy, , ,

Mailing Address 3210 E Monroe Rd

City

Midland

State

MI

Zip Code

48642-7247

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	8		2	0	2	5

Transaction ID : A04FBE4F67ABF4DF4AA8

Amount of Each Receipt this Period

500.00

☐ Memo ItemC. Full Name (Last, First, Middle Initial)  
Klecka, Vernelle, P., ,

Mailing Address 2610 Roundtree Cir

City

Midland

State

MI

Zip Code

48642-5251

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	8		2	0	2	5

Transaction ID : A358CCFE84CFE458BB80

Amount of Each Receipt this Period

200.00

☐ Memo Item

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

850.00

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  
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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**Moolenaar for Congress**

Full Name (Last, First, Middle Initial)

Ludington, Katrina, K., ,

**A.**

Mailing Address 299 W Barden Rd

City

Sanford

State

MI

Zip Code

48657-9534

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Communications

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 28 2025

Transaction ID : A5716590CDB804E0F9B0

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MacDonald, Jeremy, L., ,

**B.**

Mailing Address 2072 Cobblestone Ct

City

Mount Pleasant

State

MI

Zip Code

48858-8098

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Mid-Michigan Agency, Inc.

Occupation

Insurance Agent - Owner

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 28 2025

Transaction ID : A4C159E997E8F447F82B

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Moore, Harold, K., ,

**C.**

Mailing Address 22499 200th Ave

City

Tustin

State

MI

Zip Code

49688-8121

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self

Occupation

Physician

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 28 2025

Transaction ID : AC0AA5E0EE4D74854963

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

700.00

**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:  
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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)

Pfenninger, Melvin, B., ,

**A.**

Mailing Address 934 E Hotchkiss Rd

City

Bay City

State

MI

Zip Code

48706-8716

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Business Owner

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	8		2	0	2	5

Transaction ID : AC08A573C375D4E05BC7

Amount of Each Receipt this Period

50.00

☐ Memo Item**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

Retired

Occupation

Retired

Receipt For: 2026



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	5

Transaction ID : A551D2FF96CD340AE9AA

Amount of Each Receipt this Period

50.00

☐ Memo Item

Earmarked (Non-Directed)

**C.**

Full Name (Last, First, Middle Initial)

VanSingel, Stanley, D., ,

Mailing Address 11671 Sycamore Ave

City

Grant

State

MI

Zip Code

49327-9775

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	8		2	0	2	5

Transaction ID : AA30253A6C12645B4909

Amount of Each Receipt this Period

400.00

☐ Memo Item**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)

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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)

Kempf, Sandra, L., ,

**A.**

Mailing Address 1269 Witham Rd

Apt A

City

Muskegon

State

MI

Zip Code

49445-2482

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2026

☒ Primary☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 30 2025

Transaction ID : AF5C780E02DFD4B0E8E0

Amount of Each Receipt this Period

5.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

215 Energy, LLC

Mailing Address 215 N Main St

City

Mt Pleasant

State

MI

Zip Code

48858-2306

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 04 2025

Transaction ID : A8B2AF74D6DA14BCDBD9

Amount of Each Receipt this Period

2000.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

Wisney, Nicole, , ,

Mailing Address 1555 S Brinton Rd

City

Mt Pleasant

State

MI

Zip Code

48858-9628

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Boge, Wybenga &amp; Bradley, PC

Occupation

Partner and CPA

Receipt For: 2026

☒ Primary☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

285.72

Date of Receipt

M M / D D / Y Y Y Y Y  
11 04 2025

Transaction ID : A9F349528C8B04F58B4E

Amount of Each Receipt this Period

285.72

☒ Memo Item

Partnership: 215 Energy, LLC

2005.00

**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  
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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**Moolenaar for Congress**

Full Name (Last, First, Middle Initial)

Boge, Ryan, B., ,

**A.**

Mailing Address PO Box 404

City

Mount Pleasant

State

MI

Zip Code

48804-0404

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Boge, Wybenga & Bradley, PC

Occupation

CPA

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

285.71

Date of Receipt

M M / D D / Y Y Y Y  
11 04 2025

Transaction ID : A40F26F6573264466913

Amount of Each Receipt this Period

285.71

☒ Memo Item

Partnership: 215 Energy, LLC

Full Name (Last, First, Middle Initial)

House, Adam, J., ,

**B.**

Mailing Address 2349 E Weidman Rd

City

Rosebush

State

MI

Zip Code

48878-8761

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Boge, Wybenga & Bradley, PC

Occupation

Partner / CPA

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

285.72

Date of Receipt

M M / D D / Y Y Y Y  
11 04 2025

Transaction ID : A3436D93B10A6441FBE2

Amount of Each Receipt this Period

285.72

☒ Memo Item

Partnership: 215 Energy, LLC

Full Name (Last, First, Middle Initial)

Boge, Daniel, J., ,

**C.**

Mailing Address 215 N Main St

City

Mount Pleasant

State

MI

Zip Code

48858-2306

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Boge, Wybenga & Bradley, PC

Occupation

CPA

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

285.71

Date of Receipt

M M / D D / Y Y Y Y  
11 04 2025

Transaction ID : AF24859A7CD2F47D6AE8

Amount of Each Receipt this Period

285.71

☒ Memo Item

Partnership: 215 Energy, LLC

**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  
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(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)

Harrison, Ramie, , ,

A. Mailing Address 363 Potter Pl

City  
StantonState  
MIZip Code  
48888-8938FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Boge Wybenga, CPA'sOccupation  
CPA & Partner

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

285.71

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 04 / 2025

Transaction ID : AF7F7AAB1546B478F8AB

Amount of Each Receipt this Period

285.71

☒ Memo Item

Partnership: 215 Energy, LLC

B. Full Name (Last, First, Middle Initial)  
VanHoose, Walker, T., ,

Mailing Address 2385 E Surrey Rd

City  
FarwellState  
MIZip Code  
48622-9460FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Boge, Wybenga & Bradley PCOccupation  
Partner / CPA

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

285.72

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 04 / 2025

Transaction ID : AD5A91364CA03447E9D0

Amount of Each Receipt this Period

285.72

☒ Memo Item

Partnership: 215 Energy, LLC

C. Full Name (Last, First, Middle Initial)  
Zeien, Michael, E., ,

Mailing Address 1819 Woods Way

City  
Mount PleasantState  
MIZip Code  
48858-1218FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Boge, Wybenga & Bradley PCOccupation  
Partner / CPA

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

285.71

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 04 / 2025

Transaction ID : AD2C70705F48A4CECA83

Amount of Each Receipt this Period

285.71

☒ Memo Item

Partnership: 215 Energy, LLC

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  
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(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)

Butcher, Pamela, R., ,

**A.**

Mailing Address 5907 Tennis Ct

City

Midland

State

MI

Zip Code

48642-7007

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
IndependentOccupation  
Board Director

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	4		2	0	2	5

Transaction ID : AC3F0B096339D49D68A4

Amount of Each Receipt this Period

250.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

Kosciolek, Sylvia, M., ,

Mailing Address 12228 Woodline Dr

City

Fenton

State

MI

Zip Code

48430-3514

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NoneOccupation  
Retired

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	4		2	0	2	5

Transaction ID : AF2DF7343A65A46748F8

Amount of Each Receipt this Period

200.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

Peterson, Earl, L., ,

Mailing Address 2999 S Timber Dunes Rd

City

Shelby

State

MI

Zip Code

49455-9316

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NoneOccupation  
Retired

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	4		2	0	2	5

Transaction ID : AC60173ED986A47919B1

Amount of Each Receipt this Period

7000.00

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

7450.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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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)

Peterson, Earl, L., ,

**A.**

Mailing Address 2999 S Timber Dunes Rd

City

Shelby

State

MI

Zip Code

49455-9316

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 04 / 2025D D / Y Y Y Y Y  
04 / 2025Y Y Y Y Y  
2025

Transaction ID : ACF5D1F1BD6514F50B86

Amount of Each Receipt this Period

- 3500.00



Memo Item

Reattribution From

**B.**

Full Name (Last, First, Middle Initial)

Peterson, Linda, A., ,

Mailing Address 2999 S Timber Dunes Rd

City

Shelby

State

MI

Zip Code

49455-9316

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 04 / 2025D D / Y Y Y Y Y  
04 / 2025Y Y Y Y Y  
2025

Transaction ID : AB61634F60A2F4DC8A68

Amount of Each Receipt this Period

3500.00



Memo Item

Reattribution To

**C.**

Full Name (Last, First, Middle Initial)

Petricevic, Ljiljana, , ,

Mailing Address 10752 Deerwood Dr SE

City

Lowell

State

MI

Zip Code

49331-9628

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Sheridan Community Hospital

Occupation

President &amp; CEO

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 04 / 2025D D / Y Y Y Y Y  
04 / 2025Y Y Y Y Y  
2025

Transaction ID : A9FBEDFD276464909800

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  
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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)

Walker, Dianne, H., ,

A. Mailing Address 1466 Saffron Cir

City

Traverse City

State

MI

Zip Code

49696-8929

FEC ID number of contributing  
federal political committee.

C

Name of Employer

First Land Development Company, LLC

Occupation

Manager

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	4		2	0	2	5

Transaction ID : AE72F8B826A094A0F8B4

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Winkle, Jeremy, J., ,

B. Mailing Address PO Box 94

City

Cadillac

State

MI

Zip Code

49601-0094

FEC ID number of contributing  
federal political committee.

C

Name of Employer

VanDrie Home Furnishings

Occupation

Retail

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	4		2	0	2	5

Transaction ID : A796D07CE1C72425DA9A

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Barnhart, Melvin, H., ,

C. Mailing Address 1096 Hillcrest Dr

City

Boon

State

MI

Zip Code

49618-9726

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	7		2	0	2	5

Transaction ID : A992E002B29574FB3B61

Amount of Each Receipt this Period

100.00

☐ Memo Item

Earmarked (Non-Directed)

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

1200.00

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	

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)

Kaufman, Michael, , ,

A.

Mailing Address 6 W 77th St

# 14AB

City

New York

State

NY

Zip Code

10024-5125

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MAK CAPITAL

Occupation

FINANCIAL SERVICES

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	5		2	0	2	5

Transaction ID : A0DF8BEEAC40B4D288CE

Amount of Each Receipt this Period

5000.00

☐ Memo Item

B.

Full Name (Last, First, Middle Initial)

Kaufman, Michael, , ,

Mailing Address 6 W 77th St

# 14AB

City

New York

State

NY

Zip Code

10024-5125

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MAK CAPITAL

Occupation

FINANCIAL SERVICES

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	7		2	0	2	5

Transaction ID : A22EED237FCE049C192C

Amount of Each Receipt this Period

- 1500.00

☒ Memo Item

Redesignation From

C.

Full Name (Last, First, Middle Initial)

Kaufman, Michael, , ,

Mailing Address 6 W 77th St

# 14AB

City

New York

State

NY

Zip Code

10024-5125

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MAK CAPITAL

Occupation

FINANCIAL SERVICES

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	7		2	0	2	5

Transaction ID : A65FDEE17ACFF4BC49F0

Amount of Each Receipt this Period

1500.00

☒ 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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<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)

Benchley, Bryon, M., ,

**A.**

Mailing Address 754 Eastwood Dr

City  
ClareState  
MIZip Code  
48617-9606FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Benchley Chiropractic ClinicOccupation  
Chiropractor

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 20 2025

Transaction ID : A52DBCA7B4C154D2082B

Amount of Each Receipt this Period

1000.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

Comstock, Mishelle, , ,

Mailing Address 1196 W Baseline Rd

City  
ShelbyState  
MIZip Code  
49455-9247FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Shelby State BankOccupation  
President and CEO

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 20 2025

Transaction ID : A60FC5A34B10840DCAC8

Amount of Each Receipt this Period

500.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

Grice, Wendy, L., ,

Mailing Address 528 W Garfield Rd

City  
RothburyState  
MIZip Code  
49452-8146FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FWG EnterprisesOccupation  
Owner

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 20 2025

Transaction ID : A2B45A56524494022B32

Amount of Each Receipt this Period

5000.00

☐ Memo Item

6500.00

**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)  
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NAME OF COMMITTEE (In Full)

**Moolenaar for Congress**

Full Name (Last, First, Middle Initial)

Grice, Wendy, L., ,

**A.**

Mailing Address 528 W Garfield Rd

City

Rothbury

State

MI

Zip Code

49452-8146

FEC ID number of contributing  
federal political committee.

C

Name of Employer

FWG Enterprises

Occupation

Owner

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 20 2025

Transaction ID : A8F99038BA16C456EA59

Amount of Each Receipt this Period

- 2500.00

☒ Memo Item

Reattribution From

Full Name (Last, First, Middle Initial)

Grice, Frederick, F., ,

**B.**

Mailing Address 528 W Garfield Rd

City

Rothbury

State

MI

Zip Code

49452-8146

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HomeTown Pharmacy

Occupation

Owner

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 20 2025

Transaction ID : A02411275F18C4E249A1

Amount of Each Receipt this Period

2500.00

☒ Memo Item

Reattribution To

Full Name (Last, First, Middle Initial)

Smith-Olson, Deborah, A., ,

**C.**

Mailing Address PO Box 161

City

Baldwin

State

MI

Zip Code

49304-0161

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Lake-Osceola State Bank

Occupation

Banker

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 20 2025

Transaction ID : A0F086784E81D4C18937

Amount of Each Receipt this Period

500.00

☐ Memo Item

500.00

**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  
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12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**Moolenaar for Congress**

Full Name (Last, First, Middle Initial)

Wheatlake, F., C., ,

**A.** Mailing Address 9264 7 Mile Rd

City

Big Rapids

State

MI

Zip Code

49307-9128

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Utility Supply &amp; Construction Company

Occupation

Chairman / CEO

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	0		2	0	2	5

Transaction ID : A2D98DB502513410EA3E

Amount of Each Receipt this Period

3000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Kempf, Sandra, L., ,

**B.** Mailing Address 1269 Witham Rd  
Apt A

City

Muskegon

State

MI

Zip Code

49445-2482

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

320.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	6		2	0	2	5

Transaction ID : A3DBD7DB5F2B44C008EC

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

McNeil, Les, , ,

**C.** Mailing Address 6244 Brunswick Rd

City

Holton

State

MI

Zip Code

49425-9735

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

HVAC/Mechanical Contractor

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	6		2	0	2	5

Transaction ID : A4D84332880524F34BF5

Amount of Each Receipt this Period

400.00

☐ 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**

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for each category of the  
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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

Retired

Occupation

Retired

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 28 2025

Transaction ID : AEB8907B2D87B461C861

Amount of Each Receipt this Period

50.00

☐ Memo Item  
Earmarked (Non-Directed)

