

FEC  
FORM 3

REPORT OF RECEIPTS  
AND DISBURSEMENTS  
For An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

Moolenaar for Congress

ADDRESS (number and street)

5915 Eastman Avenue

Suite 100



Check if different  
than previously  
reported. (ACC)

Midland

MI

48640-6824

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00561530

3. IS THIS  
REPORT



NEW  
(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

MI

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

Bos, Kellie, M, Mrs.,

Signature of Treasurer

Bos, Kellie, M, Mrs.,

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: 10 / 17 / 2024 To: 11 / 25 / 2024

|                                                                                                           | COLUMN A<br>This Period | COLUMN B<br>Election Cycle-to-Date |
|-----------------------------------------------------------------------------------------------------------|-------------------------|------------------------------------|
| 6. Net Contributions (other than loans)                                                                   |                         |                                    |
| (a) Total Contributions<br>(other than loans) (from Line 11(e)) ....                                      | 38434.37                | 2013508.72                         |
| (b) Total Contribution Refunds<br>(from Line 20(d)) .....                                                 | 0.00                    | 5827.70                            |
| (c) Net Contributions (other than loans)<br>(subtract Line 6(b) from Line 6(a)) .....                     | 38434.37                | 2007681.02                         |
| 7. Net Operating Expenditures                                                                             |                         |                                    |
| (a) Total Operating Expenditures<br>(from Line 17) .....                                                  | 102081.61               | 1283022.49                         |
| (b) Total Offsets to Operating<br>Expenditures (from Line 14) .....                                       | 0.00                    | 5632.80                            |
| (c) Net Operating Expenditures<br>(subtract Line 7(b) from Line 7(a)) .....                               | 102081.61               | 1277389.69                         |
| 8. Cash on Hand at Close of<br>Reporting Period (from Line 27) .....                                      | 1300369.21              |                                    |
| 9. Debts and Obligations Owed TO<br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | 0.00                    |                                    |
| 10. Debts and Obligations Owed BY<br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) ..... | 11268.75                |                                    |

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

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 07/05)

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

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

Write or Type Committee Name

Moolenaar for Congress

Report Covering the Period: From: 10 / 17 / 2024 To: 11 / 25 / 2024

I. RECEIPTS

| COLUMN A<br>Total this Period                              | COLUMN B<br>Election Cycle Total as of<br>11 / 05 / 2024<br>(date of general election) | COLUMN C<br>Total for<br>11 / 06 / 2024<br>(date after general election)<br><br>through<br>11 / 25 / 2024<br>(last day of reporting period) |
|------------------------------------------------------------|----------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------|
| 11. CONTRIBUTIONS<br>(other than loans) FROM:              |                                                                                        |                                                                                                                                             |
| (a) Individuals/Persons Other than<br>Political Committees |                                                                                        |                                                                                                                                             |
| (i) Itemized (use Schedule A)                              |                                                                                        |                                                                                                                                             |
| 16219.89                                                   | 1100589.64                                                                             | 0.00                                                                                                                                        |
| (ii) Unitemized                                            |                                                                                        |                                                                                                                                             |
| 1614.48                                                    | 47644.32                                                                               | 186.51                                                                                                                                      |
| (iii) Total of contributions from individuals              |                                                                                        |                                                                                                                                             |
| 17834.37                                                   | 1148233.96                                                                             | 186.51                                                                                                                                      |
| (b) Political Party Committees                             |                                                                                        |                                                                                                                                             |
| 600.00                                                     | 600.00                                                                                 | 0.00                                                                                                                                        |
| (c) Other Political Committees                             |                                                                                        |                                                                                                                                             |
| 20000.00                                                   | 864674.76                                                                              | 0.00                                                                                                                                        |

**POST-ELECTION DETAILED SUMMARY PAGE**

## Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

| <b>COLUMN A</b><br><b>Total this Period</b>                                         | <b>COLUMN B</b><br><b>Election Cycle Total as of *</b><br>(date of general election)<br>(* See page 5 for date) | <b>COLUMN C</b><br><b>Total for *</b> (date after general election)<br><b>through *</b> (last day of reporting period)<br>(* See page 5 for dates) |
|-------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|
| (d) The Candidate                                                                   |                                                                                                                 |                                                                                                                                                    |
| 0.00                                                                                | 0.00                                                                                                            | 0.00                                                                                                                                               |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d)) |                                                                                                                 |                                                                                                                                                    |
| 38434.37                                                                            | 2013508.72                                                                                                      | 186.51                                                                                                                                             |
| 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES                                      |                                                                                                                 |                                                                                                                                                    |
| 0.00                                                                                | 77215.00                                                                                                        | 0.00                                                                                                                                               |
| 13. LOANS:                                                                          |                                                                                                                 |                                                                                                                                                    |
| (a) Made or Guaranteed by the Candidate                                             |                                                                                                                 |                                                                                                                                                    |
| 0.00                                                                                | 0.00                                                                                                            | 0.00                                                                                                                                               |
| (b) All Other Loans                                                                 |                                                                                                                 |                                                                                                                                                    |
| 0.00                                                                                | 0.00                                                                                                            | 0.00                                                                                                                                               |
| (c) TOTAL LOANS (add Lines 13(a) and (b))                                           |                                                                                                                 |                                                                                                                                                    |
| 0.00                                                                                | 0.00                                                                                                            | 0.00                                                                                                                                               |
| 14. OFFSETS TO OPERATING EXPENDITURES (Refunds, rebates, etc.)                      |                                                                                                                 |                                                                                                                                                    |
| 0.00                                                                                | 5632.80                                                                                                         | 0.00                                                                                                                                               |
| 15. OTHER RECEIPTS (Dividends, Interest, etc.)                                      |                                                                                                                 |                                                                                                                                                    |
| 2565.15                                                                             | 30357.90                                                                                                        | 0.00                                                                                                                                               |
| 16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)                                |                                                                                                                 |                                                                                                                                                    |
| 40999.52                                                                            | 2126714.42                                                                                                      | 186.51                                                                                                                                             |

POST-ELECTION DETAILED SUMMARY PAGE  
Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

Write or Type Committee Name

Moolenaar for Congress

Report Covering the Period: From: 10 / 17 / 2024 To: 11 / 25 / 2024

II. DISBURSEMENTS

| COLUMN A<br>Total this Period                           | COLUMN B<br>Election Cycle Total as of *<br>(date of general election)<br>(* See page 5 for date) | COLUMN C<br>Total for * (date after general election)<br>through * (last day of reporting period)<br>(* See page 5 for dates) |
|---------------------------------------------------------|---------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------|
| 17. OPERATING EXPENDITURES                              |                                                                                                   |                                                                                                                               |
| 102081.61                                               | 1283022.49                                                                                        | 54786.98                                                                                                                      |
| 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES            |                                                                                                   |                                                                                                                               |
| 0.00                                                    | 0.00                                                                                              | 0.00                                                                                                                          |
| 19. LOAN REPAYMENTS:                                    |                                                                                                   |                                                                                                                               |
| (a) Of Loans Made or Guaranteed by the Candidate        |                                                                                                   |                                                                                                                               |
| 0.00                                                    | 0.00                                                                                              | 0.00                                                                                                                          |
| (b) Of All Other Loans                                  |                                                                                                   |                                                                                                                               |
| 0.00                                                    | 0.00                                                                                              | 0.00                                                                                                                          |
| (c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))   |                                                                                                   |                                                                                                                               |
| 0.00                                                    | 0.00                                                                                              | 0.00                                                                                                                          |
| 20. REFUNDS OF CONTRIBUTIONS TO:                        |                                                                                                   |                                                                                                                               |
| (a) Individuals/Persons Other Than Political Committees |                                                                                                   |                                                                                                                               |
| 0.00                                                    | 5827.70                                                                                           | 0.00                                                                                                                          |
| (b) Political Party Committees                          |                                                                                                   |                                                                                                                               |
| 0.00                                                    | 0.00                                                                                              | 0.00                                                                                                                          |

**POST-ELECTION DETAILED SUMMARY PAGE**

## Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

| <b>COLUMN A</b><br><b>Total this Period</b> | <b>COLUMN B</b><br><b>Election Cycle Total as of *</b><br>(date of general election)<br>(* See page 5 for date) | <b>COLUMN C</b><br><b>Total for *</b> (date after general election)<br><b>through *</b> (last day of reporting period)<br>(* See page 5 for dates) |
|---------------------------------------------|-----------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|
|---------------------------------------------|-----------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|

(c) Other Political Committees (such as PACs)

|      |      |      |
|------|------|------|
| 0.00 | 0.00 | 0.00 |
|------|------|------|

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

|      |         |      |
|------|---------|------|
| 0.00 | 5827.70 | 0.00 |
|------|---------|------|

**21. OTHER DISBURSEMENTS**

|         |          |        |
|---------|----------|--------|
| 3675.00 | 72979.38 | 350.00 |
|---------|----------|--------|

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

|           |            |          |
|-----------|------------|----------|
| 105756.61 | 1361829.57 | 55136.98 |
|-----------|------------|----------|

**III. NET CONTRIBUTIONS (OTHER THAN LOANS)**

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

|          |            |        |
|----------|------------|--------|
| 38434.37 | 2007681.02 | 186.51 |
|----------|------------|--------|

**IV. NET OPERATING EXPENDITURES**

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

|           |            |          |
|-----------|------------|----------|
| 102081.61 | 1277389.69 | 54786.98 |
|-----------|------------|----------|

**V. CASH SUMMARY**

|                                                                               |            |
|-------------------------------------------------------------------------------|------------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD .....                       | 1365126.30 |
| 24. TOTAL RECIEPTS THIS PERIOD (from Line 16) .....                           | 40999.52   |
| 25. SUBTOTAL (add Line 23 and Line 24) .....                                  | 1406125.82 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22) .....                      | 105756.61  |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25) | 1300369.21 |

**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)

Foster, Ardis, , ,

A. Mailing Address PO Box 1645

City  
MidlandState  
MIZip Code  
48641-1645FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Robinson Industries, Inc.Occupation  
IT MANAGER

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 17 2024

Transaction ID : AA264CD825DD74D05BEB

Amount of Each Receipt this Period

15.00

☐ Memo Item

Earmarked (Non-Directed) through WinRed

Full Name (Last, First, Middle Initial)

WinRed

B. Mailing Address PO Box 9891

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

C C00694323

Name of Employer

Occupation

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

268118.71

Date of Receipt

M M / D D / Y Y Y Y Y  
10 21 2024

Transaction ID : A0F40D4E7272E4504859

Amount of Each Receipt this Period

15.00

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not  
affected.

