

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 Jeff Holmes for Congress

ADDRESS (number and street) 4488 Arcada Dr Alma MI 48801 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00565432 3. IS THIS REPORT NEW (N) OR AMENDED (A) MI 04

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3) January 31 Year-End Report (YE) Termination Report (TER) (b) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) Convention (12C) Special (12S) Election on 11 / 04 / 2014 in the State of MI (c) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S) Election on / / in the State of

5. Covering Period 07 / 01 / 2014 through 07 / 16 / 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Greg S Mapes

Signature of Treasurer Greg S Mapes [Electronically Filed] Date 07 / 25 / 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only table with 8 columns and 1 row. FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 23

Write or Type Committee Name

Jeff Holmes for Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	6		2	0	1	4

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	13382.00	17108.28
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	13382.00	17108.28
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	2370.30	4695.67
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	2370.30	4695.67
8. Cash on Hand at Close of Reporting Period (from Line 27).....	37412.61	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	25000.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Jeff Holmes for Congress

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	13382.00	16067.00
(ii) Unitemized.....	0.00	0.00
(iii) TOTAL of contributions from individuals ▶	13382.00	16067.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	1041.28
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	13382.00	17108.28
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	25000.00	25000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	25000.00	25000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	38382.00	42108.28

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	2370.30	4695.67
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	2370.30	4695.67

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1400.91
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	38382.00
25. SUBTOTAL (add Line 23 and Line 24).....	39782.91
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	2370.30
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	37412.61

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3A
Transaction ID :

Amended Form @ 10/13/2014

Form/Schedule:
Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 23
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Jeff Holmes for Congress

A. Full Name (Last, First, Middle Initial)
Jonathan Holmes

Mailing Address **PO Box 37277**

City **Honolulu** State **HI** Zip Code **96837-0277**

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

Name of Employer **Department of Education State of Hawaii** Occupation **Teacher, Brother of Candidate**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 09 / 2014

Transaction ID : VNVZECA4VC6

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Lisa J Bauman

Mailing Address **710 Twin Lakes Dr NE**

City **Grand Rapids** State **MI** Zip Code **49525-3456**

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

Name of Employer **Spectrum Health, Grand Rapids** Occupation **Physical Therapist, Sister of Candidat**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 10 / 2014

Transaction ID : VNVZECAAWY6

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Lisa J Bauman

Mailing Address **710 Twin Lakes Dr NE**

City **Grand Rapids** State **MI** Zip Code **49525-3456**

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

Name of Employer **Spectrum Health, Grand Rapids** Occupation **Physical Therapist, Sister of Candidat**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 10 / 2014

Transaction ID : VNVZECAAX51

Amount of Each Receipt this Period
500.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 23
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Jeff Holmes for Congress

A. Full Name (Last, First, Middle Initial)
Michael Holland DPM

Mailing Address 1904 Center Ave

City State Zip Code
Bay City MI 48708-6385

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

Name of Employer Occupation
The Foot Clinic, 1469 Mary Ct, Alma, MI Podiatrist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 10 / 2014

Transaction ID : VNVZECA4TY5

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Michael A Greeley

Mailing Address 868 W Fennwood Cir

City State Zip Code
North Muskegon MI 49445-2473

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

Name of Employer Occupation
Mortgage Bank, Brother-in-Law of Candi Mortgage Officer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 11 / 2014

Transaction ID : VNVZECAB7K4

Amount of Each Receipt this Period
1000.00

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

Mailing Address 925 Glencoe Rd

City State Zip Code
Alma MI 48801-1442

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

Name of Employer Occupation
Central Michigan University Police Officer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
100.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 11 / 2014

Transaction ID : VNVZECAAX10

Amount of Each Receipt this Period
100.00

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

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

1600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 23
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Jeff Holmes for Congress

A. Full Name (Last, First, Middle Initial)
Kurt Anderson

Mailing Address 364 W Wright Ave

City: Shepherd State: MI Zip Code: 48883-2502

FEC ID number of contributing federal political committee: C

Name of Employer: Mid-Michigan Medical Offices Occupation: Family Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 07 / 13 / 2014

Transaction ID : VNVZECACK40

Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
David K Austin MD

Mailing Address 4433 W Jackson Rd

City: Alma State: MI Zip Code: 48801-9599

FEC ID number of contributing federal political committee: C

Name of Employer: Alma Anesthesia Associates Occupation: Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 07 / 13 / 2014

Transaction ID : VNVZECACJ39

Amount of Each Receipt this Period: 500.00

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

Mailing Address 619 Gratiot Ave

City: Alma State: MI Zip Code: 48801-1710

FEC ID number of contributing federal political committee: C

Name of Employer: Alma College Occupation: Professor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 07 / 13 / 2014

Transaction ID : VNVZECACJP9

Amount of Each Receipt this Period: 250.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 23
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Jeff Holmes for Congress

A. Full Name (Last, First, Middle Initial)
Christine M Chesny

Mailing Address 1800 Center Ave

City State Zip Code
Bay City MI 48708-6346

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

Name of Employer Occupation
MidMichigan Stratford Village President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
200.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 13 / 2014

Transaction ID : VNVZECACHB9

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Janie A Diels Ph.D.