Full Name (Last, First, Middle Initial)

Kempf, Sandra, L., ,

**B.**

Mailing Address 1269 Witham Rd

Apt A

City

Muskegon

State

MI

Zip Code

49445-2482

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 30 2025

Transaction ID : A84758AFD96CB4C60AA1

Amount of Each Receipt this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Carney, Conor, , ,

**C.**

Mailing Address 1804 Vermont Ave NW

City

Washington

State

DC

Zip Code

20001-5006

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Robinhood Markets

Occupation

GOVERNMENT AFFAIRS

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 03 2025

Transaction ID : AE657E99942E24D53AE3

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)..... ▶

1055.00



**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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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)

Gallagher, Daniel, , ,

A. Mailing Address 250 Massachusetts Ave NW

City  
WashingtonState  
DCZip Code  
20001-1436FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Robinhood MarketsOccupation  
LAWYER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 03 2025

Transaction ID : AADE10617E7C74B58A4F

Amount of Each Receipt this Period

7000.00

☐ Memo ItemB. Full Name (Last, First, Middle Initial)  
Gallagher, Daniel, , ,  
Mailing Address 250 Massachusetts Ave NWCity  
WashingtonState  
DCZip Code  
20001-1436FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Robinhood MarketsOccupation  
LAWYER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 03 2025

Transaction ID : AA3971AFFC39F4ADD86F

Amount of Each Receipt this Period

- 3500.00

☒ Memo Item  
Redesignation FromC. Full Name (Last, First, Middle Initial)  
Gallagher, Daniel, , ,  
Mailing Address 250 Massachusetts Ave NWCity  
WashingtonState  
DCZip Code  
20001-1436FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Robinhood MarketsOccupation  
LAWYER

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 03 2025

Transaction ID : A9CF5CA723A3841CA82D

Amount of Each Receipt this Period

3500.00

☒ Memo Item  
Redesignation To

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

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

7000.00

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

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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**Moolenaar for Congress**

Full Name (Last, First, Middle Initial)

Tenev, Vlad, , ,

**A.**

Mailing Address 530 Showers Dr  
Ste 7

City

Mountain View

State

CA

Zip Code

94040-1495

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Robinhood Markets

Occupation  
CEO

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 03 2025

Transaction ID : A618F60FF18B74F2C9FD

Amount of Each Receipt this Period

7000.00

☐ Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Tenev, Vlad, , ,

Mailing Address 530 Showers Dr  
Ste 7

City

Mountain View

State

CA

Zip Code

94040-1495

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Robinhood Markets

Occupation  
CEO

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 03 2025

Transaction ID : AE13936344CD944DCBE5

Amount of Each Receipt this Period

- 3500.00

☒ Memo Item

Redesignation From

**C.**

Full Name (Last, First, Middle Initial)

Tenev, Vlad, , ,

Mailing Address 530 Showers Dr  
Ste 7

City

Mountain View

State

CA

Zip Code

94040-1495

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Robinhood Markets

Occupation  
CEO

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 03 2025

Transaction ID : A3743C9E702384ED7B69

Amount of Each Receipt this Period

3500.00

☒ Memo Item

Redesignation To

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

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

7000.00

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**Moolenaar for Congress**

Full Name (Last, First, Middle Initial)

Barnhart, Melvin, H., ,

**A.**

Mailing Address 1096 Hillcrest Dr

City

Boon

State

MI

Zip Code

49618-9726

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

449.98

Date of Receipt

M M / D D / Y Y Y Y Y  
12 09 2025

Transaction ID : A94AB4B7627CD44E691B

Amount of Each Receipt this Period

49.98

☐ Memo Item  
Earmarked (Non-Directed)

Full Name (Last, First, Middle Initial)

Brown, Deanna, , ,

**B.**

Mailing Address 2275 Wilson St.

City

Conklin

State

MI

Zip Code

49403

FEC ID number of contributing  
federal political committee.

C

Name of Employer

REISTER'S GROWER SERVICES

Occupation

SALES

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

580.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 16 2025

Transaction ID : AB8EDA34C252543AFA1B

Amount of Each Receipt this Period

80.00

☐ Memo Item  
Earmarked (Non-Directed)

Full Name (Last, First, Middle Initial)

Moore, William, H., ,

**C.**

Mailing Address 117 Hillcrest Rd

City

Raleigh

State

NC

Zip Code

27605-1717

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 22 2025

Transaction ID : AB00CFCC65FD3450EAD0

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

1129.98

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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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)

Stupak, Bart, T, ,

**A.**

Mailing Address 5375 J Rd

City

Escanaba

State

MI

Zip Code

49829-9756

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Venable LLPOccupation  
Attorney

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
12		22		2025

Transaction ID : A93982785C76049B5868

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Brozzo, Ralph, A., ,

**B.**

Mailing Address PO Box 475

City

Midland

State

MI

Zip Code

48640-0475

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Benjamin F. Edwards & Co.Occupation  
Financial Advisor

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
12		24		2025

Transaction ID : A3C3AE246ABDA4F14840

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Levy, Edward, C., , Jr.

**C.**

Mailing Address 970 Shirley Rd

City

Birmingham

State

MI

Zip Code

48009-3730

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Edw. C. Levy Co.Occupation  
Executive Chairman

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
12		24		2025

Transaction ID : A074E89A166F643B0AE1

Amount of Each Receipt this Period

7000.00

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

7750.00

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

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

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NAME OF COMMITTEE (In Full)

**Moolenaar for Congress**

Full Name (Last, First, Middle Initial)

Levy, Edward, C., Jr.

**A.**

Mailing Address 970 Shirley Rd

City

Birmingham

State

MI

Zip Code

48009-3730

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Edw. C. Levy Co.

Occupation

Executive Chairman

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 24 2025

Transaction ID : ACE4937DA64734ABAB8C

Amount of Each Receipt this Period

- 3500.00

☒ Memo Item

Reattribution From

Full Name (Last, First, Middle Initial)

Levy, Edward, C., Jr.

**B.**

Mailing Address 970 Shirley Rd

City

Birmingham

State

MI

Zip Code

48009-3730

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Edw. C. Levy Co.

Occupation

Executive Chairman

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 24 2025

Transaction ID : A406512AF42D24F659BD

Amount of Each Receipt this Period

- 3500.00

☒ Memo Item

Reattribution From

Full Name (Last, First, Middle Initial)

Dresner-Levy, Linda, ,

**C.**

Mailing Address 970 Shirley Rd

City

Birmingham

State

MI

Zip Code

48009-3730

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 24 2025

Transaction ID : A3DBB7B57DC2D49CAA7E

Amount of Each Receipt this Period

3500.00

☒ Memo Item

Reattribution To

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

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

0.00

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

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NAME OF COMMITTEE (In Full)

**Moolenaar for Congress**

Full Name (Last, First, Middle Initial)

Dresner-Levy, Linda, , ,

**A.**

Mailing Address 970 Shirley Rd

City

Birmingham

State

MI

Zip Code

48009-3730

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 24 2025

Transaction ID : A96EE6C96A9064CAAEB

Amount of Each Receipt this Period

3500.00

☒ Memo Item

Reattribution To

Full Name (Last, First, Middle Initial)

Winkle, Beverly, L., ,

**B.**

Mailing Address 7116 W Lake St

City

Lake City

State

MI

Zip Code

49651-8795

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 24 2025

Transaction ID : AF8A3886D3F024B7692B

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Tiffany, Lyle, B., ,

**C.**

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

Retired

Occupation

Retired

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 28 2025

Transaction ID : A6989CE0DFB5D4382A89

Amount of Each Receipt this Period

50.00

☐ Memo Item

Earmarked (Non-Directed)

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

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

550.00

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

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NAME OF COMMITTEE (In Full)

**Moolenaar for Congress**

Full Name (Last, First, Middle Initial)

Carras, Peter, J., ,

**A.**

Mailing Address 2301 W Sugnet Rd

City

Midland

State

MI

Zip Code

48640-2648

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Carras Law Office PLLC

Occupation

Attorney

Receipt For: 2026

☒ 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 2025

Transaction ID : AB125D31DBE654635BF4

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Kim, Thomas, , ,

**B.**

Mailing Address 7009 Arbor Ln

City

Mc Lean

State

VA

Zip Code

22101-1545

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Thomas Capitol Partners, Inc.

Occupation

President

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 31 2025

Transaction ID : ABDA39390688A458F83F

Amount of Each Receipt this Period

250.00

☐ Memo Item

Earmarked (Non-Directed)

Full Name (Last, First, Middle Initial)

Pfrang, Steven, , ,

**C.**

Mailing Address 702 Kings Ct

City

Alexandria

State

VA

Zip Code

22302-4013

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BGR Group

Occupation

Consultant

Receipt For: 2026

☒ 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 2025

Transaction ID : A17947AAAD1C74EC0BF7

Amount of Each Receipt this Period

875.00

☐ Memo Item

Earmarked (Non-Directed)

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

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

2125.00

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

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NAME OF COMMITTEE (In Full)

**Moolenaar for Congress**

Full Name (Last, First, Middle Initial)

Ware, Ellen, K., ,

**A.**

Mailing Address 4611 N Stark Rd

City  
Hope

State  
MI

Zip Code  
48628-9764

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
WSW Funeral Home

Occupation  
Funeral Director

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 31 2025

Transaction ID : ABF30C5125D05451F99B

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ 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 Y

Amount of Each Receipt this Period

☐ Memo Item

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

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

250.00

83649.98



**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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Detailed Summary PageFOR LINE NUMBER:  
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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
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NAME OF COMMITTEE (In Full)

**Moolenaar for Congress**

Full Name (Last, First, Middle Initial)

Biomarin Pharmaceutical Inc. PAC Aka Biomarin PAC

**A.**Mailing Address 2350 Kerner Blvd  
Ste 250City  
San RafaelState  
CAZip Code  
94901-5596FEC ID number of contributing  
federal political committee.**C** C00543371

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		20		2025

Transaction ID : AE0EC12B41F5B4B629B6

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Eli Lilly And Company PAC

**B.**

Mailing Address Lilly Corporate Center

City  
IndianapolisState  
INZip Code  
46285-0001FEC ID number of contributing  
federal political committee.**C** C00082792

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		20		2025

Transaction ID : AB8A1B1C683C941C7A25

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Genentech Inc. PAC (GenenPAC)

**C.**Mailing Address 1 Dna Way  
Ms355aCity  
South San FranciscState  
CAZip Code  
94080-4918FEC ID number of contributing  
federal political committee.**C** C00199257

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		20		2025

Transaction ID : A9FFCB9D9E94CD88E4

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  
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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
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NAME OF COMMITTEE (In Full)

**Moolenaar for Congress**

Full Name (Last, First, Middle Initial)

General Mills Inc PAC

**A.**

Mailing Address 1 General Mills Blvd

City

Minneapolis

State

MN

Zip Code

55426-1347

FEC ID number of contributing  
federal political committee.**C** C00062646

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	0		2	0	2	5

**Transaction ID : A841B12A5FE1143698F3**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Michigan Farm Bureau PAC

**B.**

Mailing Address PO Box 30960

City

Lansing

State

MI

Zip Code

48909-8460

FEC ID number of contributing  
federal political committee.**C** C00096362

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	0		2	0	2	5

**Transaction ID : A8562498F6EB34E5B9EC**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

National Corn Growers Association PAC - CornPAC

**C.**Mailing Address 20 F St NW  
Ste 600

City

Washington

State

DC

Zip Code

20001-6707

FEC ID number of contributing  
federal political committee.**C** C00376343

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	0		2	0	2	5

**Transaction ID : A9D7AB7267A424DE6939**

Amount of Each Receipt this Period

2500.00

☐ 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**

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NAME OF COMMITTEE (In Full)

**Moolenaar for Congress**

Full Name (Last, First, Middle Initial)

Altria Group, Inc. PAC (ALTRIAPAC)

**A.**

Mailing Address 101 Constitution Ave NW  
Ste 400W

City  
Washington

State  
DC

Zip Code  
20001-2155

FEC ID number of contributing  
federal political committee.

**C** C00089136

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 10 2025

Transaction ID : A970F67393FFC4F8C932

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

T-Mobile USA, Inc. PAC (T-PAC)

**B.**

Mailing Address 601 Pennsylvania Ave NW  
Ste 800N

City  
Washington

State  
DC

Zip Code  
20004-2665

FEC ID number of contributing  
federal political committee.

**C** C00361758

Name of Employer

Occupation

Receipt For: 2026

☒ 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 2025

Transaction ID : AC30813E6A20D402E865

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

August Pfluger For Congress

**C.**

Mailing Address PO Box 3530

City  
San Angelo

State  
TX

Zip Code  
76902-3530

FEC ID number of contributing  
federal political committee.

**C** C00719294

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 14 2025

Transaction ID : A10CCF0ADCB8A43F3BC6

Amount of Each Receipt this Period

2000.00

☐ Memo Item

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

5500.00

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

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

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NAME OF COMMITTEE (In Full)

**Moolenaar for Congress**

Full Name (Last, First, Middle Initial)

Association For Accessible Medicines PAC

Mailing Address 601 New Jersey Ave NW  
Ste 850

City  
Washington

State  
DC

Zip Code  
20001-3051

FEC ID number of contributing  
federal political committee.

C C00383463

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 26 2025

Transaction ID : AB53F51371A7F4E25AA2

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

BNSF Railway Company RAILPAC

Mailing Address PO Box 961039

City  
Fort Worth

State  
TX

Zip Code  
76161-0039

FEC ID number of contributing  
federal political committee.

C C00235739

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 26 2025

Transaction ID : A9E7EECD19BC44CC79B9

Amount of Each Receipt this Period

3000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Holland & Knight Committee for Effective Government

Mailing Address 800 17th St NW  
Ste 1100

City  
Washington

State  
DC

Zip Code  
20006-3962

FEC ID number of contributing  
federal political committee.

C C00171330

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 26 2025

Transaction ID : A5DCC87DA06964B7E8F2

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)..... ▶

5000.00

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

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NAME OF COMMITTEE (In Full)

**Moolenaar for Congress**

Full Name (Last, First, Middle Initial)

**ROBINHOOD MARKETS, INC. PAC**

**A.**

Mailing Address 85 Willow Rd

City

Menlo Park

State

CA

Zip Code

94025-3656

FEC ID number of contributing  
federal political committee.

**C** C00780304

Name of Employer

Occupation

Receipt For: 2026

☒ 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 2025

**Transaction ID : AE997C42297D24273832**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

**B.**

Full Name (Last, First, Middle Initial)

**Verizon Communications Inc. Political Action Committee**

Mailing Address 1300 I Street NW  
STE 500 EAST

City

Washington

State

DC

Zip Code

20005-3314

FEC ID number of contributing  
federal political committee.