Full Name (Last, First, Middle Initial)

Foster, Ardis, , ,

C. Mailing Address PO Box 1645

City  
MidlandState  
MIZip Code  
48641-1645FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Robinson Industries, Inc.Occupation  
IT MANAGER

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 17 2024

Transaction ID : A3BDA3E057C5342DA8A7

Amount of Each Receipt this Period

300.00

☐ Memo Item

Earmarked (Non-Directed) through WinRed

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

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

315.00

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

PAGE 8 OF 88

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

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

WinRed

A.

Mailing Address PO Box 9891

City

Arlington

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2024

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

Election Cycle-to-Date ▼

268118.71

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 10  |   | 21  |   | 2024        |

Transaction ID : A5B6FF2E0234A404AAB6

Amount of Each Receipt this Period

300.00

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not  
affected.

B.

Full Name (Last, First, Middle Initial)

Yost, Arlene, Poet, ,

Mailing Address 5850 E Gladwin Rd

City

Harrison

State

MI

Zip Code

48625-7349

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Jay's Sporting Goods

Accountant

Receipt For: 2024

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

Election Cycle-to-Date ▼

350.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 10  |   | 18  |   | 2024        |

Transaction ID : A5BADA67754F940468FC

Amount of Each Receipt this Period

100.00

☐ Memo Item

Earmarked (Non-Directed) through WinRed

C.

Full Name (Last, First, Middle Initial)

WinRed

Mailing Address PO Box 9891

City

Arlington

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2024

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

Election Cycle-to-Date ▼

268118.71

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 10  |   | 22  |   | 2024        |

Transaction ID : A6CB1CF8BAA7B4570BCF

Amount of Each Receipt this Period

100.00

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not  
affected.

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

100.00

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 88

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

Nicholson, John, R., ,

A.

Mailing Address 900 Cook Rd

City

Grosse Pointe Wood

State

MI

Zip Code

48236

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Abbott Nicholson PCOccupation  
Attorney

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

1010.20

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 1 | 9 |   | 2 | 0 | 2 | 4 |

Transaction ID : A2B17409478B645198AF

Amount of Each Receipt this Period

100.00

☐ Memo Item

Earmarked (Non-Directed) through WinRed

B.

Full Name (Last, First, Middle Initial)

WinRed

Mailing Address PO Box 9891

City

Arlington

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

268118.71

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 1 | 9 |   | 2 | 0 | 2 | 4 |

Transaction ID : A0258EFCB771E425DAE0

Amount of Each Receipt this Period

100.00

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not affected.

C.

Full Name (Last, First, Middle Initial)

Drake, Michael, J., ,

Mailing Address 11127 Vitaz Rd

City

Brethren

State

MI

Zip Code

49619-9776

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NoneOccupation  
Retired

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

297.10

Date of Receipt

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

Transaction ID : AB5E135B223C648D7BDB

Amount of Each Receipt this Period

50.00

☐ Memo Item

Earmarked (Non-Directed) through WinRed

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

150.00

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

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

PAGE 10 OF 88

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

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

WinRed

A.

Mailing Address PO Box 9891

City

Arlington

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

268118.71

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 24 |   |   | 2024 |   |   |   |

Transaction ID : A9602A43BE2E740EF869

Amount of Each Receipt this Period

50.00

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not  
affected.

B.

Full Name (Last, First, Middle Initial)

Mooth, Todd, M., ,

Mailing Address 3483 Michigan 37

City

Mesick

State

MI

Zip Code

49668

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

NIPSCO

Engineer

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

275.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 21 |   |   | 2024 |   |   |   |

Transaction ID : A02673FAEB59A4A4B87D

Amount of Each Receipt this Period

25.00

☐ Memo Item

Earmarked (Non-Directed) through WinRed

C.

Full Name (Last, First, Middle Initial)

WinRed

Mailing Address PO Box 9891

City

Arlington

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

268118.71

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 21 |   |   | 2024 |   |   |   |

Transaction ID : A95A6C1CE61F140A79B1

Amount of Each Receipt this Period

25.00

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not  
affected.

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

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

25.00

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

PAGE 11 OF 88

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

Below, Gabe, , ,

A.

Mailing Address 712 E 5TH STREET

City

Port Clinton

State

OH

Zip Code

43452

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LNE Group

Occupation

DIRECTOR

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

500.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 23 |   |   | 2024 |   |   |   |

Transaction ID : A415515151E6546748E6

Amount of Each Receipt this Period

500.00

☐ Memo Item

Earmarked (Non-Directed) through WinRed

B.

Full Name (Last, First, Middle Initial)

WinRed

Mailing Address PO Box 9891

City

Arlington

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

268118.71

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 25 |   |   | 2024 |   |   |   |

Transaction ID : A0796EA0C9309487A9AA

Amount of Each Receipt this Period

500.00

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not affected.

C.

Full Name (Last, First, Middle Initial)

Drake, Michael, J., ,

Mailing Address 11127 Vitaz Rd

City

Brethren

State

MI

Zip Code

49619-9776

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

332.10

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 23 |   |   | 2024 |   |   |   |

Transaction ID : A95FE2A99AAF44961A81

Amount of Each Receipt this Period

35.00

☐ Memo Item

Earmarked (Non-Directed) through WinRed

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

535.00

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 12 OF 88

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

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

WinRed

A.

Mailing Address PO Box 9891

City

Arlington

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

268118.71

Date of Receipt

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

Transaction ID : AB16B11213A004A1C87F

Amount of Each Receipt this Period

35.00

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not affected.

B.

Full Name (Last, First, Middle Initial)

Nance, Christopher, D., ,

Mailing Address 450 Mid Oak Dr

City

Muskegon

State

MI

Zip Code

49445-2726

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

None

Retired

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : AEA1EEB1E80F340888E6

Amount of Each Receipt this Period

250.00

☐ Memo Item

C.

Full Name (Last, First, Middle Initial)

Peterson, Daryl, K., ,

Mailing Address 6115 W Olmstead Rd

City

Ludington

State

MI

Zip Code

49431-9754

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Bushel Basket Orchard, Inc.

Fruit Grower

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : ADD0CF929D01C4628A59

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

750.00

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

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

PAGE 13 OF 88

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

Yatooma, Christopher, J., ,

A. Mailing Address 1615 S Telegraph Rd

City

Bloomfield Hills

State

MI

Zip Code

48302-0065

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MSY Capital

Occupation

Member

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

4300.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 25 |   |   | 2024 |   |   |   |

Transaction ID : A362AE0061B124292859

Amount of Each Receipt this Period

3300.00

☐ Memo Item

Earmarked (Non-Directed) through WinRed

Full Name (Last, First, Middle Initial)

WinRed

B. Mailing Address PO Box 9891

City

Arlington

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

268118.71

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 25 |   |   | 2024 |   |   |   |

Transaction ID : A098533C3E798498FBB5

Amount of Each Receipt this Period

3300.00

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not affected.

Full Name (Last, First, Middle Initial)

Ashbrook, Kenneth, T., ,

C. Mailing Address 1100 Schavey Rd

City

Dewitt

State

MI

Zip Code

48820-7739

FEC ID number of contributing  
federal political committee.

C

Name of Employer

K.T.A. &amp; S. LLC

Occupation

Consultant

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

240.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 26 |   |   | 2024 |   |   |   |

Transaction ID : A5C4E84AEA0E74F8AA94

Amount of Each Receipt this Period

10.00

☐ Memo Item

Earmarked (Non-Directed) through WinRed

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

3310.00

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 14 OF 88

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

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

WinRed

A.

Mailing Address PO Box 9891

City

Arlington

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

268118.71

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 28 |   |   | 2024 |   |   |   |

Transaction ID : A89409C5BB9954C5CBB1

Amount of Each Receipt this Period

10.00

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not affected.

B.

Full Name (Last, First, Middle Initial)

Nicholson, John, R., ,

Mailing Address 900 Cook Rd

City

Grosse Pointe Wood

State

MI

Zip Code

48236

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Abbott Nicholson PC

Attorney

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

1060.20

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 27 |   |   | 2024 |   |   |   |

Transaction ID : AF7E66BA048BB4FFCA47

Amount of Each Receipt this Period

50.00

☐ Memo Item

Earmarked (Non-Directed) through WinRed

C.

Full Name (Last, First, Middle Initial)

WinRed

Mailing Address PO Box 9891

City

Arlington

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

268118.71

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 28 |   |   | 2024 |   |   |   |

Transaction ID : A4A2FBD893E7D41C88A1

Amount of Each Receipt this Period

50.00

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not affected.

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

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

50.00

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

PAGE 15 OF 88

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

Lambert, Ryan, , ,

A.

Mailing Address 1163 Chain Bridge Road

City

Mc Lean

State

VA

Zip Code

22101

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

3300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 28 2024

Transaction ID : A61E3C1487F494183A1C

Amount of Each Receipt this Period

3300.00

☐ Memo Item

Earmarked (Non-Directed) through WinRed

B.

Full Name (Last, First, Middle Initial)

WinRed

Mailing Address PO Box 9891

City

Arlington

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

268118.71

Date of Receipt

M M / D D / Y Y Y Y Y  
10 28 2024

Transaction ID : A8E290B73992444C8A6B

Amount of Each Receipt this Period

3300.00

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not  
affected.

C.

Full Name (Last, First, Middle Initial)

Tiffany, Lyle, B., ,

Mailing Address 2267 Pontiac Trl

City

Ann Arbor

State

MI

Zip Code

48105-1224

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 28 2024

Transaction ID : A125998A977694B2D9DF

Amount of Each Receipt this Period

50.00

☐ Memo Item

Earmarked (Non-Directed) through WinRed

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

3350.00

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 16 OF 88

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

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

WinRed

A.

Mailing Address PO Box 9891

City

Arlington

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

268118.71

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 10  |   | 28  |   | 2024        |

Transaction ID : AD99DD28664D44BE3B89

Amount of Each Receipt this Period

50.00

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not  
affected.

B.

Full Name (Last, First, Middle Initial)

Kimbell, Jeffrey, J., ,

Mailing Address 401 9th St NW  
Ste 920

City

Washington

State

DC

Zip Code

20004-2194

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self-Employed

Health Care Consultant

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

3000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 10  |   | 29  |   | 2024        |

Transaction ID : AEEE9D46C43804CB3B51

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Earmarked (Non-Directed) through WinRed

C.

Full Name (Last, First, Middle Initial)

WinRed

Mailing Address PO Box 9891

City

Arlington

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

268118.71

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 10  |   | 29  |   | 2024        |

Transaction ID : A213B7B2619484FA391F

Amount of Each Receipt this Period

1500.00

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not  
affected.