**C** C00186288

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 16 2025

**Transaction ID : A04CE068F7683469CB89**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C.**

Full Name (Last, First, Middle Initial)

**Upper Hand Fund**

Mailing Address PO Box 2485

City

Springfield

State

VA

Zip Code

22152-0485

FEC ID number of contributing  
federal political committee.

**C** C00503151

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 18 2025

**Transaction ID : A3FC1CED3F04A4955B9F**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

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

11000.00

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

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

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NAME OF COMMITTEE (In Full)

**Moolenaar for Congress**

Full Name (Last, First, Middle Initial)

General Electric Company Aerospace Employee PAC (Ge Aerospace Pac)

Mailing Address 600 14th St NW  
Ste 900

City  
Washington

State  
DC

Zip Code  
20005-2002

FEC ID number of contributing  
federal political committee.

C C00024869

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 19 2025

Transaction ID : A247D709EEC764187965

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Abbott Laboratories Employee PAC

Mailing Address 100 Abbott Park Rd  
D315 Ap6d-2

City  
Abbott Park

State  
IL

Zip Code  
60064-3502

FEC ID number of contributing  
federal political committee.

C C00040279

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 22 2025

Transaction ID : AD2403B3AA2C645E98A9

Amount of Each Receipt this Period

2500.00

☐ Memo Item

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: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 22 2025

Transaction ID : AED00FD8246CA468CB5C

Amount of Each Receipt this Period

1500.00

☐ 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**

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NAME OF COMMITTEE (In Full)

**Moolenaar for Congress**

Full Name (Last, First, Middle Initial)

American Property Casualty Insurance Association PAC (Insuring America Pac)

Mailing Address 8700 W Bryn Mawr Ave  
Ste 1200S

City  
Chicago

State  
IL

Zip Code  
60631-3512

FEC ID number of contributing  
federal political committee.

C C00066472

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 22 2025

Transaction ID : A2FA8D1DB62624C8CA46

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. AT&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: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 22 2025

Transaction ID : A82694093C65949A3980

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Conservative Opportunity Leadership & Enterprise PAC (COLE PAC)

Mailing Address 12176 Chancery Station Cir

City  
Reston

State  
VA

Zip Code  
20190-5803

FEC ID number of contributing  
federal political committee.

C C00404392

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 22 2025

Transaction ID : A3F0082BDAC4945ADBA9

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)..... ▶

4000.00

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

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

FOR LINE NUMBER:  
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**Moolenaar for Congress**

Full Name (Last, First, Middle Initial)

Ctia - The Wireless Association PAC

Mailing Address 1400 16th St NW  
Ste 600

City  
Washington

State  
DC

Zip Code  
20036-2225

FEC ID number of contributing  
federal political committee.

C C00262295

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 22 2025

Transaction ID : A932DCEF341AA498084F

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Dykema Gossett Federal PAC

Mailing Address 201 Townsend St  
Ste 900

City  
Lansing

State  
MI

Zip Code  
48933-1529

FEC ID number of contributing  
federal political committee.

C C00342113

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 22 2025

Transaction ID : AF7C5230820144048BFE

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

International Dairy Foods Association PAC

Mailing Address 1250 H St NW  
Ste 900

City  
Washington

State  
DC

Zip Code  
20005-3952

FEC ID number of contributing  
federal political committee.

C C00128231

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 22 2025

Transaction ID : AAA1C146B476B4112B24

Amount of Each Receipt this Period

3000.00

☐ Memo Item

5000.00

**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	<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 Shooting Sports Foundation, Inc. PAC (NSSF PAC)

**A.**Mailing Address 400 N Capitol St NW  
Ste 490City  
WashingtonState  
DCZip Code  
20001-6509FEC ID number of contributing  
federal political committee.**C** C00480863

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
12		22		2025

Transaction ID : AD83352BAE10B445E881

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

National Turkey Federation PAC (TURPAC)

**B.**Mailing Address 1225 New York Ave NW  
Ste 400City  
WashingtonState  
DCZip Code  
20005-6404FEC ID number of contributing  
federal political committee.**C** C00076182

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
12		22		2025

Transaction ID : AF476B4D5E5CB4BCEAAB

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Niron Magnetics PAC

**C.**Mailing Address 650 Taft St NE  
Ste 400City  
MinneapolisState  
MNZip Code  
55413-2597FEC ID number of contributing  
federal political committee.**C** C00878694

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
12		22		2025

Transaction ID : ACCD475B479D74F30939

Amount of Each Receipt this Period

1000.00

☐ 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 Page

FOR LINE NUMBER:  
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**Moolenaar for Congress**

Full Name (Last, First, Middle Initial)

Novartis Corporation PAC

**A.**

Mailing Address 801 Pennsylvania Ave NW  
Ste 700

City  
Washington

State  
DC

Zip Code  
20004-2723

FEC ID number of contributing  
federal political committee.

**C** C00033969

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 22 2025

**Transaction ID : A8D3DC539F5CC4163B54**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Regeneron Pharmaceuticals, Inc. PAC

**B.**

Mailing Address 777 Old Saw Mill River Rd

City  
Tarrytown

State  
NY

Zip Code  
10591-6717

FEC ID number of contributing  
federal political committee.

**C** C00562264

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 22 2025

**Transaction ID : A92B985D0EE934F97A51**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Venable PAC (Ven-pac)

**C.**

Mailing Address 600 Massachusetts Ave NW

City  
Washington

State  
DC

Zip Code  
20001-5358

FEC ID number of contributing  
federal political committee.

**C** C00369660

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 22 2025

**Transaction ID : A91F5C28C6A4F4E4C85B**

Amount of Each Receipt this Period

3000.00

☐ 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  
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☐ 11a ☐ 11b ☒ 11c ☐ 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: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 30 2025

**Transaction ID : A222B1E1BFB02455A9F7**

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Employees of RTX Corporation PAC

**B.**

Mailing Address 1000 Wilson Blvd

City

Arlington

State

VA

Zip Code

22209-3927

FEC ID number of contributing  
federal political committee.

**C** C00097568

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 30 2025

**Transaction ID : A32F31FAD922A4755992**

Amount of Each Receipt this Period

1000.00

☐ 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 Y

Amount of Each Receipt this Period

☐ Memo Item

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

3000.00

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

62500.00

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

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

FOR LINE NUMBER:  
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 ☒ 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: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

32026.18

Date of Receipt

M M / D D / Y Y Y Y Y  
10 31 2025

Transaction ID : A3643916025104CC7B2D

Amount of Each Receipt this Period

16.38

☐ Memo Item

Interest income

Full Name (Last, First, Middle Initial)

Isabella Bank

**B.**

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: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

32026.18

Date of Receipt

M M / D D / Y Y Y Y Y  
10 31 2025

Transaction ID : AD20AB1DB5B5B4A2590D

Amount of Each Receipt this Period

2957.04

☐ Memo Item

Interest income

Full Name (Last, First, Middle Initial)

Isabella Bank

**C.**

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: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

34917.58

Date of Receipt

M M / D D / Y Y Y Y Y  
11 30 2025

Transaction ID : A403F6E9205C042B0836

Amount of Each Receipt this Period

12.70

☐ Memo Item

Interest income

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

2986.12

**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  
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(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"/> 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: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

34917.58

Date of Receipt

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

Transaction ID : A68BDCBFAC2B24A83BE9

Amount of Each Receipt this Period

2878.70

☐ 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: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

37959.87

Date of Receipt

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

Transaction ID : ACE7FB6F186F14887849

Amount of Each Receipt this Period

3030.31

☐ 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: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

37959.87

Date of Receipt

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

Transaction ID : A29BE2B290CAE4680899

Amount of Each Receipt this Period

11.98

☐ Memo Item  
Interest income

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

5920.99

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

8907.11

**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
<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. Arena, LLC**Mailing Address 1260 E Stringham Ave  
Ste 400City  
Salt Lake CityState  
UTZip Code  
84106-3030Purpose of Disbursement  
Digital Media Advertising

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	0		0	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : B2AC0698DCD794138B89

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Barry County GOP Admin. Account**

Mailing Address PO Box 22

City  
HastingsState  
MIZip Code  
49058-0022Purpose 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	0		0	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : B80B096A45FD347B7BFC

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CAC Services**

Mailing Address 913 S Saginaw Rd

City  
MidlandState  
MIZip Code  
48640-4602Purpose 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	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

4250.00

Transaction ID : B4DC92104082D476EAE9

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

5750.00

**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="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. Grand Rapids Right To Life**

Mailing Address PO Box 901

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			01			2025			

City  
WyomingState  
MIZip Code  
49509-0901

FEC Identification Number

C

Purpose of Disbursement  
Tickets for Annual Dinner Event

001

Amount of Each Disbursement this Period

250.00

Transaction ID : B61689B05FC7847C299A

☐ 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. Ionia County Republican Comm - Admin**

Mailing Address PO Box 215

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			01			2025			

City  
IoniaState  
MIZip Code  
48846-0215

FEC Identification Number

C

Purpose of Disbursement  
Sponsor for Event

004

Amount of Each Disbursement this Period

500.00

Transaction ID : B2B542573E7C640C78F1

☐ 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. Isabella Bank**

Mailing Address PO Box 100

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			01			2025			

City  
Mount PleasantState  
MIZip Code  
48804-0100

FEC Identification Number

C

Purpose of Disbursement  
Bank Service Charge

001

Amount of Each Disbursement this Period

3.00

Transaction ID : B629F374BDC8A4D2286F

☐ 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).....▶

753.00

**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
<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. PayPal, Inc.**

Mailing Address 2211 N 1st St

Date of Disbursement

M M	D D	Y Y Y Y
10	01	2025

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 : B8D857B84320D4252876

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**B. QRP, Inc.**

Mailing Address 3000 James Savage Rd

Date of Disbursement

M M	D D	Y Y Y Y
10	01	2025

City  
MidlandState  
MIZip Code  
48642-6533

FEC Identification Number

C

Purpose of Disbursement  
Printing - sponsor signs

003

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

197.84

Transaction ID : BE702B25017544E6DB56

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**C. Democracy Engine LLC**Mailing Address 416 Florida Ave NW  
Unit 26418

Date of Disbursement

M M	D D	Y Y Y Y
10	02	2025

City  
WashingtonState  
DCZip Code  
20001-0516

FEC Identification Number

C

Purpose of Disbursement  
Administrative Fee - Conduit

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

0.05

Transaction ID : BB002D261CB594AAC88B

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

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

227.89

**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="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. Paychex**Mailing Address 1000 E Warrenville Rd  
Suite 150City  
NapervilleState  
ILZip Code  
60563-3573Purpose of Disbursement  
Payroll 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
10			02			2025			

FEC Identification Number

C

Amount of Each Disbursement this Period

127.90

Transaction ID : BE136C351A52440908B6

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Paychex**Mailing Address 1000 E Warrenville Rd  
Suite 150City  
NapervilleState  
ILZip Code  
60563-3573Purpose of Disbursement  
Payroll taxes - 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
10			02			2025			

FEC Identification Number

C

Amount of Each Disbursement this Period

4.33

Transaction ID : B54CF7D74E78D4FCCBA0

☐ 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  
Federal taxes and withholdings

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
10			02			2025			

FEC Identification Number

C

Amount of Each Disbursement this Period

4.33

Transaction ID : BA8689ED0F38B4978BE3

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

132.23

**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
<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
1	0		0	4		2	0	2	5

City  
PalatineState  
ILZip Code  
60094-4014

FEC Identification Number

C

Purpose of Disbursement  
Credit card payment - itemized subject to limit

002

Amount of Each Disbursement this Period

28278.38

Transaction ID : B48D9001DD781461C9C0

☐ 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. Purebuttons**

Mailing Address 2991 Interstate Pkwy

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	1		2	0	2	5

City  
BrunswickState  
OHZip Code  
44212-4327

FEC Identification Number

C

Purpose of Disbursement  
Event Buttons

004

Amount of Each Disbursement this Period

324.79

Transaction ID : B7B77897604B14AE4BE2

☒ 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. Canva US, Inc.**Mailing Address 3212 E Cesar Chavez St  
Bldg 1

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	2		2	0	2	5

City  
AustinState  
TXZip Code  
78702-4938

FEC Identification Number

C

Purpose of Disbursement  
Subscription

001

Amount of Each Disbursement this Period

14.99

Transaction ID : BA274CF171DA04416A57

☒ 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).....▶

28278.38

**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)

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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. Republican Congressional Spouses**

Mailing Address 2002 New Hampshire Ave

Date of Disbursement

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

City  
WashingtonState  
DCZip Code  
20009

FEC Identification Number

C

Purpose of Disbursement  
Luncheon Event

001

Amount of Each Disbursement this Period

40.00

Transaction ID : B8B6375B88BDF464FA40

☒ 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. Delamar Traverse City**

Mailing Address 615 E Front St

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	4		2	0	2	5

City  
Traverse CityState  
MIZip Code  
49686-2617

FEC Identification Number

C

Purpose of Disbursement  
Event Costs

003

Amount of Each Disbursement this Period

18600.16

Transaction ID : B6D41AE6CC4274E41834

☒ 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. Koffee Kuppe Cafe**

Mailing Address 46 W Main St

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	4		2	0	2	5

City  
FremontState  
MIZip Code  
49412-1136

FEC Identification Number

C

Purpose of Disbursement  
Meal

002

Amount of Each Disbursement this Period

7.62

Transaction ID : B03C9F44D4B6048C48AF

☒ 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
<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 Lake Tavern**

Mailing Address 360 Ruddiman Dr

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	4		2	0	2	5

City  
MuskegonState  
MIZip Code  
49445-2786

FEC Identification Number

C

Purpose of Disbursement  
Staff Meals

002

Amount of Each Disbursement this Period

94.03

Transaction ID : BE865DCD03D3745568EA

☒ 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. USPS - Caledonia**

Mailing Address 9339 Cherry Valley Ave SE

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	5		2	0	2	5

City  
CaledoniaState  
MIZip Code  
49316-0002

FEC Identification Number

C

Purpose of Disbursement  
Postage stamps

001

Amount of Each Disbursement this Period

156.00

Transaction ID : BF1C84CBEE6CB4932835

☒ 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. Buccilli's Pizza Of Clare**

Mailing Address 1541 N McEwan St

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	5		2	0	2	5

City  
ClareState  
MIZip Code  
48617-1115

FEC Identification Number

C

Purpose of Disbursement  
Staff Meals

002

Amount of Each Disbursement this Period

43.45

Transaction ID : B4419840D67AB44B283F

☒ 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. Sam's Club - Lansing**

Mailing Address 2925 Centre Blvd

City  
LansingState  
MIZip Code  
48912Purpose of Disbursement  
Parade Supplies

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	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1073.56

Transaction ID : B7B4DD2CC596F44679B7

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. River Dog Tavern**

Mailing Address 117 E Main St

City  
MiddletownState  
MIZip Code  
49333-8172Purpose 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	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

137.38

Transaction ID : B27AAE34A204C4E5E8F1

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Speedway**

Mailing Address 9898 S Clare Ave

City  
ClareState  
MIZip Code  
48617-8908Purpose 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	8		1	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

5.99

Transaction ID : B0B25831B1F5244448FC

☒ 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)

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<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. Applebee's Greenville**

Mailing Address 615 S Greenville W Dr

City  
GreenvilleState  
MIZip Code  
48838-3534Purpose of Disbursement  
Staff Meeting Meals

002

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

175.24

Transaction ID : B9D5264741B7747108DF

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Subway - Ithaca**

Mailing Address 1416 Center St

City  
IthacaState  
MIZip Code  
48847-1610Purpose of Disbursement  
Staff Meals

002

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

27.69

Transaction ID : BE637AF5BA0754934857

☒ 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

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

15.31

Transaction ID : B4543C8843AB0418785C

☒ 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 55 OF 142

<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. Jones Homemade Ice Cream Shoppe**

Mailing Address 858 Michigan Ave

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	0		2	0	2	5

City  
BaldwinState  
MIZip Code  
49304-7123

FEC Identification Number

C

Purpose of Disbursement  
Meal

002

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

12.42

Transaction ID : BF5D09182E0ED4A39B4F

☒ 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 Grand Hotel**

Mailing Address 286 Grand Avenue

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	0		2	0	2	5

City  
Mackinac IslandState  
MIZip Code  
49757

FEC Identification Number

C

Purpose of Disbursement  
Lodging for conference

002

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

3764.42

Transaction ID : B1DC4E7D6F8844487BFF

☒ 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. Cops & Doughnuts**

Mailing Address 521 N McEwan Street

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	1		2	0	2	5

City  
ClareState  
MIZip Code  
48617-1438

FEC Identification Number

C

Purpose of Disbursement  
Staff Meals

002

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

33.86

Transaction ID : B643C864799224A8085B

☒ 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)

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<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. Aldi**

Mailing Address 5114 28th St SE

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	1		2	0	2	5

City  
Grand RapidsState  
MIZip Code  
49512-2049

FEC Identification Number

C

Purpose of Disbursement  
Staff Meeting Meals

002

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

63.04

Transaction ID : BCFE1EC28FDC24C6D8B9

☒ 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
0	8		2	2		2	0	2	5

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

167.46

Transaction ID : B31D1A59461F04919976

☒ 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. Sprinkles Donut Shop**

Mailing Address 9365 Cherry Valley Ave SE

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	2		2	0	2	5

City  
CaledoniaState  
MIZip Code  
49316-9506

FEC Identification Number

C

Purpose of Disbursement  
Food for in-district meeting

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

19.80

Transaction ID : B720F59B26DE249149B7

☒ 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 57 OF 142

<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. Tasty Treat**

Mailing Address 120 N Main Street

Date of Disbursement

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

City  
Lake CityState  
MIZip Code  
49651-5103

FEC Identification Number

C

Purpose of Disbursement  
Ice cream for volunteers

002

Amount of Each Disbursement this Period

37.31

Transaction ID : BEBC5A5989C074C6B8AF

☒ 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. American Airlines**

Mailing Address 4333 Amon Carter Blvd

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	5		2	0	2	5

City  
Fort WorthState  
TXZip Code  
76155

FEC Identification Number

C

Purpose of Disbursement  
Airfare for events

002

Amount of Each Disbursement this Period

599.49

Transaction ID : B582D6C45C0A9484A972

☒ 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. Smith's Flowers & Gift**

Mailing Address 2909 Ashman Street

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	6		2	0	2	5

City  
MidlandState  
MIZip Code  
48640-4618

FEC Identification Number

C

Purpose of Disbursement  
Flowers

001

Amount of Each Disbursement this Period

100.65

Transaction ID : B8EF4F83234F44ACFA69

☒ 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 58 OF 142

<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. Squarespace**

Mailing Address 8 Clarkson St

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	6		2	0	2	5

City  
New YorkState  
NYZip Code  
10014-4301

FEC Identification Number

C

Purpose of Disbursement  
Website Hosting

004

Amount of Each Disbursement this Period

276.00

Transaction ID : BBFB205C0BC804962908

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

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	6		2	0	2	5

City  
MemphisState  
TNZip Code  
38116-5070

FEC Identification Number

C

Purpose of Disbursement  
Shipping

001

Amount of Each Disbursement this Period

35.13

Transaction ID : BA80E19672D8A4898805

☒ 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. Delta Air Lines**

Mailing Address 1030 Delta Blvd

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	7		2	0	2	5

City  
AtlantaState  
GAZip Code  
30354-1989

FEC Identification Number

C

Purpose of Disbursement  
Airfare

002

Amount of Each Disbursement this Period

603.95

Transaction ID : B246515E941EB4C8DB6E

☒ 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 59 OF 142

<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. American Airlines**

Mailing Address 4333 Amon Carter Blvd

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		27		2025

City  
Fort WorthState  
TXZip Code  
76155

FEC Identification Number

C

Purpose of Disbursement  
Airfare for events

002

Amount of Each Disbursement this Period

561.49

Transaction ID : B3DD140D470334926AE5

☒ 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. Caledonia Storage**

Mailing Address 10330 Cherry Valley Ave SE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		01		2025

City  
CaledoniaState  
MIZip Code  
49316-7326

FEC Identification Number

C

Purpose of Disbursement  
Storage Unit Rental

001

Amount of Each Disbursement this Period

103.00

Transaction ID : B58A9C959FCD349DEA25

☒ 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. Sweetgreen**

Mailing Address 221 Pennsylvania Ave SE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		02		2025

City  
WashingtonState  
DCZip Code  
20003-1107

FEC Identification Number

C

Purpose of Disbursement  
Meal

002

Amount of Each Disbursement this Period

16.33

Transaction ID : B29832A752012423F9BA

☒ 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 60 OF 142

<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. Lake City Taphouse**

Mailing Address 181 N Morey Rd

City  
Lake CityState  
MIZip Code  
49651-9417Purpose 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	9		0	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

96.15

Transaction ID : B9DD79167652E49DE9EA

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Flowers By Legacy**

Mailing Address 2975 LA-28

City  
PinevilleState  
LAZip Code  
71360Purpose 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	9		0	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

138.27

Transaction ID : B9DDD56B383A94A3AB62

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. USPS - Caledonia**

Mailing Address 9339 Cherry Valley Ave SE

City  
CaledoniaState  
MIZip Code  
49316-0002Purpose of Disbursement  
Postage stamps

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	9		0	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

234.00

Transaction ID : BF4A953313482437882D

☒ 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 61 OF 142

<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. Bethesda Bagels**

Mailing Address 120 M St SE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		06		2025

City  
WashingtonState  
DCZip Code  
20003-3515

FEC Identification Number

C

Purpose of Disbursement  
Supplies for event

001

Amount of Each Disbursement this Period

389.05

Transaction ID : B17A7555E601248798BE

☒ 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. Bullfeathers**

Mailing Address 410 1st Street SE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		08		2025

City  
WashingtonState  
DCZip Code  
20003-1819

FEC Identification Number

C

Purpose of Disbursement  
Staff Meals

002

Amount of Each Disbursement this Period

232.50

Transaction ID : BD6B1472CE14445CEAD9

☒ 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. McDonald's - Midland**

Mailing Address 1711 S Saginaw Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		08		2025

City  
MidlandState  
MIZip Code  
48640-5633

FEC Identification Number

C

Purpose of Disbursement  
Meals

002

Amount of Each Disbursement this Period

2.85

Transaction ID : BF84C23E424724B8B95A

☒ 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 62 OF 142

<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  
Suite 305City  
ArlingtonState  
VAZip Code  
22209Purpose of Disbursement  
Credit Card Processing Fee

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
10	06	2025

FEC Identification Number

C

Amount of Each Disbursement this Period

1.97

Transaction ID : B70C9829F22E3491D8AD

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Advantage, Inc.**

Mailing Address 9420 Bonita Beach Rd SE

City  
Bonita SpringsState  
FLZip Code  
34135-4515Purpose of Disbursement  
Monthly subscription - App

005

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
10	08	2025

FEC Identification Number

C

Amount of Each Disbursement this Period

865.00

Transaction ID : BB0109B476FF14866A4E

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Isabella Bank**

Mailing Address PO Box 100

City  
Mount PleasantState  
MIZip Code  
48804-0100Purpose of Disbursement  
Bank Service Charge

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
10	08	2025

FEC Identification Number

C

Amount of Each Disbursement this Period

25.00

Transaction ID : B9C1D795021134A3B812

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

891.97

**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 63 OF 142

<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. Sebolt, Andrew, , ,**

Mailing Address 2032 N 128th Ave

City  
HartState  
MIZip Code  
49420-8252Purpose of Disbursement  
In-kind:Space rental for Event

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		08		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

385.00

Transaction ID : BCF8344A5890E4A48B02

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. The Voyageur Company LLC**

Mailing Address 1151 Orchard Circle

City  
Saint PaulState  
MNZip Code  
55118-4146Purpose of Disbursement  
Direct Mailing - In-House

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

003  
Category/  
Type

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		08		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

24641.90

Transaction ID : BD98744239D2E488F903

☐ 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

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

001  
Category/  
Type

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		08		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

35.20

Transaction ID : BAD7802E9626C46898AB

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

25062.10

**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 64 OF 142

<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  
Suite 305City  
ArlingtonState  
VAZip Code  
22209Purpose 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	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

0.20

Transaction ID : BF7A5B343C73A4A54972

☐ 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 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		1	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

10382.50

Transaction ID : B6ECC6FBB7750439DA4F

☐ 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

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	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1961.12

Transaction ID : BC6F1D69A63354492951

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

12343.82

**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 65 OF 142

<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	5		2	0	2	5

City  
San FranciscoState  
CAZip Code  
94102-3033

FEC Identification Number

C

Purpose of Disbursement  
Transportation Expense

002

Amount of Each Disbursement this Period

36.18

Transaction ID : B4AF5F01408854C119D9

☒ 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 1250 H Street NW

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	5		2	0	2	5

City  
WashingtonState  
DCZip Code  
20005

FEC Identification Number

C

Purpose of Disbursement  
Supplies for event

003

Amount of Each Disbursement this Period

15.00

Transaction ID : BF9A4AF8FC0B94E68ADE

☒ 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. American Airlines**

Mailing Address 4333 Amon Carter Blvd

Date of Disbursement

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

City  
Fort WorthState  
TXZip Code  
76155

FEC Identification Number

C

Purpose of Disbursement  
Airfare for event

002

Amount of Each Disbursement this Period

1909.94

Transaction ID : B45B0CB4215884D8787B

☒ 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 66 OF 142

<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. Verizon Wireless**

Mailing Address PO Box 15062

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

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		10		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

466.32

Transaction ID : B6E16CBC31A194252B0D

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Arena, LLC**Mailing Address 1260 E Stringham Ave  
Ste 400City  
Salt Lake CityState  
UTZip Code  
84106-3030Purpose of Disbursement  
Commissions

003

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		14		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

11.13

Transaction ID : B7F162B707E5443549EC

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WinRed Technical Services LLC**Mailing Address 1776 Wilson Blvd  
Suite 305City  
ArlingtonState  
VAZip Code  
22209Purpose of Disbursement  
Credit Card Processing Fee

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		14		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

1.19

Transaction ID : B0B753027761F45A7811

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

478.64

**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 67 OF 142

<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. 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:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		15		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

600.00

Transaction ID : BA04473E917724EAEA9A

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Paychex**Mailing Address 1000 E Warrentville Rd  
Suite 150City  
NapervilleState  
ILZip Code  
60563-3573Purpose of Disbursement  
Wages- itemized

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		15		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

5140.00

Transaction ID : B28E9C15E6D3E4C7D85D

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Wernholm, Fletcher, , ,**

Mailing Address 4701 N Carlson Rd

City  
StantonState  
MIZip Code  
48888-9436Purpose of Disbursement  
Wages

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		15		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

1850.23

Transaction ID : BF02AC9B156CA432B99F

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

5740.00

**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 68 OF 142

<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, Josiah, A., ,**

Mailing Address 4461 Holt Rd

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		15		2025

City  
HoltState  
MIZip Code  
48842-1683

FEC Identification Number

C

Purpose of Disbursement  
Wages

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

264.79

Transaction ID : B3A2A13D01F884BA699F

☒ 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. Maloney, Ashton, M., ,**

Mailing Address 6104 Partridge Ln

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		15		2025

City  
MidlandState  
MIZip Code  
48640-2112

FEC Identification Number

C

Purpose of Disbursement  
Wages

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

997.58

Transaction ID : B3C3B80323B4A4635922

☒ 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. Coon, Zachary, , ,**

Mailing Address 5305 Stone Ridge Dr

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		15		2025

City  
MidlandState  
MIZip Code  
48640-3125

FEC Identification Number

C

Purpose of Disbursement  
Wages

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

810.95

Transaction ID : BA47E66B81F434DDE9E4

☒ 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 69 OF 142

<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

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		15		2025

City  
HoltState  
MIZip Code  
48842-1683

FEC Identification Number

C

Purpose of Disbursement  
Wages

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

338.30

Transaction ID : B5ABCCE35684A48E5BE7

☒ 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. Toly, Joseph, , ,**

Mailing Address 3547 Westhampton Ct NE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		15		2025

City  
Grand RapidsState  
MIZip Code  
49546-1421

FEC Identification Number

C

Purpose of Disbursement  
Wages

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

493.36

Transaction ID : BEF2E0730FCBB4EE48F9

☒ 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. Ryan, Lindsay, , ,**

Mailing Address 7750 Carrleigh Pkwy

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		15		2025

City  
West SpringfieldState  
VAZip Code  
22152-1308

FEC Identification Number

C

Purpose of Disbursement  
Wages

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

384.79

Transaction ID : B46D15B9FFED54E539FE

☒ 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 70 OF 142

<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. Paychex**Mailing Address 1000 E Warrenville Rd  
Suite 150City  
NapervilleState  
ILZip Code  
60563-3573Purpose of Disbursement  
Payroll taxes - 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	0		1	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1593.25

Transaction ID : B1F0715B3FE80403E95C

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. State Of Michigan - SWT**

Mailing Address PO Box 30324

City  
LansingState  
MIZip Code  
48909-7824Purpose of Disbursement  
Withholding tax