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

1500.00

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

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

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

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

Drake, Michael, J., ,

A. Mailing Address 11127 Vitaz Rd

City

Brethren

State

MI

Zip Code

49619-9776

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

387.10

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 30 |   |   | 2024 |   |   |   |

Transaction ID : A28FCB5143B4E4BA385E

Amount of Each Receipt this Period

5.00

☐ Memo Item

Earmarked (Non-Directed) through WinRed

Full Name (Last, First, Middle Initial)

WinRed

B. Mailing Address PO Box 9891

City

Arlington

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

268118.71

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 11 |   |   | 01 |   |   | 2024 |   |   |   |

Transaction ID : A9517CD4E9E444274871

Amount of Each Receipt this Period

5.00

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not affected.

Full Name (Last, First, Middle Initial)

Drake, Michael, J., ,

C. Mailing Address 11127 Vitaz Rd

City

Brethren

State

MI

Zip Code

49619-9776

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

387.10

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 30 |   |   | 2024 |   |   |   |

Transaction ID : AF4311E552C454899938

Amount of Each Receipt this Period

50.00

☐ Memo Item

Earmarked (Non-Directed) through WinRed

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

55.00

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

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

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

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

WinRed

A.

Mailing Address PO Box 9891

City

Arlington

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2024

☐ Primary☒ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

268118.71

Date of Receipt

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

Transaction ID : A63E96C7807E742E6B7E

Amount of Each Receipt this Period

50.00

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not  
affected.

B.

Full Name (Last, First, Middle Initial)

Manion, Ann, E., ,

Mailing Address 635 N Ball St

City

Owosso

State

MI

Zip Code

48867-2309

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

First National Bank of America

Administrative Assistant

Receipt For: 2024

☐ Primary☒ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

281.74

Date of Receipt

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

Transaction ID : A2816FBE457264C1C8DD

Amount of Each Receipt this Period

15.00

☐ Memo Item

Earmarked (Non-Directed) through WinRed

C.

Full Name (Last, First, Middle Initial)

WinRed

Mailing Address PO Box 9891

City

Arlington

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2024

☐ Primary☒ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

268118.71

Date of Receipt

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

Transaction ID : AB73E1465BA034D8C9C3

Amount of Each Receipt this Period

15.00

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not  
affected.

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

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

15.00

**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)

Walls, Kristie, , ,

A.

Mailing Address 6188 Belding Rd

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

C

Name of Employer  
RetiredOccupation  
Retired

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

214.42

Date of Receipt

M M / D D / Y Y Y Y  
10 30 2024

Transaction ID : ACE8D346E40C942759C5

Amount of Each Receipt this Period

21.07

☐ Memo Item

Earmarked (Non-Directed) through WinRed

B.

Full Name (Last, First, Middle Initial)

WinRed

Mailing Address PO Box 9891

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

C C00694323

Name of Employer

Occupation

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

268118.71

Date of Receipt

M M / D D / Y Y Y Y  
11 04 2024

Transaction ID : AFB2E1C812CF4439A899

Amount of Each Receipt this Period

21.07

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not affected.

C.

Full Name (Last, First, Middle Initial)

Butcher, James, C., ,

Mailing Address 5907 Tennis Ct

City  
MidlandState  
MIZip Code  
48642-7007FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-EmployedOccupation  
Consultant

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
10 31 2024

Transaction ID : A81FBAB9F864F421E849

Amount of Each Receipt this Period

250.00

☐ Memo Item

271.07

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

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

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

PAGE 20 OF 88

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

Drake, Michael, J., ,

A.

Mailing Address 11127 Vitaz Rd

City

Brethren

State

MI

Zip Code

49619-9776

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

395.86

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 31 |   |   | 2024 |   |   |   |

Transaction ID : A86B3D46E0A9C47F5AEE

Amount of Each Receipt this Period

8.76

☐ Memo Item

Earmarked (Non-Directed) through WinRed

B.

Full Name (Last, First, Middle Initial)

WinRed

Mailing Address PO Box 9891

City

Arlington

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

268118.71

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 11 |   |   | 04 |   |   | 2024 |   |   |   |

Transaction ID : A0E54673E55AB472BA88

Amount of Each Receipt this Period

8.76

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not affected.

C.

Full Name (Last, First, Middle Initial)

Foster, Ardis, , ,

Mailing Address PO Box 1645

City

Midland

State

MI

Zip Code

48641-1645

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Robinson Industries, Inc.

Occupation

IT MANAGER

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

615.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 31 |   |   | 2024 |   |   |   |

Transaction ID : A7152B6C4D3F84A82871

Amount of Each Receipt this Period

300.00

☐ Memo Item

Earmarked (Non-Directed) through WinRed

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

308.76

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

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

PAGE 21 OF 88

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

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

WinRed

A.

Mailing Address PO Box 9891

City

Arlington

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

268118.71

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 11 |   |   | 04 |   |   | 2024 |   |   |   |

Transaction ID : AEF022D6C2E124863A61

Amount of Each Receipt this Period

300.00

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not affected.

B.

Full Name (Last, First, Middle Initial)

Leprino, Terry, L., ,

Mailing Address 1830 W 38th Ave

City

Denver

State

CO

Zip Code

80211-2225

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Leprino Foods Company

Board Director

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

1500.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 31 |   |   | 2024 |   |   |   |

Transaction ID : AC7CCF197B83540AC84B

Amount of Each Receipt this Period

1500.00

☐ Memo Item

C.

Full Name (Last, First, Middle Initial)

Blews, Edward, , ,

Mailing Address 4882 Lower Shore Dr

City

Harbor Springs

State

MI

Zip Code

49740-8910

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

None

Retired

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 11 |   |   | 01 |   |   | 2024 |   |   |   |

Transaction ID : A99243CB57889433ABD5

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Earmarked (Non-Directed) through WinRed

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

2500.00

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 22 OF 88

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

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

WinRed

A.

Mailing Address PO Box 9891

City

Arlington

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

268118.71

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 01 2024

Transaction ID : A103A9D04571D4F07AA7

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not  
affected.

B.

Full Name (Last, First, Middle Initial)

Smith, Ben, , ,

Mailing Address 355 E Main St

City

Georgetown

State

KY

Zip Code

40324-1738

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

None

Retired

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

4041.02

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 01 2024

Transaction ID : AC44C8083B4354CB1970

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Earmarked (Non-Directed) through WinRed

C.

Full Name (Last, First, Middle Initial)

WinRed

Mailing Address PO Box 9891

City

Arlington

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

268118.71

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 01 2024

Transaction ID : AD60E1800B1C743D7B5C

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not  
affected.

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

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

1000.00

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

PAGE 23 OF 88

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

Rehman, Uzma, , ,

A.

Mailing Address 2062 Charnwood Dr

City

Troy

State

MI

Zip Code

48098-2204

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Macomb Hand Surgery

Occupation

Surgeon

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

215.03

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 11 |   |   | 02 |   |   | 2024 |   |   |   |

Transaction ID : A7203C9845B4A4BE488A

Amount of Each Receipt this Period

215.03

☐ Memo Item

In-kind:Food and Beverage for Event

B.

Full Name (Last, First, Middle Initial)

Rolf, Ramon, F., , Jr.

Mailing Address 5906 Inverness Cir

City

Midland

State

MI

Zip Code

48642-7022

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Weiler Law Group PLC

Occupation

Attorney

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

450.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 11 |   |   | 02 |   |   | 2024 |   |   |   |

Transaction ID : A0DDD8400D13C4815857

Amount of Each Receipt this Period

200.00

☐ Memo Item

C.

Full Name (Last, First, Middle Initial)

Sikander, Hazma, , ,

Mailing Address 1684 Lincolnshire Dr

City

Rochester Hills

State

MI

Zip Code

48309-4527

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Comfort Care Senior Living

Occupation

CEO

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

215.03

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 11 |   |   | 02 |   |   | 2024 |   |   |   |

Transaction ID : AA9D01C81A0454CE2853

Amount of Each Receipt this Period

215.03

☐ Memo Item

In-kind:Food and Beverage for Event

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

630.06

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

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

PAGE 24 OF 88

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

Smith, Ben, , ,

A.

Mailing Address 355 E Main St

City

Georgetown

State

KY

Zip Code

40324-1738

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

4046.02

Date of Receipt

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

Transaction ID : A69FA2CFD961D47B180E

Amount of Each Receipt this Period

5.00

☐ Memo Item

Earmarked (Non-Directed) through WinRed

Full Name (Last, First, Middle Initial)

WinRed

B.

Mailing Address PO Box 9891

City

Arlington

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

268118.71

Date of Receipt

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

Transaction ID : A7D6509C203A846AFA23

Amount of Each Receipt this Period

5.00

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not  
affected.

Full Name (Last, First, Middle Initial)

Malik, Asad, M., ,

C.

Mailing Address 900 E Long Lake Rd

City

Bloomfield Hills

State

MI

Zip Code

48304-2554

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Amerilodge Group

Occupation

President / CEO

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID : AB7DAB124D64E47A8BF2

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Earmarked (Non-Directed) through WinRed

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

1005.00

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 25 OF 88

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

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

WinRed

A.

Mailing Address PO Box 9891

City

Arlington

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

268118.71

Date of Receipt

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

Transaction ID : AF670CF505E2640A2970

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not  
affected.

B.

Full Name (Last, First, Middle Initial)

Nicholson, John, R., ,

Mailing Address 900 Cook Rd

City

Grosse Pointe Wood

State

MI

Zip Code

48236

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Abbott Nicholson PC

Attorney

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

1160.20

Date of Receipt

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

Transaction ID : AAE30BE67E87E457987D

Amount of Each Receipt this Period

100.00

☐ Memo Item

Earmarked (Non-Directed) through WinRed

C.

Full Name (Last, First, Middle Initial)

WinRed

Mailing Address PO Box 9891

City

Arlington

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

268118.71

Date of Receipt

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

Transaction ID : AC8F52D30C9C9493FA3D

Amount of Each Receipt this Period

100.00

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not  
affected.

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

100.00

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 26 OF 88

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

Feith, David, , ,

A.

Mailing Address 7627 16th St NW

City

Washington

State

DC

Zip Code

20012

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Aylmere

Occupation

DEPUTY ASSISTANT SECRETARY

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : AB6A0042B9A6F492A83D

Amount of Each Receipt this Period

250.00

☐ Memo Item

Earmarked (Non-Directed) through WinRed

B.

Full Name (Last, First, Middle Initial)

WinRed

Mailing Address PO Box 9891

City

Arlington

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

268118.71

Date of Receipt

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

Transaction ID : A6B669610CEA54FA7903

Amount of Each Receipt this Period

250.00

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not affected.