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	5

FEC Identification Number

C

Amount of Each Disbursement this Period

277.86

Transaction ID : B297E5739D8D349B4ABA

☒ 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  
Federal Unemployment Tax

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	5

FEC Identification Number

C

Amount of Each Disbursement this Period

27.16

Transaction ID : B24094180ED104A7EA61

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

1593.25

**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 71 OF 142

<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. Paychex Insurance Agency, Inc.**

Mailing Address 225 Kenneth Dr

Date of Disbursement

M M	D D	Y Y Y Y
10	15	2025

City  
RochesterState  
NYZip Code  
14623-4277Purpose of Disbursement  
Workers comp insurance

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

34.80

Transaction ID : B5FC1E5D18D074AA1A7E

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. United States Treasury**

Mailing Address 1500 Pennsylvania Ave NW

Date of Disbursement

M M	D D	Y Y Y Y
10	15	2025

City  
WashingtonState  
DCZip Code  
20220-0001Purpose of Disbursement  
Federal taxes and withholdings

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

1250.71

Transaction ID : B54516A7D79FE49EDA9F

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. QRP, Inc.**

Mailing Address 3000 James Savage Rd

Date of Disbursement

M M	D D	Y Y Y Y
10	15	2025

City  
MidlandState  
MIZip Code  
48642-6533Purpose of Disbursement  
Printing - business cards

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

216.17

Transaction ID : BAA5B085A91074925A1E

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

216.17

**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 72 OF 142

<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. Arena, LLC**Mailing Address 1260 E Stringham Ave  
Ste 400City  
Salt Lake CityState  
UTZip Code  
84106-3030Purpose of Disbursement  
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	0		1	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1.00

Transaction ID : B02113AE063DA42CE827

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Paychex**Mailing Address 1000 E Warrentville Rd  
Suite 150City  
NapervilleState  
ILZip Code  
60563-3573Purpose of Disbursement  
Payroll 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	5

FEC Identification Number

C

Amount of Each Disbursement this Period

211.22

Transaction ID : B2E6B34AC982B43CAA7A

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WinRed Technical Services LLC**Mailing Address 1776 Wilson Blvd  
Suite 305City  
ArlingtonState  
VAZip Code  
22209Purpose 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	5

FEC Identification Number

C

Amount of Each Disbursement this Period

0.39

Transaction ID : B987E67B7738F4F61997

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

212.61

**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 73 OF 142

<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  
Suite 305City  
ArlingtonState  
VAZip Code  
22209Purpose 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	5

FEC Identification Number

C

Amount of Each Disbursement this Period

2.96

Transaction ID : BF9BE24AC188C4489A11

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Moolenaar, Amy, K., ,**

Mailing Address 10201 E Cross Roads Cir

City  
CaledoniaState  
MIZip Code  
49316-9658Purpose 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		2	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

94.80

Transaction ID : BCBD1A30C57B0415D978

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Paychex**Mailing Address 1000 E Warrenville Rd  
Suite 150City  
NapervilleState  
ILZip Code  
60563-3573Purpose of Disbursement  
Payroll 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		2	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

0.25

Transaction ID : B2C9BBEEF007D4B9E97F

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

98.01

**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 74 OF 142

<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	0		2	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1.08

Transaction ID : B8DDF07C1EE154CD38FB

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WinRed Technical Services LLC**Mailing Address 1776 Wilson Blvd  
Suite 305City  
ArlingtonState  
VAZip Code  
22209Purpose 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		2	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1.97

Transaction ID : BA55CD3EE7E8D4EE98D2

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Arena, LLC**Mailing Address 1260 E Stringham Ave  
Ste 400City  
Salt Lake CityState  
UTZip Code  
84106-3030Purpose of Disbursement  
Digital Media Advertising

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	0		2	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : BA6073F8D17184FC6BA2

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

1003.05

**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 75 OF 142

<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. Arena, LLC**Mailing Address 1260 E Stringham Ave  
Ste 400City  
Salt Lake CityState  
UTZip Code  
84106-3030Purpose of Disbursement  
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	0		2	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

0.50

Transaction ID : B2E62F0B3FE394C53B01

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WinRed Technical Services LLC**Mailing Address 1776 Wilson Blvd  
Suite 305City  
ArlingtonState  
VAZip Code  
22209Purpose 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		2	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

10.05

Transaction ID : BF883449A92CC445BB09

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Arena, LLC**Mailing Address 1260 E Stringham Ave  
Ste 400City  
Salt Lake CityState  
UTZip Code  
84106-3030Purpose of Disbursement  
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	0		2	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

35.00

Transaction ID : B20F1CD8CE3F04A949BC

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

45.55

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

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

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<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. WinRed Technical Services LLC**Mailing Address 1776 Wilson Blvd  
Suite 305City  
ArlingtonState  
VAZip Code  
22209Purpose 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		2	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

13.87

Transaction ID : B8F76ED3A7CBF40059F8

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Arena, LLC**Mailing Address 1260 E Stringham Ave  
Ste 400City  
Salt Lake CityState  
UTZip Code  
84106-3030Purpose of Disbursement  
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	0		2	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

0.20

Transaction ID : B4FF8BF0021624F6ABF2

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Scofield, John, D., ,**

Mailing Address 4471 Greenwich Pkwy NW

City  
WashingtonState  
DCZip Code  
20007-2010Purpose of Disbursement  
In-kind:Fundraiser event expense

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	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

200.00

Transaction ID : B56245C32CCC643BFA7D

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

214.07

**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 77 OF 142

<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  
Suite 305City  
ArlingtonState  
VAZip Code  
22209Purpose of Disbursement  
Credit Card Processing Fee

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

4.02

Transaction ID : BCD60974E53214A80BD1

☐ 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

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

483.00

Transaction ID : B54AD7F9AB06E48399BD

☐ 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

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1.08

Transaction ID : BF21833E81D4B488A877

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

488.10

**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 78 OF 142

<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. 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
1	0		2	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

28.74

Transaction ID : B1FD123C7248746F388A

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Arena, LLC**Mailing Address 1260 E Stringham Ave  
Ste 400City  
Salt Lake CityState  
UTZip Code  
84106-3030Purpose of Disbursement  
Commissions

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		2	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1.50

Transaction ID : B36D33CFE6B00464A910

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Kent County GOP - Admin Account**Mailing Address 3260 Eagle Park Dr NE  
#105City  
Grand RapidsState  
MIZip Code  
49525-4569Purpose of Disbursement  
Event Sponsorship

004

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	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1250.00

Transaction ID : B627B59FB49F94923991

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

1280.24

**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 79 OF 142

<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. Wernholm, Fletcher, , ,**

Mailing Address 4701 N Carlson Rd

City  
StantonState  
MIZip Code  
48888-9436Purpose of Disbursement  
Mileage, expense reimbursement - itemized subj to limits

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	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

412.21

Transaction ID : B2BF69EBDFA92455B921

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WinRed Technical Services LLC**Mailing Address 1776 Wilson Blvd  
Suite 305City  
ArlingtonState  
VAZip Code  
22209Purpose 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
1	0		2	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

138.60

Transaction ID : B2E5F6A0FC035419AAA3

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WinRed Technical Services LLC**Mailing Address 1776 Wilson Blvd  
Suite 305City  
ArlingtonState  
VAZip Code  
22209Purpose 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
1	0		3	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1.97

Transaction ID : BA76C24D3401A4CA48BE

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

552.78

**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 80 OF 142

<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. Isabella Bank**

Mailing Address PO Box 100

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		31		2025

City  
Mount PleasantState  
MIZip Code  
48804-0100

FEC Identification Number

C

Purpose of Disbursement  
Bank Service Charge

001

Amount of Each Disbursement this Period

3.00

Transaction ID : BCF3A1669E7274AF2AB5

☐ 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. Isabella Bank**

Mailing Address PO Box 100

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		31		2025

City  
Mount PleasantState  
MIZip Code  
48804-0100

FEC Identification Number

C

Purpose of Disbursement

001

Amount of Each Disbursement this Period

3.00

Transaction ID : BD5356F6B21CD40B0974

☐ 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. QRP, Inc.**

Mailing Address 3000 James Savage Rd

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		31		2025

City  
MidlandState  
MIZip Code  
48642-6533

FEC Identification Number

C

Purpose of Disbursement  
Printing - Door Hangers

004

Amount of Each Disbursement this Period

1301.68

Transaction ID : B4D9B13102A584B99877

☐ 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).....▶

1307.68

**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)

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<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  
Suite 305City  
ArlingtonState  
VAZip Code  
22209Purpose 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		3	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

0.99

Transaction ID : B1308437E44EA4A70AF0

☐ 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	1		0	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

30.00

Transaction ID : B0FAFBFB60D5341539CD

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Arena, LLC**Mailing Address 1260 E Stringham Ave  
Ste 400City  
Salt Lake CityState  
UTZip Code  
84106-3030Purpose of Disbursement  
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	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

0.50

Transaction ID : B2AA97C2DCAC84534B61

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

31.49

**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)

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<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  
Suite 305City  
ArlingtonState  
VAZip Code  
22209Purpose 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	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

0.40

Transaction ID : BF967E2005A7641C1802

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Arena, LLC**Mailing Address 1260 E Stringham Ave  
Ste 400City  
Salt Lake CityState  
UTZip Code  
84106-3030Purpose of Disbursement  
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	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1.00

Transaction ID : B8D0BD700EDD9485BA7E

☐ 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 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	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1273.20

Transaction ID : BBDCE476F739041E4A9D

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

1274.60

**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)

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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. CAC Services**

Mailing Address 913 S Saginaw Rd

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	4		2	0	2	5

City  
MidlandState  
MIZip Code  
48640-4602

FEC Identification Number

C

Purpose of Disbursement  
Accounting Services

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

4000.00

Transaction ID : B1F2FF7BCD55C425BA71

☐ 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
1	1		0	4		2	0	2	5

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

21.03

Transaction ID : BA9E160DD98DC41E7934

☐ 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  
Suite 305

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	4		2	0	2	5

City  
ArlingtonState  
VAZip Code  
22209

FEC Identification Number

C

Purpose of Disbursement  
Credit Card Processing Fee

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

0.39

Transaction ID : B0B692BB2C1904CABAC1

☐ 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).....▶

4021.42

**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)

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<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. Arena, LLC**Mailing Address 1260 E Stringham Ave  
Ste 400City  
Salt Lake CityState  
UTZip Code  
84106-3030Purpose of Disbursement  
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	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

2.02

Transaction ID : BB6946A3C412C4DDE96E

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Award & Sports**

Mailing Address 2120 Bay Street

City  
SaginawState  
MIZip Code  
48602Purpose of Disbursement  
Campaign jackets

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	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

246.61

Transaction ID : B21166F17A3D641A79A5

☐ 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 subject 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	1		0	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

4797.83

Transaction ID : B12726EAF08F54DFF86D

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

5046.46

**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
<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. American Airlines**

Mailing Address 4333 Amon Carter Blvd

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		11		2025

City  
Fort WorthState  
TXZip Code  
76155

FEC Identification Number

C

Purpose of Disbursement  
Airfare fee

002

Amount of Each Disbursement this Period

35.00

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 : BC3C83AFA3EB3466AAD0

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Capitol Hill Club**

Mailing Address 300 1st Street SE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		15		2025

City  
WashingtonState  
DCZip Code  
20003-1801

FEC Identification Number

C

Purpose of Disbursement  
Dues, Meals

001

Amount of Each Disbursement this Period

176.13

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 : B3D5107AC03364DF18C5

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Staples**

Mailing Address 1517 Joe Mann Boulevard

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		16		2025

City  
MidlandState  
MIZip Code  
48642-8902

FEC Identification Number

C

Purpose of Disbursement  
Supplies

001

Amount of Each Disbursement this Period

42.38

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 : BD963D20213BB44D7A5D

☒ 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)

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<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. Shepler's Ferry**

Mailing Address 556 E Central Ave

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		16		2025

City  
Mackinaw CityState  
MIZip Code  
49701-9695

FEC Identification Number

C

Purpose of Disbursement  
Ferry service, parking

002

Amount of Each Disbursement this Period

90.00

Transaction ID : B3F3C94545CE944D9ADF

☒ 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. Circa at Navy Yard**Mailing Address 99 M St SE  
Ste 100

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		16		2025

City  
WashingtonState  
DCZip Code  
20003-3957

FEC Identification Number

C

Purpose of Disbursement  
Catering for event

003

Amount of Each Disbursement this Period

1205.47

Transaction ID : B8B0D874BF3D246C8B37

☒ 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
09		16		2025

City  
Mackinaw CityState  
MIZip Code  
49701-9695

FEC Identification Number

C

Purpose of Disbursement  
Ferry service

002

Amount of Each Disbursement this Period

31.00

Transaction ID : B3FA41A1445E6480FAEB

☒ 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
<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 St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		17		2025

City  
MidlandState  
MIZip Code  
48640-4483

FEC Identification Number

C

Purpose of Disbursement  
Postage

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

2.99

Transaction ID : BC709B4B830454D0E9A0

☒ 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. Sweetgreen**

Mailing Address 221 Pennsylvania Ave SE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		18		2025

City  
WashingtonState  
DCZip Code  
20003-1107

FEC Identification Number

C

Purpose of Disbursement  
Meal

002

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

60.28

Transaction ID : B28623287C35D48429E5

☒ 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. Staples**

Mailing Address 1517 Joe Mann Boulevard

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		18		2025

City  
MidlandState  
MIZip Code  
48642-8902

FEC Identification Number

C

Purpose of Disbursement  
Supplies

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

22.43

Transaction ID : B0E427EA949BE470DBEA

☒ 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)

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<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. Shepler's Ferry**

Mailing Address 556 E Central Ave

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	9		2	0	2	5

City  
Mackinaw CityState  
MIZip Code  
49701-9695

FEC Identification Number

C

Purpose of Disbursement  
Parking

002

Amount of Each Disbursement this Period

51.50

Transaction ID : B15541CADE9124E28835

☒ 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		1	9		2	0	2	5

City  
Mackinac IslandState  
MIZip Code  
49757

FEC Identification Number

C

Purpose of Disbursement  
Meals at conference

002

Amount of Each Disbursement this Period

67.08

Transaction ID : B3386ABD71E044617BCE

☒ 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		1	9		2	0	2	5

City  
Mackinaw CityState  
MIZip Code  
49701-9695

FEC Identification Number

C

Purpose of Disbursement  
Ferry service, parking

002

Amount of Each Disbursement this Period

82.50

Transaction ID : BE1EB05E4DCB546A4AD9

☒ 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 89 OF 142

<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. Shepler's Ferry**

Mailing Address 556 E Central Ave

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	9		2	0	2	5

City  
Mackinaw CityState  
MIZip Code  
49701-9695

FEC Identification Number

C

Purpose of Disbursement  
Parking

002

Amount of Each Disbursement this Period

51.50

Transaction ID : B742AB4A39909413E948

☒ 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. Great Turtle Brewery & Distillery**

Mailing Address 1359 Hoban St

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	9		2	0	2	5

City  
Mackinac IslandState  
MIZip Code  
49757-5151

FEC Identification Number

C

Purpose of Disbursement  
Staff Meeting Meals

002

Amount of Each Disbursement this Period

244.96

Transaction ID : B7BA971229D1A48F0BA6

☒ 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 Grand Hotel**

Mailing Address 286 Grand Avenue

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	0		2	0	2	5

City  
Mackinac IslandState  
MIZip Code  
49757

FEC Identification Number

C

Purpose of Disbursement  
Staff Meeting Meals

002

Amount of Each Disbursement this Period

158.82

Transaction ID : B33A4BE700F674AC3BEC

☒ 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 90 OF 142

<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. The Grand Hotel**

Mailing Address 286 Grand Avenue

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		20		2025

City  
Mackinac IslandState  
MIZip Code  
49757

FEC Identification Number

C

Purpose of Disbursement  
Meal at conference

002

Amount of Each Disbursement this Period

46.88

Transaction ID : B337593F410634B72936

☒ 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. Mustang Lounge**

Mailing Address 1485 Aster St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		21		2025

City  
Mackinac IslandState  
MIZip Code  
49757-5113

FEC Identification Number

C

Purpose of Disbursement  
Staff Meals

002

Amount of Each Disbursement this Period

200.41

Transaction ID : BD47595F4AA2845FB81B

☒ 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 1517 Joe Mann Boulevard

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		22		2025

City  
MidlandState  
MIZip Code  
48642-8902

FEC Identification Number

C

Purpose of Disbursement  
Supplies

001

Amount of Each Disbursement this Period

241.66

Transaction ID : B2C31BBDA8D104B0F962

☒ 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 91 OF 142

<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. Uccello's**

Mailing Address 8256 Broadmoor Ave SE

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	3		2	0	2	5

City  
CaledoniaState  
MIZip Code  
49316-8389

FEC Identification Number

C

Purpose of Disbursement  
Staff Meeting Meals

001

Amount of Each Disbursement this Period

48.26

Transaction ID : BAA3E7A501A7C4F8582C

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

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	2	5

City  
MemphisState  
TNZip Code  
38116-5070

FEC Identification Number

C

Purpose of Disbursement  
Shipping

001

Amount of Each Disbursement this Period

35.20

Transaction ID : BC70A7DB9BBCB4D52BE9

☒ 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. Butcher Block Social**

Mailing Address 9900 Cherry Valley Ave SE

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	7		2	0	2	5

City  
CaledoniaState  
MIZip Code  
49316-9578

FEC Identification Number

C

Purpose of Disbursement  
Staff meeting meals

002

Amount of Each Disbursement this Period

181.44

Transaction ID : BCD5FC28C0ECF47B48D7

☒ 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
<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. Circa at Navy Yard**Mailing Address 99 M St SE  
Ste 100City  
WashingtonState  
DCZip Code  
20003-3957Purpose 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	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

744.68

Transaction ID : B88AD95AA77594F1EA04

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Hawk & Dove**

Mailing Address 329 Pennsylvania Avenue SE

City  
WashingtonState  
DCZip Code  
20003-1148Purpose of Disbursement  
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	9		2	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

77.90

Transaction ID : BAE1000CED9CC477488D

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. We the Pizza**

Mailing Address 305 Pennsylvania Avenue SE

City  
WashingtonState  
DCZip Code  
20003-1148Purpose of Disbursement  
Staff 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	9		3	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

149.93

Transaction ID : B8E1ED5D4F0B04A50A69

☒ 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 93 OF 142

<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
11		05		2025

City  
PalatineState  
ILZip Code  
60094-4014

FEC Identification Number

C

Purpose of Disbursement  
Credit card payment - itemized subject to limit

002

Amount of Each Disbursement this Period

2574.22

Transaction ID : BCE263A088F964419BF7

☐ 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. Sam's Club - Lansing**

Mailing Address 2925 Centre Blvd

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		01		2025

City  
LansingState  
MIZip Code  
48912

FEC Identification Number

C

Purpose of Disbursement  
Parade Supplies

001

Amount of Each Disbursement this Period

1278.72

Transaction ID : B6BAD36A994A0467EA75

☒ 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. Caledonia Storage**

Mailing Address 10330 Cherry Valley Ave SE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		01		2025

City  
CaledoniaState  
MIZip Code  
49316-7326

FEC Identification Number

C

Purpose of Disbursement  
Storage Unit Rental

001

Amount of Each Disbursement this Period

105.00

Transaction ID : B635D78D0078846A3908

☒ 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).....▶

2574.22

**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)

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<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. American Airlines**

Mailing Address 4333 Amon Carter Blvd

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		02		2025

City  
Fort WorthState  
TXZip Code  
76155

FEC Identification Number

C

Purpose of Disbursement  
Airfare

002

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

960.96

Transaction ID : B8752D4E9C15D4EB58BC

☒ 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. Uccello's**

Mailing Address 8256 Broadmoor Ave SE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		09		2025

City  
CaledoniaState  
MIZip Code  
49316-8389

FEC Identification Number

C

Purpose of Disbursement  
Staff Meeting Meals

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

53.14

Transaction ID : BF47A58C3BDE940C2917

☒ 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  
Suite 305

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		05		2025

City  
ArlingtonState  
VAZip Code  
22209

FEC Identification Number

C

Purpose of Disbursement  
Credit Card Processing Fee

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

0.80

Transaction ID : BB34CA0516BB64C9D900

☐ 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).....▶

0.80

**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)

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<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. QRP, Inc.**

Mailing Address 3000 James Savage Rd

Date of Disbursement

M M	D D	Y Y Y Y
11	10	2025

City  
MidlandState  
MIZip Code  
48642-6533

FEC Identification Number

C

Purpose of Disbursement  
Printing - nominating petitions

001

Candidate Name

Amount of Each Disbursement this Period

226.28

Transaction ID : B565625A8B370489FAA2

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**B. Toly, Joseph, , ,**

Mailing Address 3547 Westhampton Ct NE

Date of Disbursement

M M	D D	Y Y Y Y
11	10	2025

City  
Grand RapidsState  
MIZip Code  
49546-1421

FEC Identification Number

C

Purpose of Disbursement  
Mileage Reimbursement

002

Candidate Name

Amount of Each Disbursement this Period

1096.20

Transaction ID : BD19E7300579F4401814

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**C. Verizon Wireless**

Mailing Address PO Box 15062

Date of Disbursement

M M	D D	Y Y Y Y
11	10	2025

City  
AlbanyState  
NYZip Code  
12212-5062

FEC Identification Number

C

Purpose of Disbursement  
Cell phones, data access

001

Candidate Name

Amount of Each Disbursement this Period

480.56

Transaction ID : B0063F6DB2BCE423097C

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

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

1803.04

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

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

PAGE 96 OF 142

<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  
Suite 305City  
ArlingtonState  
VAZip Code  
22209Purpose 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	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

0.20

Transaction ID : B8B27B8A5F1BB4BE0B3F

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Arena, LLC**Mailing Address 1260 E Stringham Ave  
Ste 400City  
Salt Lake CityState  
UTZip Code  
84106-3030Purpose of Disbursement  
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	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

11.00

Transaction ID : B2AF8E3AAE7D04F82A77

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WinRed Technical Services LLC**Mailing Address 1776 Wilson Blvd  
Suite 305City  
ArlingtonState  
VAZip Code  
22209Purpose 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	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

4.33

Transaction ID : B73D9BD0FC60D484692A

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

15.53

**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 142

<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. Isabella Bank**

Mailing Address PO Box 100

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		14		2025

City  
Mount PleasantState  
MIZip Code  
48804-0100

FEC Identification Number

C

Purpose of Disbursement  
Bank Service Charge

001

Amount of Each Disbursement this Period

15.00

Transaction ID : B680D078F07874048BC2

☐ 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. Paychex Insurance Agency, Inc.**

Mailing Address 225 Kenneth Dr

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		14		2025

City  
RochesterState  
NYZip Code  
14623-4277

FEC Identification Number

C

Purpose of Disbursement  
Worker's Comp Insurance

001

Amount of Each Disbursement this Period

29.79

Transaction ID : BAF9593BF1B93497C94A

☐ 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. Paychex**Mailing Address 1000 E Warrenville Rd  
Suite 150

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		14		2025

City  
NapervilleState  
ILZip Code  
60563-3573

FEC Identification Number

C

Purpose of Disbursement  
Payroll Processing Fee

001

Amount of Each Disbursement this Period

146.22

Transaction ID : B015180589FB34F10BD1

☐ 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).....▶

191.01

**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
<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. Paychex**Mailing Address 1000 E Warrenville Rd  
Suite 150City  
NapervilleState  
ILZip Code  
60563-3573Purpose of Disbursement  
Payroll - 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		1	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

5536.28

Transaction ID : B4F0C0609C1144724ACD

☐ 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  
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	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

997.57

Transaction ID : BBA894B5CB7854505B1E

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Coon, Zachary, , ,**

Mailing Address 5305 Stone Ridge Dr

City  
MidlandState  
MIZip Code  
48640-3125Purpose 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	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

810.96

Transaction ID : B71F5F2C8753F42CDA07

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

5536.28

**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
<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. Wernholm, Fletcher, , ,**

Mailing Address 4701 N Carlson Rd

City  
StantonState  
MIZip Code  
48888-9436Purpose 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	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1296.50

Transaction ID : B7C5906F62FE747E3963

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Ryan, Lindsay, , ,**

Mailing Address 7750 Carrleigh Pkwy

City  
West SpringfieldState  
VAZip Code  
22152-1308Purpose 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	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

384.80

Transaction ID : BF8210C4CE12F44D5B8A

☒ 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  
Federal Unemployment Tax

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	5

FEC Identification Number

C

Amount of Each Disbursement this Period

20.73

Transaction ID : B80B6790533134CD59F5

☒ 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)

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<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. United States Treasury**

Mailing Address 1500 Pennsylvania Ave NW

City  
WashingtonState  
DCZip Code  
20220-0001Purpose of Disbursement  
Federal taxes and withholdings

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	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1015.61

Transaction ID : B960E74DA520E4CB8915

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. McNabnay, Grace, K., ,**

Mailing Address 7857 N Moe Rd

City  
MiddletownState  
MIZip Code  
49333-8711Purpose 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	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

243.16

Transaction ID : B62DBFF23CF184B55B28

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. State Of Michigan - SWT**

Mailing Address PO Box 30324

City  
LansingState  
MIZip Code  
48909-7824Purpose of Disbursement  
Withholding tax

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	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

232.26

Transaction ID : B62539A85B536495B982

☒ 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)

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<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, Josiah, A., ,**

Mailing Address 4461 Holt Rd

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		14		2025

City  
HoltState  
MIZip Code  
48842-1683

FEC Identification Number

C

Purpose of Disbursement  
Wages

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

264.80

Transaction ID : B45FF6E2071B64BD2A61

☒ 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. Toly, Joseph, , ,**

Mailing Address 3547 Westhampton Ct NE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		14		2025

City  
Grand RapidsState  
MIZip Code  
49546-1421

FEC Identification Number

C

Purpose of Disbursement  
Wages

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

267.82

Transaction ID : B624557BC814C4B9492E

☒ 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. Aristotle International, Inc.**

Mailing Address PO Box 716045

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		15		2025

City  
PhiladelphiaState  
PAZip Code  
19171-6045

FEC Identification Number

C

Purpose of Disbursement  
Campaign Reporting Software

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

600.00

Transaction ID : B6C502E5E724148BE846

☐ 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).....▶

600.00

**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. Betfair Interactive US LLC**Mailing Address 6701 Center Dr W  
Suite 160City  
Los AngelesState  
CAZip Code  
90045-1558Purpose of Disbursement  
Event Activity Expense

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	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

6260.00

Transaction ID : BB88E9F549F6A4CCA90E

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WinRed Technical Services LLC**Mailing Address 1776 Wilson Blvd  
Suite 305City  
ArlingtonState  
VAZip Code  
22209Purpose 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	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

197.00

Transaction ID : BA81913E89C35417FA78

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Democracy Engine LLC**Mailing Address 416 Florida Ave NW  
Unit 26418City  
WashingtonState  
DCZip Code  
20001-0516Purpose of Disbursement  
Administrative Fee - Conduit

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	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1.27

Transaction ID : B6AC67AD7A3A94DF780E

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

6458.27

**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
<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. 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
1	1		2	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

6.80

Transaction ID : B878D5DD758CE48C9870

☐ 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/  
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		2	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

110.00

Transaction ID : B7FDA58E26A4C49D2B6B

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Arena, LLC**Mailing Address 1260 E Stringham Ave  
Ste 400City  
Salt Lake CityState  
UTZip Code  
84106-3030Purpose of Disbursement  
Commissions

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	1		2	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1.00

Transaction ID : BCB0B0B6543F74177A64

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

117.80

**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)

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<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. WinRed Technical Services LLC**Mailing Address 1776 Wilson Blvd  
Suite 305City  
ArlingtonState  
VAZip Code  
22209Purpose 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		2	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

0.39

Transaction ID : BFE6B99F0247B4EB5A07

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WinRed Technical Services LLC**Mailing Address 1776 Wilson Blvd  
Suite 305City  
ArlingtonState  
VAZip Code  
22209Purpose 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		2	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

0.08

Transaction ID : B91B1431318904553A14

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Arena, LLC**Mailing Address 1260 E Stringham Ave  
Ste 400City  
Salt Lake CityState  
UTZip Code  
84106-3030Purpose of Disbursement  
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		2	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

0.20

Transaction ID : B18A4F52C630D4030BCE

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

0.67

**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
<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  
Suite 305City  
ArlingtonState  
VAZip Code  
22209Purpose 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		2	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

0.08

Transaction ID : BFA07173AE0094848823

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Democracy Engine LLC**Mailing Address 416 Florida Ave NW  
Unit 26418City  
WashingtonState  
DCZip Code  
20001-0516Purpose of Disbursement  
Administrative Fee - Conduit

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	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

0.10

Transaction ID : BF9D6E3F1A52E46D6839

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Democracy Engine LLC**Mailing Address 416 Florida Ave NW  
Unit 26418City  
WashingtonState  
DCZip Code  
20001-0516Purpose of Disbursement  
Administrative Fee - Conduit

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	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

6.30

Transaction ID : BBEFE24CF3E9748C1990

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

6.48

**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. PayPal, Inc.**

Mailing Address 2211 N 1st St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		01		2025