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
|   |   |   |   |   |   |   |   |   |   |

Amount of Each Receipt this Period

☐ Memo Item

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

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

250.00

16219.89

**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 27 OF 88

|                              |                                         |                              |                              |                             |
|------------------------------|-----------------------------------------|------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input checked="" 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)

Wexford County Republican Committee

Mailing Address 203 E Division St

City

Cadillac

State

MI

Zip Code

49601-2165

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

100.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 23 |   |   | 2024 |   |   |   |

Transaction ID : A1A773E415B884292807

Amount of Each Receipt this Period

100.00

☐ Memo ItemContribution from MI registered committee - verified  
permissible funds

Full Name (Last, First, Middle Initial)

Muskegon Republican Committee

Mailing Address 2330 Barclay St  
Ste 102

City

Muskegon

State

MI

Zip Code

49441-3288

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

500.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 11 |   |   | 05 |   |   | 2024 |   |   |   |

Transaction ID : A62C6EFB3020D4855AD4

Amount of Each Receipt this Period

500.00

☐ Memo ItemContribution from MI registered committee - verified  
permissible funds

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
|   |   |   |   |   |   |   |   |   |   |

Amount of Each Receipt this Period

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

600.00

600.00

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

PAGE 28 OF 88

|                              |                              |                                         |                              |                             |
|------------------------------|------------------------------|-----------------------------------------|------------------------------|-----------------------------|
| <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)

Paramount Global PAC

A.

Mailing Address 1275 Pennsylvania Ave NW

Ste 710

City

Washington

State

DC

Zip Code

20004-2448

FEC ID number of contributing  
federal political committee.

C C00167759

Name of Employer

Occupation

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

3500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 1 | 8 |   | 2 | 0 | 2 | 4 |

Transaction ID : ABA30683772094EEAAB5

Amount of Each Receipt this Period

1500.00

☐ Memo Item

B.

Full Name (Last, First, Middle Initial)

American Israel Public Affairs Committee PAC (AIPAC)

Mailing Address 251 H St NW

City

Washington

State

DC

Zip Code

20001-2604

FEC ID number of contributing  
federal political committee.

C C00797670

Name of Employer

Occupation

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

22570.43

Date of Receipt

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

Transaction ID : A0D6D0AB07437466787E

Amount of Each Receipt this Period

5000.00

☐ Memo Item

C.

Full Name (Last, First, Middle Initial)

International Foodservice Distributors Association PAC

Mailing Address 1660 International Dr

Ste 550

City

McLean

State

VA

Zip Code

22102-4877

FEC ID number of contributing  
federal political committee.

C C00383521

Name of Employer

Occupation

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A39010D014C364ABB9A8

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

7500.00

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

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

PAGE 29 OF 88

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

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NAME OF COMMITTEE (In Full)

**Moolenaar for Congress**Full Name (Last, First, Middle Initial)  
National Pro-Life Alliance PACMailing Address 5211 Port Royal Rd  
Ste 500City  
SpringfieldState  
VAZip Code  
22151-2100FEC ID number of contributing  
federal political committee.**C** C00358051

Name of Employer

Occupation

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : AD9F197F1DA554CD28CB

Amount of Each Receipt this Period

500.00

☐ Memo ItemFull Name (Last, First, Middle Initial)  
Cargill, Incorporated PACMailing Address P.O. Box 9300  
C/o Cargill, Inc. / Corp A&f / DepCity  
MinneapolisState  
MNZip Code  
55440-9300FEC ID number of contributing  
federal political committee.**C** C00067884

Name of Employer

Occupation

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

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

Transaction ID : A3CFD31D97AB643BAB88

Amount of Each Receipt this Period

1500.00

☐ Memo ItemFull Name (Last, First, Middle Initial)  
National Telecommunications Cooperative Association Rural Broadband PACMailing Address 4121 Wilson Blvd  
FI 10City  
ArlingtonState  
VAZip Code  
22203-4415FEC ID number of contributing  
federal political committee.**C** C00004473

Name of Employer

Occupation

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 8 |   | 2 | 0 | 2 | 4 |

Transaction ID : A41CE2139C15348DF955

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)..... ▶

3000.00

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

PAGE 30 OF 88

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

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

Corteva, Inc. Employees PAC (Corteva Agriscience PAC)

Mailing Address 601 New Jersey Ave NW

Ste 630

City

Washington

State

DC

Zip Code

20001-3051

FEC ID number of contributing  
federal political committee.

C C00247981

Name of Employer

Occupation

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 01 2024

Transaction ID : A4CA1BE76558640F9A02

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Pakistani American Public Affairs Committee PAK-PAC

Mailing Address 20 F St NW

FI 7

City

Washington

State

DC

Zip Code

20001-6700

FEC ID number of contributing  
federal political committee.

C C00238204

Name of Employer

Occupation

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

7500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 02 2024

Transaction ID : A3C904472A6D84F04A76

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

American Dental PAC

Mailing Address 1111 14th Street NW

Suite 1100

City

Washington

State

DC

Zip Code

20005-5627

FEC ID number of contributing  
federal political committee.

C C00000729

Name of Employer

Occupation

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 05 2024

Transaction ID : AC1CCFD242E9B4EA8B11

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**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 31 OF 88

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

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

TWDC Enterprises 18 Corp. Employees PAC Aka 'The Walt Disney Company Employees PAC' Or 'Disney PAC..

A.

Mailing Address 425 3rd St SW  
Ste 1100City  
WashingtonState  
DCZip Code  
20024-3227FEC ID number of contributing  
federal political committee.

C C00197749

Name of Employer

Occupation

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11  |   | 05  |   | 2024    |

Transaction ID : A278BD4B701D84A89A5E

Amount of Each Receipt this Period

1000.00

☐ Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
|     |   |     |   |         |

Amount of Each Receipt this Period

☐ Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
|     |   |     |   |         |

Amount of Each Receipt this Period

☐ Memo Item

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

1000.00

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

20000.00

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

PAGE 32 OF 88

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

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

Isabella Bank

A.

Mailing Address PO Box 100

City

Mount Pleasant

State

MI

Zip Code

48804-0100

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

29396.90

Date of Receipt

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

Transaction ID : A3EE89A9EE7CD4301B7E

Amount of Each Receipt this Period

2560.92

☐ Memo Item  
Interest income

B.

Full Name (Last, First, Middle Initial)

Isabella Bank

Mailing Address PO Box 100

City

Mount Pleasant

State

MI

Zip Code

48804-0100

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

29396.90

Date of Receipt

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

Transaction ID : AAAA8807039094BD6849

Amount of Each Receipt this Period

4.23

☐ Memo Item  
Interest income

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
|   |   |   |   |   |   |   |   |   |   |

Amount of Each Receipt this Period

☐ Memo Item

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

2565.15

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

2565.15

**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 33 OF 88

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <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  |   | 18  |   | 2024    |

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 : B6D4CC910AA174AE3B47

☐ Memo Item

Office Sought:

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

Disbursement For:

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. Bear, Malachi, , ,**

Mailing Address 4461 Holt Rd

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 18  |   | 2024    |

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

155.28

Transaction ID : B40803084AB0E44CF874

☐ Memo Item

Office Sought:

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

Disbursement For:

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. Coker, Emmah, M., ,**

Mailing Address 511 Wilcox Pkwy

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 18  |   | 2024    |

City  
ClareState  
MIZip Code  
48617-8903

FEC Identification Number

C

Purpose of Disbursement  
Wages

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

853.46

Transaction ID : B2B4408240CAF4C5BBB2

☐ 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).....▶

1273.53

**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 34 OF 88

|                                               |                              |                              |                              |
|-----------------------------------------------|------------------------------|------------------------------|------------------------------|
| <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. Maloney, Ashton, M., ,**

Mailing Address 6104 Partridge Ln

City  
MidlandState  
MIZip Code  
48640-2112Purpose of Disbursement  
Wages

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 1 | 8 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

720.90

Transaction ID : B9AEAADCA54BF406D9ED

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Quickbooks**

Mailing Address 2632 Marine Way

City  
Mountain ViewState  
CAZip Code  
94043-1126Purpose 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 | 8 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

20.00

Transaction ID : B5FE85980AB1D4C499C3

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Toly, Joseph, , ,**

Mailing Address 3547 Westhampton Ct NE

City  
Grand RapidsState  
MIZip Code  
49546-1421Purpose of Disbursement  
Wages

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 1 | 8 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

132.14

Transaction ID : B60210B60A998453593B

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

873.04

**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 35 OF 88

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <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 |
| 10  |   | 18  |   | 2024    |

City  
WashingtonState  
DCZip Code  
20220-0001

FEC Identification Number

C

Purpose of Disbursement  
Payroll Taxes

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

541.62

Transaction ID : B6292BECCFF314D499D2

☐ 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. Arena, LLC**Mailing Address 1260 E Stringham Ave  
Suite 400

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 21  |   | 2024    |

City  
Salt Lake CityState  
UTZip Code  
84106-2962

FEC Identification Number

C

Purpose of Disbursement  
Commissions

003

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

30.00

Transaction ID : B40B3D9FC13634DB4A2F

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

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 21  |   | 2024    |

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

2.50

Transaction ID : BEF7406F10B064C07978

☐ 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).....▶

574.12

**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 36 OF 88

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <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. State Of Michigan - SWT**

Mailing Address PO Box 30324

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 21  |   | 2024    |

City  
LansingState  
MIZip Code  
48909-7824

FEC Identification Number

C

Purpose of Disbursement  
Michigan withholding tax

001

Amount of Each Disbursement this Period

621.47

Transaction ID : B2A8CC62B13204FD59A6

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. WinRed Technical Services LLC**Mailing Address 1776 Wilson Blvd  
Suite 305

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 21  |   | 2024    |

City  
ArlingtonState  
VAZip Code  
22209

FEC Identification Number

C

Purpose of Disbursement  
Credit Card Processing Fees

001

Amount of Each Disbursement this Period

12.41

Transaction ID : B218A0EDE06A94EDC950

☐ 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. Andrews Hooper Pavlik, PLC**Mailing Address 5915 Eastman Ave  
Ste 100

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 22  |   | 2024    |

City  
MidlandState  
MIZip Code  
48640-6824

FEC Identification Number

C

Purpose of Disbursement  
Accounting Services

001

Amount of Each Disbursement this Period

9800.00

Transaction ID : B0E3E1323A8444354AD9

☐ 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).....▶

10433.88

**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 37 OF 88

|                                               |                             |                              |                              |
|-----------------------------------------------|-----------------------------|------------------------------|------------------------------|
| <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. Arena, LLC**Mailing Address 1260 E Stringham Ave  
Suite 400City  
Salt Lake CityState  
UTZip Code  
84106-2962Purpose 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 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

10.00

Transaction ID : BB94E8A5C88314030B21

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. QRP, Inc.**

Mailing Address 3000 James Savage Rd

City  
MidlandState  
MIZip Code  
48642-6533Purpose of Disbursement  
Printing - mailer postcards

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 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

562.60

Transaction ID : B12EF5F7EBDDF4942A08

☐ 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 Fees

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 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

3.94

Transaction ID : B251D1C8AD4ED4E57A4E

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

576.54

**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 38 OF 88

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <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  
Suite 400City  
Salt Lake CityState  
UTZip Code  
84106-2962Purpose 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 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

11.01

Transaction ID : BE113CEC0A93242B1B32

☐ 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 Fees

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 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

5.80

Transaction ID : B9934C8831A504B95B1C

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Arena, LLC**Mailing Address 1260 E Stringham Ave  
Suite 400City  
Salt Lake CityState  
UTZip Code  
84106-2962Purpose 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 | 4 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

5.00

Transaction ID : BBA09F72DDCAE420B993

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

21.81

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

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

PAGE 39 OF 88

|                                               |                             |                              |                              |
|-----------------------------------------------|-----------------------------|------------------------------|------------------------------|
| <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. QRP, Inc.**

Mailing Address 3000 James Savage Rd

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 24  |   | 2024    |

City  
MidlandState  
MIZip Code  
48642-6533

FEC Identification Number

C

Purpose of Disbursement  
Printing - mailer postcards

004

Amount of Each Disbursement this Period

1988.89

Transaction ID : BD7827D8A884046F2BBA

☐ 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. Tele-town Hall LLC**

Mailing Address PO Box 735080

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 24  |   | 2024    |

City  
ChicagoState  
ILZip Code  
60673-5080

FEC Identification Number

C

Purpose of Disbursement  
SMS, MMS Texts

004

Amount of Each Disbursement this Period

446.40

Transaction ID : B6DB21E2F61A446B2A0E

☐ 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. WinRed Technical Services LLC**Mailing Address 1776 Wilson Blvd  
Suite 305

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 24  |   | 2024    |

City  
ArlingtonState  
VAZip Code  
22209

FEC Identification Number

C

Purpose of Disbursement  
Credit Card Processing Fees

001

Amount of Each Disbursement this Period

6.11

Transaction ID : B7B83558C9B394678B93

☐ 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).....▶

2441.40

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

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

PAGE 40 OF 88

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <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  
Suite 400City  
Salt Lake CityState  
UTZip Code  
84106-2962Purpose 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 | 5 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

6.20

Transaction ID : B7F775164EBB04835856

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. PayPal, Inc.**

Mailing Address 2211 N 1st St

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

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

4.00

Transaction ID : BA513D67275A449E4BD7

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. State of Michigan - UIA**

Mailing Address PO Box 33598

City  
DetroitState  
MIZip Code  
48232-5598Purpose of Disbursement  
Unemployment 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 | 0 |   | 2 | 5 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

127.00

Transaction ID : BFEEA4932A9C14695A88

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

137.20

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

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

PAGE 41 OF 88

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <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 Fees

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 | 5 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

131.02

Transaction ID : B8A258A786AA1488A926

☐ 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 Fees

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 | 5 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

24.72

Transaction ID : B5003FDD672374558B81

☐ 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 Fees

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 | 8 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1.97

Transaction ID : B4BD8DB2B6D02435DBC8

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

157.71

**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 42 OF 88

|                                               |                             |                              |                              |
|-----------------------------------------------|-----------------------------|------------------------------|------------------------------|
| <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. Arena, LLC**Mailing Address 1260 E Stringham Ave  
Suite 400City  
Salt Lake CityState  
UTZip Code  
84106-2962Purpose of Disbursement  
Get Out the Vote - SMS Texts

005

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 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

9225.00

Transaction ID : BB267A77849CF45E9A34

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Digital One, LLC**Mailing Address 200 N Washington Sq  
Ste 440City  
LansingState  
MIZip Code  
48933-1313Purpose of Disbursement  
Billboards

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 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1600.00

Transaction ID : BEA659F5CE16B481C95C

☐ 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 Fees

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 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

59.10

Transaction ID : B69C51BD6A0E143D6969

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

10884.10

**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 43 OF 88

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

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. Bear, Malachi, , ,**

Mailing Address 4461 Holt Rd

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

002

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

60.32

Transaction ID : BD6480CB5FA3B40F1A6A

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Coker, Sofiah, , ,**

Mailing Address 511 Wilcox Pkwy

City  
ClareState  
MIZip Code  
48617-8903Purpose of Disbursement  
Mileage Reimbursement

002

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

58.00

Transaction ID : B411F8F8B5B544626BFF

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. QRP, Inc.**

Mailing Address 3000 James Savage Rd

City  
MidlandState  
MIZip Code  
48642-6533Purpose of Disbursement  
Printing - mailer postcards

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 |   | 3 | 0 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1117.75

Transaction ID : B8307F3BFFE1F4479993

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

1236.07

**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 44 OF 88

|                                               |                              |                              |                              |
|-----------------------------------------------|------------------------------|------------------------------|------------------------------|
| <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. Rathkamp, Tori, , ,**

Mailing Address 10735 Rogers Rd

City  
FreelandState  
MIZip Code  
48623-9362Purpose 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 |   | 3 | 0 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

40.60

Transaction ID : B6BF7CFEB0D6B42FA8B3

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. S-3 Group**

Mailing Address 418 C St NE

City  
WashingtonState  
DCZip Code  
20002-5818Purpose of Disbursement  
Room Rental 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 |   | 3 | 0 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

350.00

Transaction ID : B59936878F29A4D24806

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Toly, Joseph, , ,**

Mailing Address 3547 Westhampton Ct NE

City  
Grand RapidsState  
MIZip Code  
49546-1421Purpose 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 |   | 3 | 0 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

176.90

Transaction ID : B0051AB934E5C4700A80

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

567.50

**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 45 OF 88

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <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 Fees

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 | 0 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

135.76

Transaction ID : B6B89593CC39D4AB2B9F

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Isabella Bank**

Mailing Address PO Box 100

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

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 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

3.00

Transaction ID : B7694FA98B1DB49CEB33

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. PayPal, Inc.**

Mailing Address 2211 N 1st St

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

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1.85

Transaction ID : B91946C10B01749EAACD

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

140.61

**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 46 OF 88

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <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  
Suite 400City  
Salt Lake CityState  
UTZip Code  
84106-2962Purpose 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 | 1 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

6.20

Transaction ID : B2CA95F8DC8AC427B976

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Arena, LLC**Mailing Address 1260 E Stringham Ave  
Suite 400City  
Salt Lake CityState  
UTZip Code  
84106-2962Purpose 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 | 1 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

100.00

Transaction ID : B8427F5DDBAF247718A5

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Bear, Malachi, , ,**

Mailing Address 4461 Holt Rd

City  
HoltState  
MIZip Code  
48842-1683Purpose of Disbursement  
Wages

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

158.58

Transaction ID : B734939ABF57D4429B9C

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

264.78

**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 47 OF 88

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <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. Coker, Sofiah, , ,**

Mailing Address 511 Wilcox Pkwy

City  
ClareState  
MIZip Code  
48617-8903Purpose of Disbursement  
Wages

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

52.86

Transaction ID : BB4EFB37BF5984B0B840

☐ 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 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

30.00

Transaction ID : B62E994C08AC04AF6831

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Quickbooks**

Mailing Address 2632 Marine Way

City  
Mountain ViewState  
CAZip Code  
94043-1126Purpose 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 | 1 |   | 0 | 1 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

16.00

Transaction ID : BA4721BC6E72F40C3BDB

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

98.86

**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 48 OF 88

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <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. Rathkamp, Tori, , ,**

Mailing Address 10735 Rogers Rd

Date of Disbursement

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 11 |   |   | 01 |   |   | 2024 |   |   |   |

City  
FreelandState  
MIZip Code  
48623-9362

FEC Identification Number

C

Purpose of Disbursement  
Wages

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

46.26

Transaction ID : B9952AD32E8D24A408F6

☐ 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 |   |   | 01 |   |   | 2024 |   |   |   |

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

257.69

Transaction ID : BF5774795AE6547A7843

☐ 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 |   |   | 01 |   |   | 2024 |   |   |   |

City  
ArlingtonState  
VAZip Code  
22209

FEC Identification Number

C

Purpose of Disbursement  
Credit Card Processing Fees

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

118.20

Transaction ID : BF5F9EC6601E544E9AAA

☐ 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).....▶

422.15

**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 49 OF 88

|                                               |                              |                              |                              |
|-----------------------------------------------|------------------------------|------------------------------|------------------------------|
| <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 Fees

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 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

2.72

Transaction ID : BDB23B165A07A4B5380A

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Rehman, Uzma, , ,**

Mailing Address 2062 Charnwood Dr

City  
TroyState  
MIZip Code  
48098-2204Purpose of Disbursement  
In-kind:Food and Beverage for Event

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

215.03

Transaction ID : B7203C9845B4A4BE488A

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Sikander, Hazma, , ,**

Mailing Address 1684 Lincolnshire Dr

City  
Rochester HillsState  
MIZip Code  
48309-4527Purpose of Disbursement  
In-kind:Food and Beverage for Event

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

215.03

Transaction ID : BA9D01C81A0454CE2853

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

432.78

**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 50 OF 88

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <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 Fees

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 | 2 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

0.20

Transaction ID : B7FBB304EA306423EA3E

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Arena, LLC**Mailing Address 1260 E Stringham Ave  
Suite 400City  
Salt Lake CityState  
UTZip Code  
84106-2962Purpose 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 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

9.47

Transaction ID : B732A660D693245B7A1B

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Arena, LLC**Mailing Address 1260 E Stringham Ave  
Suite 400City  
Salt Lake CityState  
UTZip Code  
84106-2962Purpose 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 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1.87

Transaction ID : B0AAC6D680D12472DB49

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

11.54

**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 51 OF 88

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

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. Cardmember Service**

Mailing Address PO Box 94014

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11  |   | 04  |   | 2024    |

City  
PalatineState  
ILZip Code  
60094-4014

FEC Identification Number

C

Purpose of Disbursement  
Credit card payment - itemized subj to limit

002

Amount of Each Disbursement this Period

4243.32

Transaction ID : B54496B7B734F4591A43

☐ 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 Corner Bar**

Mailing Address 31 North Main Street

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 01  |   | 2024    |

City  
RockfordState  
MIZip Code  
49341-1217

FEC Identification Number

C

Purpose of Disbursement  
Staff Meals

002

Amount of Each Disbursement this Period

87.58

Transaction ID : BE7C668EB2630456BA2D

☒ 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. Delta Air Lines**

Mailing Address 1030 Delta Blvd

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 01  |   | 2024    |

City  
AtlantaState  
GAZip Code  
30354-1989

FEC Identification Number

C

Purpose of Disbursement  
Airfare

002

Amount of Each Disbursement this Period

1236.95

Transaction ID : B8879234EBB354989818

☒ 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).....▶

4243.32

**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 52 OF 88

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <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 |
| 10  |   | 01  |   | 2024    |