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 : B1CC92529A4C44685A06

☐ 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. Wernholm, Fletcher, , ,**

Mailing Address 4701 N Carlson Rd

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		01		2025

City  
StantonState  
MIZip Code  
48888-9436

FEC Identification Number

C

Purpose of Disbursement  
Mileage reimbursement

002

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

330.00

Transaction ID : B3CF1DA17ABE34E4992D

☐ 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  
Suite 305

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		01		2025

City  
ArlingtonState  
VAZip Code  
22209

FEC Identification Number

C

Purpose of Disbursement  
Credit Card Processing Fee

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

0.03

Transaction ID : B2F53E5B9F8BB46B2B75

☐ 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).....▶

360.03

**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
<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, Josiah, A., ,**

Mailing Address 4461 Holt Rd

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		02		2025

City  
HoltState  
MIZip Code  
48842-1683Purpose of Disbursement  
Mileage Reimbursement

002

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

633.60

Transaction ID : B49A33480F1384E9982D

☐ 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
12		02		2025

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

002

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

58.02

Transaction ID : B190394F1610C4579BD3

☒ Memo Item

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
12		02		2025

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

002

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

543.00

Transaction ID : BFDD5B5C143EC4949BE3

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

1176.60

**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)

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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. WinRed Technical Services LLC**Mailing Address 1776 Wilson Blvd  
Suite 305City  
ArlingtonState  
VAZip Code  
22209Purpose 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	2		0	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1.97

Transaction ID : B2C60D65F6E624E13893

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Newaygo County GOP - Admin Account**

Mailing Address PO Box 23

City  
FremontState  
MIZip Code  
49412-0023Purpose of Disbursement  
Ticket for Holiday 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	2		0	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

100.00

Transaction ID : BEBDD7B381FD24AD281E

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WinRed Technical Services LLC**Mailing Address 1776 Wilson Blvd  
Suite 305City  
ArlingtonState  
VAZip Code  
22209Purpose 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	2		0	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

0.20

Transaction ID : B375CCBB190C54E2BBE0

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

102.17

**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)

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<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

City  
PalatineState  
ILZip Code  
60094-4014Purpose of Disbursement  
Credit card payment - itemized subject to limit

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	2	/	0	4	/	2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

10922.10

Transaction ID : B89A6D8D34BCA4B5B855

☐ 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 meeting 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	/	0	5	/	2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

172.92

Transaction ID : BCA05EC1511C7475DA10

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Verizon Wireless - Midland**

Mailing Address 1504 Joe Mann Blvd

City  
MidlandState  
MIZip Code  
48642-8902Purpose of Disbursement  
Cell phone supplies

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	0	/	1	3	/	2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

220.31

Transaction ID : B0869B5864D02465ABCB

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

10922.10

**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
<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. Sweetgreen**

Mailing Address 221 Pennsylvania Ave SE

City  
WashingtonState  
DCZip Code  
20003-1107Purpose of Disbursement  
Meal

002

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

15.35

Transaction ID : BACD96C19E09D4C8B905

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Amazon**Mailing Address 1200 12th Avenue S  
Suite 1200City  
SeattleState  
WAZip Code  
98144Purpose of Disbursement  
Supplies for event

003

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

49.84

Transaction ID : B2950B1A269BC4EBF9C6

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Capitol Hill Club**

Mailing Address 300 1st Street SE

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

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

459.38

Transaction ID : B39FA9D48B7674C34AF1

☒ 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)

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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. 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	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

351.50

Transaction ID : BA5E13068EAC446F192E

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Ocean Prime - DC**

Mailing Address 1341 G St NW

City  
WashingtonState  
DCZip Code  
20005-3102Purpose 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
1	0		1	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1351.31

Transaction ID : B0DD1191551E6456CA42

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. We the Pizza**

Mailing Address 305 Pennsylvania Avenue SE

City  
WashingtonState  
DCZip Code  
20003-1148Purpose of Disbursement  
Meal

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	5

FEC Identification Number

C

Amount of Each Disbursement this Period

6.77

Transaction ID : B6385BA91D0F9465BBF9

☒ 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)

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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. Sweetgreen**

Mailing Address 221 Pennsylvania Ave SE

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	6		2	0	2	5

City  
WashingtonState  
DCZip Code  
20003-1107

FEC Identification Number

C

Purpose of Disbursement  
Meal

002

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

16.33

Transaction ID : BAE7F8E27C5924C0CA65

☒ 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. Amazon**Mailing Address 1200 12th Avenue S  
Suite 1200

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	6		2	0	2	5

City  
SeattleState  
WAZip Code  
98144

FEC Identification Number

C

Purpose of Disbursement  
Supplies for event

003

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

52.99

Transaction ID : B8C3D58B367FE4A9BB66

☒ 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		1	6		2	0	2	5

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

71.29

Transaction ID : B2830CA8157504592B50

☒ 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 114 OF 142

<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/  
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	5

FEC Identification Number

C

Amount of Each Disbursement this Period

14.95

Transaction ID : B3153FC093FD24785B9F

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Uccello's**

Mailing Address 8256 Broadmoor Ave SE

City  
CaledoniaState  
MIZip Code  
49316-8389Purpose of Disbursement  
Staff 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
1	0		1	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

50.18

Transaction ID : BE2833F88ED84443F87C

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Amazon**Mailing Address 1200 12th Avenue S  
Suite 1200City  
SeattleState  
WAZip Code  
98144Purpose of Disbursement  
Phone supplies

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	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

9.42

Transaction ID : B86880D541EB74DDDAF2

☒ 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)

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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. Verizon Wireless - Midland**

Mailing Address 1504 Joe Mann Blvd

City  
MidlandState  
MIZip Code  
48642-8902Purpose of Disbursement  
Cell phone supplies

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	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

317.99

Transaction ID : BDAA9F46AF08C4DBCAB7

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Jetties**

Mailing Address 1921 I St NW

City  
WashingtonState  
DCZip Code  
20006-2106Purpose 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		2	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

368.68

Transaction ID : B069E8E7BFCFA4C88B90

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Sweetgreen**

Mailing Address 221 Pennsylvania Ave SE

City  
WashingtonState  
DCZip Code  
20003-1107Purpose 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
1	0		2	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

15.35

Transaction ID : BE629593599CE4533B82

☒ 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)

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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. FedEx**Mailing Address 3875 Airways Blvd  
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		2	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

35.13

Transaction ID : BDDD4A798368749F58CB

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Michigan GOP - Admin Account**

Mailing Address 520 Seymour Ave

City  
LansingState  
MIZip Code  
48933-1118Purpose of Disbursement  
Debate event ticket

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	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

51.80

Transaction ID : B85F1248F755E44A984E

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Hawk & Dove**

Mailing Address 329 Pennsylvania Avenue SE

City  
WashingtonState  
DCZip Code  
20003-1148Purpose of Disbursement  
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		2	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

76.25

Transaction ID : BBA9159150767421A8EF

☒ 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 117 OF 142

<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. Sweetgreen**

Mailing Address 221 Pennsylvania Ave SE

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	7		2	0	2	5

City  
WashingtonState  
DCZip Code  
20003-1107

FEC Identification Number

C

Purpose of Disbursement  
Meal

002

Amount of Each Disbursement this Period

16.33

Transaction ID : B4BA184E653AC4998A44

☒ 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. Seatgeek Tickets**

Mailing Address 902 Broadway

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	8		2	0	2	5

City  
New YorkState  
NYZip Code  
10010-6002

FEC Identification Number

C

Purpose of Disbursement  
Event activity tickets

003

Amount of Each Disbursement this Period

3703.40

Transaction ID : BD663F30D200F44FEB16

☒ 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. MBRF, Inc.**

Mailing Address 4319 Argyle Ter Nw

Date of Disbursement

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

City  
WashingtonState  
DCZip Code  
20011-4243

FEC Identification Number

C

Purpose of Disbursement  
Staff Meals

001

Amount of Each Disbursement this Period

180.91

Transaction ID : B283A2B14EE4840A6B3C

☒ 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. Caledonia Storage**

Mailing Address 10330 Cherry Valley Ave SE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		01		2025

City  
CaledoniaState  
MIZip Code  
49316-7326

FEC Identification Number

C

Purpose of Disbursement  
Storage Unit Rental

001

Amount of Each Disbursement this Period

105.00

Transaction ID : BFE522172EA274CF3AC8

☒ 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. Bay Pointe**

Mailing Address 11456 Marsh Rd

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		01		2025

City  
ShelbyvilleState  
MIZip Code  
49344-9627

FEC Identification Number

C

Purpose of Disbursement  
Lodging

002

Amount of Each Disbursement this Period

242.44

Transaction ID : B89C531B54AE54EFC1A

☒ 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. American Airlines**

Mailing Address 4333 Amon Carter Blvd

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		06		2025

City  
Fort WorthState  
TXZip Code  
76155

FEC Identification Number

C

Purpose of Disbursement  
Airfare for events

002

Amount of Each Disbursement this Period

515.49

Transaction ID : B601F29C81E114B1C8F7

☒ 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. Instacart**Mailing Address 330 N Brand Blvd  
Ste 700City  
GlendaleState  
CAZip Code  
91203-2336Purpose of Disbursement  
Event supplies

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	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

206.02

Transaction ID : B797F0D49FC004F68935

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. BLS Limo**

Mailing Address 2401 M St NW

City  
WashingtonState  
DCZip Code  
20037-1408Purpose of Disbursement  
Transportation 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	1		1	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

725.00

Transaction ID : BD3AFF32E0D14F4D8A2

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. WinRed Technical Services LLC**Mailing Address 1776 Wilson Blvd  
Suite 305City  
ArlingtonState  
VAZip Code  
22209Purpose 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	2		0	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

591.00

Transaction ID : B073E324E6AEF450E817

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

591.00

**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. WinRed Technical Services LLC**Mailing Address 1776 Wilson Blvd  
Suite 305City  
ArlingtonState  
VAZip Code  
22209Purpose 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	2		0	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

197.00

Transaction ID : BC185F565D1024253B8A

☐ 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	2		1	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

55.00

Transaction ID : B3409C037DF9E4F7795F

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Arena, LLC**Mailing Address 1260 E Stringham Ave  
Ste 400City  
Salt Lake CityState  
UTZip Code  
84106-3030Purpose of Disbursement  
Digital Media Advertising

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	2		1	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : BD167D4D43F7B4E5AB78

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

1252.00

**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 121 OF 142

<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. Arena, LLC**Mailing Address 1260 E Stringham Ave  
Ste 400City  
Salt Lake CityState  
UTZip Code  
84106-3030Purpose 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		1	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

9000.00

Transaction ID : B3A41C0615C8145BFBC8

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Auto Owners Insurance**

Mailing Address 6101 Anacapri 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	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

375.00

Transaction ID : B0200FFDC153C4462A9B

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Coon, Zachary, , ,**

Mailing Address 5305 Stone Ridge Dr

City  
MidlandState  
MIZip Code  
48640-3125Purpose 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	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

769.80

Transaction ID : BF3DAC1000ADD46C5861

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

10144.80

**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 122 OF 142

<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. Coon, Zachary, , ,**

Mailing Address 5305 Stone Ridge Dr

City  
MidlandState  
MIZip Code  
48640-3125Purpose 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	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

813.60

Transaction ID : B8D41453E3B394619BE1

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. McNabnay, Grace, K., ,**

Mailing Address 7857 N Moe Rd

City  
MiddlevilleState  
MIZip Code  
49333-8711Purpose of Disbursement  
Mileage ReimbursementCategory/  
Type

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

152.10

Transaction ID : BB4E95FDB701843578BD

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Moolenaar, Amy, K., ,**

Mailing Address 10201 E Cross Roads Cir

City  
CaledoniaState  
MIZip Code  
49316-9658Purpose of Disbursement  
Mileage, 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		1	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

130.90

Transaction ID : BF6BD1F0276D04EA7AD1

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

1096.60

**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)

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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. 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	5

FEC Identification Number

C

Amount of Each Disbursement this Period

615.76

Transaction ID : BAFABBF6F43A34D0DBB1

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WinRed Technical Services LLC**Mailing Address 1776 Wilson Blvd  
Suite 305City  
ArlingtonState  
VAZip Code  
22209Purpose 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	2		1	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

0.20

Transaction ID : B14B1A3DBBF024258A3C

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Arena, LLC**Mailing Address 1260 E Stringham Ave  
Ste 400City  
Salt Lake CityState  
UTZip Code  
84106-3030Purpose of Disbursement  
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	2		1	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

4.99

Transaction ID : B69898175F9D24CFF935

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

620.95

**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
<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  
Suite 305City  
ArlingtonState  
VAZip Code  
22209Purpose of Disbursement  
Campaign Merchandise Purchased

004

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		12		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

42.00

Transaction ID : B2D81700D62C64BBBA56

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WinRed Technical Services LLC**Mailing Address 1776 Wilson Blvd  
Suite 305City  
ArlingtonState  
VAZip Code  
22209Purpose of Disbursement  
Credit Card Processing Fee

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		12		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

1.97

Transaction ID : BF987C202C5AC4C3D8EA

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. 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:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		15		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

600.00

Transaction ID : BD1CCB358324B4816BF6

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

643.97

**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)

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<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. Paychex Insurance Agency, Inc.**

Mailing Address 225 Kenneth Dr

City  
RochesterState  
NYZip Code  
14623-4277Purpose of Disbursement  
Worker's Comp Insurance

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		15		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

37.73

Transaction ID : B0EC7A91A5E36411EA91

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Paychex**Mailing Address 1000 E Warrenville Rd  
Suite 150City  
NapervilleState  
ILZip Code  
60563-3573Purpose of Disbursement  
Payroll Processing Fee

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		15		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

124.54

Transaction ID : B627F409C77CC4707A5F

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Paychex**Mailing Address 1000 E Warrenville Rd  
Suite 150City  
NapervilleState  
ILZip Code  
60563-3573Purpose of Disbursement  
Payroll - itemized

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		15		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

4994.73

Transaction ID : B555FFDA8A7464FFAA8C

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

5157.00

**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
<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. Wernholm, Fletcher, , ,**

Mailing Address 4701 N Carlson Rd

City  
StantonState  
MIZip Code  
48888-9436Purpose 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	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1296.50

Transaction ID : B1D5A637574D4416D876

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Coon, Zachary, , ,**

Mailing Address 5305 Stone Ridge Dr

City  
MidlandState  
MIZip Code  
48640-3125Purpose 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	5

FEC Identification Number

C

Amount of Each Disbursement this Period

810.96

Transaction ID : B1B30E455662F405EB6F

☒ 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  
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	5