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 : BD948A9E532424DE09F0

☒ 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. City Of Grand Rapids Parking**

Mailing Address 218 Lyon St NW

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 01  |   | 2024    |

City  
Grand RapidsState  
MIZip Code  
49503-2207

FEC Identification Number

C

Purpose of Disbursement  
Parking

002

Amount of Each Disbursement this Period

2.00

Transaction ID : B99099D92FCC5429E98B

☒ 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. Meijer**

Mailing Address 606 South Greenville West Drive

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 01  |   | 2024    |

City  
GreenvilleState  
MIZip Code  
48838-3513

FEC Identification Number

C

Purpose of Disbursement  
Meal

002

Amount of Each Disbursement this Period

5.62

Transaction ID : BA4E551E715284254A6B

☒ 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 53 OF 88

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <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. Panera Bread - Lansing**

Mailing Address 5212 West Highway

City  
LansingState  
MIZip Code  
48917Purpose of Disbursement  
Staff Meals

002

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

32.61

Transaction ID : BCE9EC5026342446E82F

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Delta Air Lines**

Mailing Address 1030 Delta Blvd

City  
AtlantaState  
GAZip Code  
30354-1989Purpose of Disbursement  
Airfare

002

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1236.95

Transaction ID : B52ECD08994804D3AA1E

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. 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 |   | 0 | 2 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

32.31

Transaction ID : B04700FE0C1024C2D9C0

☒ 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 54 OF 88

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

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. The Euro Bistro**

Mailing Address 6080 28th St SE

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 02  |   | 2024    |

City  
Grand RapidsState  
MIZip Code  
49546-6969

FEC Identification Number

C

Purpose of Disbursement  
Staff Meals

002

Amount of Each Disbursement this Period

105.98

Transaction ID : BDF2B6938B2654D30B31

☒ 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. Illinois Tollway**

Mailing Address 2700 Ogden Ave

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 04  |   | 2024    |

City  
Downers GroveState  
ILZip Code  
60515-1703

FEC Identification Number

C

Purpose of Disbursement  
Tolls

002

Amount of Each Disbursement this Period

2.20

Transaction ID : BEFFFEFD50CD949B88BC

☒ 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. Sam's Club - Lansing**

Mailing Address 2925 Centre Blvd

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 04  |   | 2024    |

City  
LansingState  
MIZip Code  
48912

FEC Identification Number

C

Purpose of Disbursement  
Parade Supplies

001

Amount of Each Disbursement this Period

639.36

Transaction ID : B2040081FF2514FFE994

☒ 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 55 OF 88

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <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. UPS**

Mailing Address 55 Glenlake Pkwy

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 04  |   | 2024    |

City  
AtlantaState  
GAZip Code  
30328-3474

FEC Identification Number

C

Purpose of Disbursement  
Shipping

001

Amount of Each Disbursement this Period

12.46

Transaction ID : B4CC932933969413A8D9

☒ 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. McDonald's - Coopersville**

Mailing Address 59 68th Ave S

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 05  |   | 2024    |

City  
CoopersvilleState  
MIZip Code  
49404-9764

FEC Identification Number

C

Purpose of Disbursement  
Meals

002

Amount of Each Disbursement this Period

14.51

Transaction ID : B6638D7279C81412BBE3

☒ 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. Jimmy John's - GR**

Mailing Address 4064 Alpine Ave NW

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 05  |   | 2024    |

City  
Comstock ParkState  
MIZip Code  
49321-9017

FEC Identification Number

C

Purpose of Disbursement  
Staff Meals

002

Amount of Each Disbursement this Period

34.92

Transaction ID : B0417DEF04EAF4952A1E

☒ 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 56 OF 88

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <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. Paradise Pizza**

Mailing Address 8980 N Rodgers Ct SE

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 07  |   | 2024    |

City  
CaledoniaState  
MIZip Code  
49316-8051

FEC Identification Number

C

Purpose of Disbursement  
Staff meeting meals

002

Amount of Each Disbursement this Period

59.88

Transaction ID : B04BDA2A49F3449D19B3

☒ 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. Aldea Coffee**Mailing Address 794 Pine St  
Unit A

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 08  |   | 2024    |

City  
MuskegonState  
MIZip Code  
49442-1020

FEC Identification Number

C

Purpose of Disbursement  
Staff Meals

002

Amount of Each Disbursement this Period

24.72

Transaction ID : B8C5662AFD8024DDFA44

☒ 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 8944 Branchwood Trail

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 08  |   | 2024    |

City  
Fort WorthState  
TXZip Code  
76116-9618

FEC Identification Number

C

Purpose of Disbursement  
Airfare

002

Amount of Each Disbursement this Period

226.95

Transaction ID : B3FC4976F32AF429C999

☒ 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 57 OF 88

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <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/  
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 | 8 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

52.86

Transaction ID : B157A4EEB81264ACA98C

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. The Early Owl**

Mailing Address 451 W Western Ave

City  
MuskegonState  
MIZip Code  
49440-1109Purpose of Disbursement  
Staff Meals

002

Candidate Name

Category/  
TypeOffice Sought: 

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

Disbursement For: 

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

State: District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 0 | 8 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

92.86

Transaction ID : BC20564F6808A4B3D868

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Leppinks Food Center**

Mailing Address 301 W Main St

City  
BeldingState  
MIZip Code  
48809-1675Purpose of Disbursement  
Food for volunteers

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 |   | 0 | 9 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

41.38

Transaction ID : B4D30423567DD4BE9AC7

☒ 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 58 OF 88

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <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. Jimmy John's - Ludington**

Mailing Address 5865 W US Highway 10

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 0 | 9 |   | 2 | 0 | 2 | 4 |

City  
LudingtonState  
MIZip Code  
49431-2449

FEC Identification Number

C

Purpose of Disbursement  
Staff Meals

002

Amount of Each Disbursement this Period

31.42

Transaction ID : BF893491468F04A459AB

☒ 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. Parkmobile, LLC**Mailing Address 1100 Spring Street NW  
Suite 200

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 0 | 9 |   | 2 | 0 | 2 | 4 |

City  
AtlantaState  
GAZip Code  
30309

FEC Identification Number

C

Purpose of Disbursement  
Parking

002

Amount of Each Disbursement this Period

0.95

Transaction ID : BB99DAE463CF64440B93

☒ 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. Russo Ristorante**Mailing Address 350 84th St SW  
Ste 510

Date of Disbursement

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

City  
Byron CenterState  
MIZip Code  
49315-7028

FEC Identification Number

C

Purpose of Disbursement  
Staff Meals

002

Amount of Each Disbursement this Period

97.59

Transaction ID : B517D90F4B7DA4EF9933

☒ 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 59 OF 88

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <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. Buccilli's Pizza Of Clare**

Mailing Address 1541 N McEwan St

City  
ClareState  
MIZip Code  
48617-1115Purpose of Disbursement  
Staff Meals

002

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

68.26

Transaction ID : B34FFD19CFC0F4AE2A66

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Cardmember Service**

Mailing Address PO Box 94014

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

002

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

9257.55

Transaction ID : B510659527A2849E4A81

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Atlanta Int'l Airport**Mailing Address 6000 N Terminal Pkwy  
Suite 4000City  
AtlantaState  
GAZip Code  
30320-7400Purpose of Disbursement  
Meal

002

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

39.09

Transaction ID : B2F849A1781DE40A6AEF

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

9257.55

**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)

PAGE 60 OF 88

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <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. 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 |
| 0 | 9 |   | 1 | 8 |   | 2 | 0 | 0 | 1 |

FEC Identification Number

C

Amount of Each Disbursement this Period

32.45

Transaction ID : BD63BEB7E91A543B0BD3

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Bullfeathers**

Mailing Address 410 1st Street SE

City  
WashingtonState  
DCZip Code  
20003-1819Purpose of Disbursement  
Office 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 |
| 0 | 9 |   | 1 | 9 |   | 2 | 0 | 0 | 1 |

FEC Identification Number

C

Amount of Each Disbursement this Period

158.26

Transaction ID : B6B101938978643EE8A7

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Delta Air Lines**

Mailing Address 1030 Delta Blvd

City  
AtlantaState  
GAZip Code  
30354-1989Purpose of Disbursement  
Airfare

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 |   | 1 | 1 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

799.98

Transaction ID : B497BFBA655D74343B49

☒ 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 88

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <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. Mack's On Main**

Mailing Address 101 W Cedar Ave

City  
GladwinState  
MIZip Code  
48624-2061Purpose of Disbursement  
Meal

002

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 1 | 1 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

12.51

Transaction ID : B45C6481474074F92B86

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. 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 |
| 0 | 9 |   | 1 | 1 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

16.33

Transaction ID : B7D3BED3C87A1470E897

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Pete's Diner**

Mailing Address 212 2nd Street SE

City  
WashingtonState  
DCZip Code  
20003-1943Purpose of Disbursement  
Meal

002

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 1 | 2 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

5.35

Transaction ID : B3F7E070ED7C547A5AB0

☒ 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 62 OF 88

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <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. Canva US, Inc.**Mailing Address 3212 E Cesar Chavez St  
Bldg 1City  
AustinState  
TXZip Code  
78702-4938Purpose of Disbursement  
Monthly software subscription

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 |   | 1 | 2 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

14.99

Transaction ID : BFE752473BAC84F49866

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Southern Soul BBQ**

Mailing Address 2020 Demere Rd

City  
St Simons IslandState  
GAZip Code  
31522-2807Purpose of Disbursement  
Meals

002

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 1 | 4 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

126.39

Transaction ID : BC5F6F22CAB7D4EB38A9

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. UPS**

Mailing Address 55 Glenlake Pkwy

City  
AtlantaState  
GAZip Code  
30328-3474Purpose of Disbursement  
Shipping

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 1 | 4 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

12.49

Transaction ID : B308B322495174734B61

☒ 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 63 OF 88

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <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. Crabdaddy's Seafood Bar Grill**

Mailing Address 1217 Ocean Blvd

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 15  |   | 2024    |

City  
St Simons IslandState  
GAZip Code  
31522-4222

FEC Identification Number

C

Purpose of Disbursement  
Meals

002

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

163.28

Transaction ID : BF8482A79BFE84C62BB0

☒ 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. Sea Island Resort**

Mailing Address 100 Cloister Dr

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 15  |   | 2024    |

City  
Sea IslandState  
GAZip Code  
31561-9705

FEC Identification Number

C

Purpose of Disbursement  
Meals

002

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

209.06

Transaction ID : B221C6F95ED20424187D

☒ 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 |
| 09  |   | 15  |   | 2024    |

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

24.95

Transaction ID : B3E0EF48B4F9447C9B62

☒ 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 64 OF 88

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

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. Capitol Hill Club**

Mailing Address 300 1st Street SE

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

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 1 | 6 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