FEC Identification Number

C

Amount of Each Disbursement this Period

264.80

Transaction ID : B4631A5A843144531B6F

☒ 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)

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<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

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
12	15	2025

FEC Identification Number

C

Amount of Each Disbursement this Period

997.58

Transaction ID : B1233FDE3D7624D0C803

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Ryan, Lindsay, , ,**

Mailing Address 7750 Carrleigh Pkwy

City  
West SpringfieldState  
VAZip Code  
22152-1308Purpose of Disbursement  
Wages

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
12	15	2025

FEC Identification Number

C

Amount of Each Disbursement this Period

384.80

Transaction ID : B49A63DC9D50040ABA5B

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. McNabnay, Grace, K., ,**

Mailing Address 7857 N Moe Rd

City  
MiddlevilleState  
MIZip Code  
49333-8711Purpose of Disbursement  
Wages

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
12	15	2025

FEC Identification Number

C

Amount of Each Disbursement this Period

70.48

Transaction ID : B8BD2D4F3F9174F9E8F3

☒ 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 128 OF 142

<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

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		15		2025

City  
WashingtonState  
DCZip Code  
20220-0001

FEC Identification Number

C

Purpose of Disbursement  
Federal taxes and withholdings

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

939.10

Transaction ID : B046B804FCE034E6B836

☒ 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. United States Treasury**

Mailing Address 1500 Pennsylvania Ave NW

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		15		2025

City  
WashingtonState  
DCZip Code  
20220-0001

FEC Identification Number

C

Purpose of Disbursement  
Federal Unemployment Tax

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

17.73

Transaction ID : BB03D7B26D7064E03963

☒ 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
12		15		2025

City  
LansingState  
MIZip Code  
48909-7824

FEC Identification Number

C

Purpose of Disbursement  
Withholding tax

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

211.01

Transaction ID : BF6C16FD04CC34B9D80D

☒ 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 142

<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. QRP, Inc.**

Mailing Address 3000 James Savage Rd

Date of Disbursement

M M	D D	Y Y Y Y
12	15	2025

City  
MidlandState  
MIZip Code  
48642-6533

FEC Identification Number

C

Purpose of Disbursement  
Printing - nominating petitions

001

Candidate Name

Amount of Each Disbursement this Period

299.88

Transaction ID : BB6451E861F5A4271881

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**B. Big Catapult Marketing**

Mailing Address 9200 Trafalgar Dr SE

Date of Disbursement

M M	D D	Y Y Y Y
12	16	2025

City  
AltoState  
MIZip Code  
49302-8967

FEC Identification Number

C

Purpose of Disbursement  
Christmas cards artwork

001

Candidate Name

Amount of Each Disbursement this Period

243.00

Transaction ID : B42C6392CB0534A91B80

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**C. Isabella Bank**

Mailing Address PO Box 100

Date of Disbursement

M M	D D	Y Y Y Y
12	18	2025

City  
Mount PleasantState  
MIZip Code  
48804-0100

FEC Identification Number

C

Purpose of Disbursement  
Bank Service Charge

001

Candidate Name

Amount of Each Disbursement this Period

15.00

Transaction ID : B1A46A912F79846BBA7B

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

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

557.88

**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 130 OF 142

<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  
Suite 305City  
ArlingtonState  
VAZip Code  
22209Purpose 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	2		1	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

3.15

Transaction ID : B22569456EAA2497E9F9

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WinRed Technical Services LLC**Mailing Address 1776 Wilson Blvd  
Suite 305City  
ArlingtonState  
VAZip Code  
22209Purpose of Disbursement  
Campaign Merchandise Purchased

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	2		1	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

38.00

Transaction ID : BC50070101708482BBB9

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WinRed Technical Services LLC**Mailing Address 1776 Wilson Blvd  
Suite 305City  
ArlingtonState  
VAZip Code  
22209Purpose 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	2		1	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

8.00

Transaction ID : BD6AFCCDDE9CC4B5B82A

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

49.15

**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 131 OF 142

<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  
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	2		2	0	5	

FEC Identification Number

C

Amount of Each Disbursement this Period

195.00

Transaction ID : B67D7FF12825B43E683C

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Democracy Engine LLC**Mailing Address 416 Florida Ave NW  
Unit 26418City  
WashingtonState  
DCZip Code  
20001-0516Purpose of Disbursement  
Administrative Fee - Conduit

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	4		2	0	5	

FEC Identification Number

C

Amount of Each Disbursement this Period

0.05

Transaction ID : B39C083791ED741A2839

☐ 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	2		2	4		2	0	5	

FEC Identification Number

C

Amount of Each Disbursement this Period

1.85

Transaction ID : BC2530DD1312D4311ABB

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

196.90

**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 132 OF 142

<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. Arena, LLC**Mailing Address 1260 E Stringham Ave  
Ste 400City  
Salt Lake CityState  
UTZip Code  
84106-3030Purpose of Disbursement  
Commissions

003

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		26		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

0.20

Transaction ID : B7B856387AC36464F9F5

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WinRed Technical Services LLC**Mailing Address 1776 Wilson Blvd  
Suite 305City  
ArlingtonState  
VAZip Code  
22209Purpose of Disbursement  
Credit Card Processing Fee

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		26		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

0.08

Transaction ID : BD42343B459CA40B2935

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WinRed Technical Services LLC**Mailing Address 1776 Wilson Blvd  
Suite 305City  
ArlingtonState  
VAZip Code  
22209Purpose of Disbursement  
Credit Card Processing Fee

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		26		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

0.08

Transaction ID : B6541426E713A4F5ABB1

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

0.36

**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 142

<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. Isabella Bank**

Mailing Address PO Box 100

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	9		2	0	2	5

City  
Mount PleasantState  
MIZip Code  
48804-0100

FEC Identification Number

C

Purpose of Disbursement  
Bank Service Charge

001

Amount of Each Disbursement this Period

25.00

Transaction ID : B90D145C80FCF46FFB24

☐ 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. Yin & Yang Chef Services, LLC**

Mailing Address 804 S Fancher Ave

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	9		2	0	2	5

City  
Mt PleasantState  
MIZip Code  
48858-3520

FEC Identification Number

C

Purpose of Disbursement  
Catering For Event

003

Amount of Each Disbursement this Period

870.80

Transaction ID : B9C26E090C74042B4BB6

☐ 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. Isabella Bank**

Mailing Address PO Box 100

Date of Disbursement

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

City  
Mount PleasantState  
MIZip Code  
48804-0100

FEC Identification Number

C

Purpose of Disbursement  
Bank Service Charge

001

Amount of Each Disbursement this Period

25.00

Transaction ID : B620AA10657D84CABAAB

☐ 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).....▶

920.80

**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 134 OF 142

<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. Advantage, Inc.**

Mailing Address 9420 Bonita Beach Rd SE

Date of Disbursement

M M	D D	Y Y Y Y
12	31	2025

City  
Bonita SpringsState  
FLZip Code  
34135-4515Purpose of Disbursement  
Monthly subscription - App

005

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

1730.00

Transaction ID : B50B9BCCA95254DAEB9B

☐ Memo Item

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
12	31	2025

City  
HoltState  
MIZip Code  
48842-1683Purpose of Disbursement  
Mileage Reimbursement

002

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

385.50

Transaction ID : BCDA5F15EFF84471BBD1

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Coon, Zachary, , ,**

Mailing Address 5305 Stone Ridge Dr

Date of Disbursement

M M	D D	Y Y Y Y
12	31	2025

City  
MidlandState  
MIZip Code  
48640-3125Purpose of Disbursement  
Mileage Reimbursement

002

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

88.80

Transaction ID : B6F6EA997ED8647E4AA7

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

2204.30

**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 142

<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. Isabella Bank**

Mailing Address PO Box 100

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		31		2025

City  
Mount PleasantState  
MIZip Code  
48804-0100

FEC Identification Number

C

Purpose of Disbursement  
Bank Service Charge

001

Amount of Each Disbursement this Period

3.00

Transaction ID : B18995E087B8A43D8BF9

☐ 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. Isabella Bank**

Mailing Address PO Box 100

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		31		2025

City  
Mount PleasantState  
MIZip Code  
48804-0100

FEC Identification Number

C

Purpose of Disbursement  
Bank Service Charge

001

Amount of Each Disbursement this Period

3.00

Transaction ID : BB9AC41414B4443618A0

☐ 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. Wernholm, Fletcher, , ,**

Mailing Address 4701 N Carlson Rd

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		31		2025

City  
StantonState  
MIZip Code  
48888-9436

FEC Identification Number

C

Purpose of Disbursement  
Mileage reimbursement

002

Amount of Each Disbursement this Period

103.80

Transaction ID : B808C4F7A94E2431E9D1

☐ 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).....▶

109.80

**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 136 OF 142

<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  
Suite 305City  
ArlingtonState  
VAZip Code  
22209Purpose 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	2		3	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

9.85

Transaction ID : B4393A01843B7419D88B

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WinRed Technical Services LLC**Mailing Address 1776 Wilson Blvd  
Suite 305City  
ArlingtonState  
VAZip Code  
22209Purpose 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	2		3	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

2.00

Transaction ID : BDD6C8C03E9694B49949

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WinRed Technical Services LLC**Mailing Address 1776 Wilson Blvd  
Suite 305City  
ArlingtonState  
VAZip Code  
22209Purpose 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	2		3	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

34.48

Transaction ID : B3A490E71A24A4040B7E

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

46.33

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

154506.35



**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 142

<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. Right To Life Of Mich Educational Fund**

Mailing Address 2340 Porter St SW

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	1		2	0	2	5

City  
WyomingState  
MIZip Code  
49519-2257

FEC Identification Number

C

Purpose of Disbursement  
Donation

012

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

50.00

Transaction ID : BE0E42E6C9F864C168B5

☐ 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. Right To Life Of Mich Educational Fund**

Mailing Address 2340 Porter St SW

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	1		2	0	2	5

City  
WyomingState  
MIZip Code  
49519-2257

FEC Identification Number

C

Purpose of Disbursement  
Donation

012

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

100.00

Transaction ID : B324F4AACABF748BDBB9

☐ 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. Right To Life Of Mich Educational Fund**

Mailing Address 2340 Porter St SW

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	1		2	0	2	5

City  
WyomingState  
MIZip Code  
49519-2257

FEC Identification Number

C

Purpose of Disbursement  
Donation

012

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

100.00

Transaction ID : BB4C165C036D945598C4

☐ 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).....▶

250.00

**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 138 OF 142

<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. Right To Life Of Mich Educational Fund**

Mailing Address 2340 Porter St SW

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	1		2	0	2	5

City  
WyomingState  
MIZip Code  
49519-2257

FEC Identification Number

C

Purpose of Disbursement  
Donation

012

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

50.00

Transaction ID : B2303C563378641E0B56

☐ 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. Right To Life Of Mich Educational Fund**

Mailing Address 2340 Porter St SW

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	1		2	0	2	5

City  
WyomingState  
MIZip Code  
49519-2257

FEC Identification Number

C

Purpose of Disbursement  
Donation

012

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

100.00

Transaction ID : B8F8AAE081067417C959

☐ 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. Right To Life Of Mich Educational Fund**

Mailing Address 2340 Porter St SW

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	1		2	0	2	5

City  
WyomingState  
MIZip Code  
49519-2257

FEC Identification Number

C

Purpose of Disbursement  
Donation

012

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

50.00

Transaction ID : BEE38649EE61A48579D8

☐ 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).....▶

200.00

**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 142

<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. Right To Life Of Mich Educational Fund**

Mailing Address 2340 Porter St SW

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	1		2	0	2	5

City  
WyomingState  
MIZip Code  
49519-2257

FEC Identification Number

C

Purpose of Disbursement  
Donation

012

Amount of Each Disbursement this Period

100.00

Transaction ID : BC10F8688B6784F27BB0

☐ 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. 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	5

City  
PalatineState  
ILZip Code  
60094-4014

FEC Identification Number

C

Purpose of Disbursement  
Charitable Contribution

012

Amount of Each Disbursement this Period

310.50

Transaction ID : B9AF440FFA0C64478805

☐ 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. Midland County 4H Small Animal Auction**

Mailing Address P O Box 231

Date of Disbursement

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

City  
MidlandState  
MIZip Code  
48640-0231

FEC Identification Number

C

Purpose of Disbursement  
4-H Livestock Auction

012

Amount of Each Disbursement this Period

310.50

Transaction ID : B0425A9CD7308473A80C

☒ Memo Item

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

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

410.50

**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 140 OF 142

<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. Right To Life Of Mich Educational Fund**

Mailing Address 2340 Porter St SW

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	2	/	2	0	2	5

City  
WyomingState  
MIZip Code  
49519-2257

FEC Identification Number

C

Purpose of Disbursement  
Donation

012

Amount of Each Disbursement this Period

50.00

Transaction ID : BA0D993B58E65475EB40

☐ 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. BERGMAN FOR CONGRESS**Mailing Address 3585 Bunker Hill Rd  
Unit 434

Date of Disbursement

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

City  
AcmeState  
MIZip Code  
49610

FEC Identification Number

C C00614214

Purpose of Disbursement  
Contribution to Federal Candidate Committee

011

Amount of Each Disbursement this Period

1025.00

Transaction ID : BBE35E0CB4E3349FDB39

☐ Memo ItemCandidate Name  
Bergman, John, , ,Category/  
Type

Office Sought:

<input checked="" type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: MI

District: 01

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
		/			/				

City

State

Zip Code

FEC Identification Number

C

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

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

1075.00

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

1935.50

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 141 OF 142

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

310.50

Transaction ID : DBCA02351ECC14B7A80B

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 as of 9/11/25 less  
Midland County Sm Animal Sale Donation

Mailing Address PO Box 94014

City  
PalatineState  
ILZip Code  
60094-4014

Outstanding Balance Beginning This Period

28278.38

Transaction ID : DE2BDCDF2C5254BE0A40

Amount Incurred This Period

0.00

Payment This Period

28278.38

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 charge

Mailing Address PO Box 94014

City  
PalatineState  
ILZip Code  
60094-4014

Outstanding Balance Beginning This Period

4797.83

Transaction ID : D7E5A16A0082B463AAF7

Amount Incurred This Period

0.00

Payment This Period

4797.83

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 142 OF 142

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 : DE580062AC1A844798ED

Amount Incurred This Period

16193.71

Payment This Period

0.00

Outstanding Balance at Close of This Period

16193.71

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

0.00

Transaction ID : D6AFD09BC93744D4F8A1

Amount Incurred This Period

9627.10

Payment This Period

0.00

Outstanding Balance at Close of This Period

9627.10

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) .....

25820.81

2) **TOTALS** This Period (last page this line number only) .....

25820.81

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) .....

25820.81