202.55

Transaction ID : B6EA33127012A404FBD0

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

Mailing Address 2900 Rodd St

City  
MidlandState  
MIZip Code  
48640-4483Purpose of Disbursement  
Shipping

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 1 | 6 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

9.85

Transaction ID : B532C06E6C63A445CA44

☒ Memo Item**C. Atlanta Int'l Airport**Mailing Address 6000 N Terminal Pkwy  
Suite 4000City  
AtlantaState  
GAZip Code  
30320-7400Purpose of Disbursement  
Parking

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 |   | 1 | 6 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

12.00

Transaction ID : B1D3480A0CE1B41B795A

☒ 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 65 OF 88

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <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. Atlanta Int'l Airport**Mailing Address 6000 N Terminal Pkwy  
Suite 4000City  
AtlantaState  
GAZip Code  
30320-7400Purpose of Disbursement  
Meals

002

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 1 | 6 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

27.76

Transaction ID : B6F9F089FCC2E4829975

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Bullfeathers**

Mailing Address 410 1st Street SE

City  
WashingtonState  
DCZip Code  
20003-1819Purpose 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 |   | 1 | 7 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

103.63

Transaction ID : B25454E7A4C1F42B6A46

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Burger King - Reed City**

Mailing Address 5085 220th Ave

City  
Reed CityState  
MIZip Code  
49677-8556Purpose of Disbursement  
Meal

002

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 1 | 8 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

9.64

Transaction ID : B99F226F1A8FE453F9A4

☒ 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 66 OF 88

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

003

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 1 | 8 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

14.41

Transaction ID : B0ADC899CF2BE4C6DB66

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Capital One Arena**

Mailing Address 601 F St NW

City  
WashingtonState  
DCZip Code  
20004-1605Purpose of Disbursement  
Beverage

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 |   | 1 | 9 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1.53

Transaction ID : BB6E2D17D1C0246FAA2F

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Arby's- Clare**

Mailing Address 10207 S Clare Ave

City  
ClareState  
MIZip Code  
48617-8925Purpose of Disbursement  
Meal

002

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 2 | 0 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

12.07

Transaction ID : BE02815477A6C433CBA5

☒ 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 67 OF 88

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

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. Subway - Clare**

Mailing Address 10197 S Clare Ave

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 20  |   | 2024    |

City  
ClareState  
MIZip Code  
48617-8924

FEC Identification Number

C

Purpose of Disbursement  
Meal

002

Amount of Each Disbursement this Period

7.41

Transaction ID : BCE5426448B76402081E

☒ 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. Dairy Queen - Greenville**

Mailing Address 1015 W Washington St

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 20  |   | 2024    |

City  
GreenvilleState  
MIZip Code  
48838-2617

FEC Identification Number

C

Purpose of Disbursement  
Meal

002

Amount of Each Disbursement this Period

10.54

Transaction ID : BAE4180C34BF847A5846

☒ 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. PF Changs - Airport**

Mailing Address 2588 Worldgateway PI

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 20  |   | 2024    |

City  
DetroitState  
MIZip Code  
48242-4228

FEC Identification Number

C

Purpose of Disbursement  
Meals

002

Amount of Each Disbursement this Period

63.19

Transaction ID : B88CBC5E87CB7434A8D1

☒ 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 68 OF 88

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <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. Lowe's**

Mailing Address 1918 Airport Road

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 20  |   | 2024    |

City  
MidlandState  
MIZip Code  
48642-7792

FEC Identification Number

C

Purpose of Disbursement  
Yard sign supplies

001

Amount of Each Disbursement this Period

81.39

Transaction ID : B4530CFF0BE7441EC97F

☒ 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 |
| 09  |   | 20  |   | 2024    |

City  
Traverse CityState  
MIZip Code  
49686-2617

FEC Identification Number

C

Purpose of Disbursement  
Catering, Accomodations for Event

003

Amount of Each Disbursement this Period

1460.26

Transaction ID : B4D3E9C63A9304AF7B84

☒ 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. Bittersweet Catering**

Mailing Address 103 1/2 N Alfred St

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 20  |   | 2024    |

City  
AlexandriaState  
VAZip Code  
22314-3010

FEC Identification Number

C

Purpose of Disbursement  
Catering for event

003

Amount of Each Disbursement this Period

568.64

Transaction ID : BBEC88A5FBF414B85880

☒ 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 69 OF 88

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

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. Subway - Rayburn Building**

Mailing Address 45 Independence Avenue SW

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 23  |   | 2024    |

City  
WashingtonState  
DCZip Code  
20515-0001

FEC Identification Number

C

Purpose of Disbursement  
Meals

002

Amount of Each Disbursement this Period

22.30

Transaction ID : B18FCD59A68294D57A7B

☒ 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. Bonchon Navy Yard**

Mailing Address 1015 Half St SE

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 24  |   | 2024    |

City  
WashingtonState  
DCZip Code  
20003-3654

FEC Identification Number

C

Purpose of Disbursement  
Staff Meeting Meals

001

Amount of Each Disbursement this Period

187.50

Transaction ID : BE54FEF56FA114722815

☒ 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. Sam's Club - Lansing**

Mailing Address 2925 Centre Blvd

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 25  |   | 2024    |

City  
LansingState  
MIZip Code  
48912

FEC Identification Number

C

Purpose of Disbursement  
Parade Supplies

001

Amount of Each Disbursement this Period

426.24

Transaction ID : B935F470A60AC48838AC

☒ 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 70 OF 88

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <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. Members' Dining Room**

Mailing Address US Capitol Building Room 117

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 25  |   | 2024    |

City  
WashingtonState  
DCZip Code  
20515-0001

FEC Identification Number

C

Purpose of Disbursement  
Meal

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

43.60

Transaction ID : B4432FB375C47483F898

☒ 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 Monocle DC**

Mailing Address 107 D St NE

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 25  |   | 2024    |

City  
WashingtonState  
DCZip Code  
20002-5657

FEC Identification Number

C

Purpose of Disbursement  
Catering for Event

003

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

2409.87

Transaction ID : BB720910245F449E0B03

☒ 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. Wendy's**

Mailing Address 1010 N. Lafayette St

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 25  |   | 2024    |

City  
GreenvilleState  
MIZip Code  
48838-1146

FEC Identification Number

C

Purpose of Disbursement  
Meal

002

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

14.72

Transaction ID : BE9BC20DC65024642ABB

☒ 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 71 OF 88

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <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. Apple Computer, Inc.**

Mailing Address 1 Infinite Loop

City  
CupertinoState  
CAZip Code  
95014-2083Purpose of Disbursement  
Phone app

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 | 5 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

0.99

Transaction ID : B320F6085F1674016943

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. McDonald's - GR**

Mailing Address 1130 W Fulton

City  
Grand RapidsState  
MIZip Code  
49504-6117Purpose of Disbursement  
Meal

002

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 2 | 6 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

9.51

Transaction ID : BFF834616592745E88A5

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Mount Vernon Inn Restaurant**

Mailing Address 3200 Mount Vernon Memorial Hwy

City  
Mount VernonState  
VAZip Code  
22121Purpose of Disbursement  
Ticket for Annual Dinner

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 | 6 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

69.12

Transaction ID : B1417CE27ADA2436B990

☒ 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 72 OF 88

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <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. McDonald's - Caledonia**

Mailing Address 9383 Cherry Valley Ave SE

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 27  |   | 2024    |

City  
CaledoniaState  
MIZip Code  
49316-8421

FEC Identification Number

C

Purpose of Disbursement  
Meals

002

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

18.42

Transaction ID : B1F1E3D1A4ABA48ED995

☒ 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. Jimmy John's - Ludington**

Mailing Address 5865 W US Highway 10

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 28  |   | 2024    |

City  
LudingtonState  
MIZip Code  
49431-2449

FEC Identification Number

C

Purpose of Disbursement  
Staff Meals

002

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

37.66

Transaction ID : B9C59DBDE8A8A47749CB

☒ 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. Alma Brewing Co**

Mailing Address 208 E Superior St

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 30  |   | 2024    |

City  
AlmaState  
MIZip Code  
48801-1819

FEC Identification Number

C

Purpose of Disbursement  
Staff Meals

002

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

62.94

Transaction ID : BF4AD5F05579A4A4B83F

☒ 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 73 OF 88

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <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. Combat Data Inc.**

Mailing Address 13262 Blaisdell

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 30  |   | 2024    |

City  
DewittState  
MIZip Code  
48820-8157

FEC Identification Number

C

Purpose of Disbursement  
Voter file/list

005

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1750.00

Transaction ID : B1315BD270CD44141B69

☒ 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. Sheridan AGO**

Mailing Address 7990 Sheridan Road

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 30  |   | 2024    |

City  
SheridanState  
MIZip Code  
48884-9703

FEC Identification Number

C

Purpose of Disbursement  
Meal

002

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

4.68

Transaction ID : BFE8D13797AB442C5B30

☒ Memo Item

Office Sought:

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

Disbursement For:

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. Coker, Emmah, M., ,**

Mailing Address 511 Wilcox Pkwy

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11  |   | 04  |   | 2024    |

City  
ClareState  
MIZip Code  
48617-8903

FEC Identification Number

C

Purpose of Disbursement  
Mileage Reimbursement

002

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1411.72

Transaction ID : BAF5032A7BC014D759E9

☐ 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).....▶

1411.72

**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 88

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <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 | 1 |   | 0 | 4 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

493.00

Transaction ID : BD8F65D279B1E4180ADF

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. QRP, Inc.**

Mailing Address 3000 James Savage Rd

City  
MidlandState  
MIZip Code  
48642-6533Purpose of Disbursement  
Printing - mailer postcards

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 | 4 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

833.72

Transaction ID : B0005E7C5884041A4B89

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Tele-town Hall LLC**

Mailing Address PO Box 735080

City  
ChicagoState  
ILZip Code  
60673-5080Purpose of Disbursement  
SMS, MMS Texts

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 | 4 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

345.27

Transaction ID : B1C36745148514A8882A

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

1671.99

**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 88

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <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 |
| 11  |   | 04  |   | 2024    |

City  
WashingtonState  
DCZip Code  
20220-0001

FEC Identification Number

C

Purpose of Disbursement  
Payroll Taxes

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

89.50

Transaction ID : B2089ACF606CC4B059E4

☐ Memo Item

Office Sought:

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

Disbursement For:

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. WinRed Technical Services LLC**Mailing Address 1776 Wilson Blvd  
Suite 305

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11  |   | 04  |   | 2024    |

City  
ArlingtonState  
VAZip Code  
22209

FEC Identification Number

C

Purpose of Disbursement  
Credit Card Processing Fees

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

45.27

Transaction ID : BC1049DECD679483F91A

☐ 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  |   | 04  |   | 2024    |

City  
ArlingtonState  
VAZip Code  
22209

FEC Identification Number

C

Purpose of Disbursement  
Credit Card Processing Fees

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

15.56

Transaction ID : B7EDD6C4DE27745DFA75

☐ 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).....▶

150.33

**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 76 OF 88

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

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. PayPal, Inc.**

Mailing Address 2211 N 1st St

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

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1.85

Transaction ID : BEF8FF7ADFC5477DB13

☐ 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 Fees

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 | 5 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

10.25

Transaction ID : B80E281B25FCC4A6A815

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Advantage, Inc.**

Mailing Address 9420 Bonita Beach Rd SE

City  
Bonita SpringsState  
FLZip Code  
34135-4774Purpose of Disbursement  
Monthly subscription - App

005

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 8 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

345.96

Transaction ID : B305BE3A037DD4A86936

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

358.06

**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 88

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <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 phone, data access

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

446.51

Transaction ID : B3A9D7105CF38419D887

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. 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 |   | 1 | 1 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

3171.44

Transaction ID : B5547AF94D7564D7BB49

☐ 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 |   | 1 | 1 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

85.84

Transaction ID : BBC4F82E812E04ADE82B

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

3703.79

**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 88

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <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. QRP, Inc.**

Mailing Address 3000 James Savage Rd

City  
MidlandState  
MIZip Code  
48642-6533Purpose of Disbursement  
Printing - mailer postcards

004

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

274.31

Transaction ID : BE126171C987F4BB792A

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Arena, LLC**Mailing Address 1260 E Stringham Ave  
Suite 400City  
Salt Lake CityState  
UTZip Code  
84106-2962Purpose 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 | 4 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

482.64

Transaction ID : B2F40F48BF6624C279A6

☐ 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:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

575.00

Transaction ID : B29E77302EE5D4D8A9AF

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

1331.95

**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)

PAGE 79 OF 88

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <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. Bear, Josiah, A., ,**

Mailing Address 4461 Holt Rd

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11  |   | 15  |   | 2024    |

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

4159.92

Transaction ID : B70799AD9C09F435F998

☐ 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. Coker, Emmah, M., ,**

Mailing Address 511 Wilcox Pkwy

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11  |   | 15  |   | 2024    |

City  
ClareState  
MIZip Code  
48617-8903

FEC Identification Number

C

Purpose of Disbursement  
Wages

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

3240.72

Transaction ID : B5675B8E969834749A29

☐ 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. Maloney, Ashton, M., ,**

Mailing Address 6104 Partridge Ln

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11  |   | 15  |   | 2024    |

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

3960.24

Transaction ID : B9FBEDD573E8246AAB04

☐ 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).....▶

11360.88

**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 80 OF 88

|                                               |                              |                              |                              |
|-----------------------------------------------|------------------------------|------------------------------|------------------------------|
| <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. Toly, Joseph, , ,**

Mailing Address 3547 Westhampton Ct NE

City  
Grand RapidsState  
MIZip Code  
49546-1421Purpose of Disbursement  
Wages

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

270.91

Transaction ID : BF474DE041D7E49CC915

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. United States Treasury**

Mailing Address 1500 Pennsylvania Ave NW

City  
WashingtonState  
DCZip Code  
20220-0001Purpose of Disbursement  
Payroll Taxes

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 1 | 8 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

3874.74

Transaction ID : B5EF587A6C1B6495D8BF

☐ Memo Item

Full Name (Last, First, Middle Initial)

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

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 1 | 9 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

16162.00

Transaction ID : B649D71049AF748C1BF2

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

20307.65

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

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

PAGE 81 OF 88

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <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  
Suite 400City  
Salt Lake CityState  
UTZip Code  
84106-2962Purpose 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 | 0 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

10.00

Transaction ID : B4807E6C423CE477A88C

☐ 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, 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 | 1 |   | 2 | 2 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

442.82

Transaction ID : BB67DEE97763A4AF29BA

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Arena, LLC**Mailing Address 1260 E Stringham Ave  
Suite 400City  
Salt Lake CityState  
UTZip Code  
84106-2962Purpose 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 | 5 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

0.20

Transaction ID : B6C2E31BCD1BD42EF937

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

453.02

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

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

PAGE 82 OF 88

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

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NAME OF COMMITTEE (In Full)

Moolenaar for Congress

Full Name (Last, First, Middle Initial)

**A. Hooks Solutions LLC**

Mailing Address PO Box 15474

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

003

Candidate Name

Category/  
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 | 5 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

16603.28

Transaction ID : B450105312BDC43318B9

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Hooks Solutions LLC**

Mailing Address PO Box 15474

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

003

Candidate Name

Category/  
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 | 5 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

195.71

Transaction ID : B227CCB6DDB1D4A4DA81

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Uber Technologies, Inc.**

Mailing Address 800 Market St

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

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 |
| 0 | 6 |   | 2 | 5 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

15.08

Transaction ID : BBAB68E76D1F5429D999

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

16798.99

**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 83 OF 88

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <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

City  
San FranciscoState  
CAZip Code  
94102-3033Purpose of Disbursement  
Transportation 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 |
| 0 | 6 |   | 2 | 5 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

15.13

Transaction ID : B0960317B828A4C0CACC

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Capitol Hill Club**

Mailing Address 300 1st Street SE

City  
WashingtonState  
DCZip Code  
20003-1801Purpose of Disbursement  
Catering for event

003

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 1 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

71.50

Transaction ID : B7374334DABCC413EA74

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Staples**Mailing Address 1250 H Street NW  
Suite 100City  
WashingtonState  
DCZip Code  
20005-3952Purpose of Disbursement  
Event supplies

003

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 0 | 1 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

94.00

Transaction ID : B9F5FA35AC739452195E

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

0.00

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

101596.87

**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 84 OF 88

|                              |                              |                              |                                        |
|------------------------------|------------------------------|------------------------------|----------------------------------------|
| <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. Clare County Jr. Small Animal Assn**

Mailing Address 4907 Mary Jo Rd

Date of Disbursement

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

City  
HarrisonState  
MIZip Code  
48625-8609

FEC Identification Number

C

Purpose of Disbursement  
Livestock auction donation

012

Amount of Each Disbursement this Period

325.00

Transaction ID : B46DBF4E088BB4CA78A5

☐ 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 International Foundation**

Mailing Address 1145 Great Oaks Blvd.

Date of Disbursement

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

City  
RochesterState  
MIZip Code  
48307

FEC Identification Number

C

Purpose of Disbursement  
Charitable Contribution

012

Amount of Each Disbursement this Period

1000.00

Transaction ID : B4387AE1D90B44B1C9DF

☐ 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. Don Bacon For Congress**

Mailing Address PO Box 391368

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 9 |   | 2 | 0 | 2 | 4 |

City  
OmahaState  
NEZip Code  
68139-1368

FEC Identification Number

C C00575167

Purpose of Disbursement  
Contribution to Federal Candidate

011

Amount of Each Disbursement this Period

1000.00

Transaction ID : B71DF4D15EBEF479CACE

☐ Memo Item

Candidate Name

Bacon, Donald, , ,

Category/  
Type

Office Sought:

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

Disbursement For: 2024

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

State: NE

District: 02

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

2325.00

**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 85 OF 88

|                              |                              |                              |                                        |
|------------------------------|------------------------------|------------------------------|----------------------------------------|
| <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. Yvette4congress**

Mailing Address PO Box 404

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 30  |   | 2024    |

City  
La LuzState  
NMZip Code  
88337-0404

FEC Identification Number

C C00655571

Purpose of Disbursement  
Contribution to Federal Candidate

011

Candidate Name  
Herrell, Stella, Yvette, ,Category/  
Type

Amount of Each Disbursement this Period

1000.00

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID : B1F6C8612E73F4ED0B34

☐ Memo Item

State: NM

District: 02

Full Name (Last, First, Middle Initial)

**B. West Michigan Livestock Council**

Mailing Address PO Box 22

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11  |   | 19  |   | 2024    |

City  
ScottvilleState  
MIZip Code  
49454-0022

FEC Identification Number

C

Purpose of Disbursement  
Livestock auction donation

012

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

300.00

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID : BE396AAD9997A426E918

☐ Memo Item

State:

District:

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

Amount of Each Disbursement this Period

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼☐ Memo Item

State:

District:

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

1300.00

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

3625.00

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

PAGE 86 OF 88

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

State Of Michigan - SWT

Nature of Debt (Purpose):

Michigan withholding tax

Mailing Address PO Box 30324

City

Lansing

State

MI

Zip Code

48909-7824

Outstanding Balance Beginning This Period

621.47

Transaction ID : DA6FCAA149C7D4464B73

Amount Incurred This Period

0.00

Payment This Period

621.47

Outstanding Balance at Close of This Period

0.00

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

Cardmember Service

Nature of Debt (Purpose):

Credit card charges

Mailing Address PO Box 94014

City

Palatine

State

IL

Zip Code

60094-4014

Outstanding Balance Beginning This Period

9257.55

Transaction ID : DA9424934F5054890B16

Amount Incurred This Period

0.00

Payment This Period

9257.55

Outstanding Balance at Close of This Period

0.00

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

Cardmember Service

Nature of Debt (Purpose):

Credit card charges

Mailing Address PO Box 94014

City

Palatine

State

IL

Zip Code

60094-4014

Outstanding Balance Beginning This Period

4243.32

Transaction ID : D9E97C262C7F84D4294A

Amount Incurred This Period

0.00

Payment This Period

4243.32

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 87 OF 88

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

2814.48

Transaction ID : DAE0A42CF2AA94CBCBDF

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2814.48

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 : D34C24FE04C3146BDAF8

Amount Incurred This Period

6281.30

Payment This Period

0.00

Outstanding Balance at Close of This Period

6281.30

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

**Cardmember Service**

Nature of Debt (Purpose):

Credit card charges

Mailing Address PO Box 94014

City  
PalatineState  
ILZip Code  
60094-4014

Outstanding Balance Beginning This Period

0.00

Transaction ID : DD0742684642C42A0A4E

Amount Incurred This Period

1315.91

Payment This Period

0.00

Outstanding Balance at Close of This Period

1315.91

1) **SUBTOTALS** This Period This Page (optional) .....

10411.69

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 88 OF 88

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

State Of Michigan - SWT

Nature of Debt (Purpose):

Michigan withholding tax

Mailing Address PO Box 30324

City  
Lansing

State  
MI

Zip Code  
48909-7824

Outstanding Balance Beginning This Period

0.00

Transaction ID : DC8194DE9DA724BB0946

Amount Incurred This Period

857.06

Payment This Period

0.00

Outstanding Balance at Close of This Period

857.06

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

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

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

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional) .....

857.06

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

11268.75

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) .....

11268.75