Mailing Address 915 Iowa St

City State Zip Code
Alma MI 48801-1450

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

Name of Employer Occupation
Alma College Professor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
50.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 13 / 2014

Transaction ID : VNVZECACJY2

Amount of Each Receipt this Period
50.00

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

Mailing Address 226 N State St

City State Zip Code
Alma MI 48801-2273

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 13 / 2014

Transaction ID : VNVZECACHD5

Amount of Each Receipt this Period
1000.00

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

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

1250.00

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

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

FOR LINE NUMBER: (check only one)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 10 OF 23

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NAME OF COMMITTEE (In Full)
Jeff Holmes for Congress

A. Full Name (Last, First, Middle Initial)
Joanne R Gilbert Ph.D.
 Mailing Address 619 Gratiot Ave
 City Alma State MI Zip Code 48801-1710
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Alma College Occupation Professor
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 13 / 2014
Transaction ID : VNVZECACJT1
 Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Tom J Haverbush
 Mailing Address 315 E Warwick Dr Ste A
 City Alma State MI Zip Code 48801-1083
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Thomas J. Haverbush, M.D., P.C. Occupation Orthopaedic Surgeon
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 13 / 2014
Transaction ID : VNVZECACHM1
 Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Eric Ho
 Mailing Address 300 E Warwick Dr
 City Alma State MI Zip Code 48801-1014
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Anesthesia Associates of Alma Occupation Anesthesiologist
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 13 / 2014
Transaction ID : VNVZECACJ47
 Amount of Each Receipt this Period
 500.00

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 23
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Jeff Holmes for Congress

A. Full Name (Last, First, Middle Initial)
Mohammad H Kudmani MD

Mailing Address 4200 W Harrison Rd

City Alma	State MI	Zip Code 48801-9639
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FEC ID number of contributing federal political committee.

Name of Employer Anesthesia Associates of Alma	Occupation Physician
---	-------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : VNVZECACJA4

Amount of Each Receipt this Period

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

Mailing Address 5460 Blue Heron Dr

City Alma	State MI	Zip Code 48801-9590
--------------	-------------	------------------------

FEC ID number of contributing federal political committee.

Name of Employer Family Health Psychiatric & Counseling	Occupation Psychologist
--	----------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : VNVZECACJK5

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
Mark A Santamaria

Mailing Address 4153 Sanctuary Dr

City Alma	State MI	Zip Code 48801-9231
--------------	-------------	------------------------

FEC ID number of contributing federal political committee.

Name of Employer MidMichigan Medical Center	Occupation President and CEO
--	---------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : VNVZECACJF4

Amount of Each Receipt this Period

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

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

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

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

FOR LINE NUMBER: (check only one)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 12 OF 23

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NAME OF COMMITTEE (In Full)
Jeff Holmes for Congress

A. Full Name (Last, First, Middle Initial)
Prakash Sarvepalli MD

Mailing Address 1412 Morning Mist

City State Zip Code
 Mt Pleasant MI 48858-7006

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

Name of Employer Occupation
 Internal Medicine Associates Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 101.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 13 / 2014

Transaction ID : VNVZECACHG9

Amount of Each Receipt this Period
 101.00

B. Full Name (Last, First, Middle Initial)
Indira R Saxena MD

Mailing Address 1016 Pineview Ct

City State Zip Code
 Alma MI 48801-2155

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

Name of Employer Occupation
 Indira Saxena OB-Gyn Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 101.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 13 / 2014

Transaction ID : VNVZECACHY0

Amount of Each Receipt this Period
 101.00

C. Full Name (Last, First, Middle Initial)
Zubair A Shaikh

Mailing Address 3106 Hunters Trl

City State Zip Code
 Mount Pleasant MI 48858-8802

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

Name of Employer Occupation
 MidMichigan Neurology Center Neurologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 13 / 2014

Transaction ID : VNVZECACJW7

Amount of Each Receipt this Period
 250.00

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

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

452.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 23
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Jeff Holmes for Congress

A. Full Name (Last, First, Middle Initial)
Jennifer Siefker

Mailing Address 432 Fairlane Dr

City Alma State MI Zip Code 48801-2104

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

Name of Employer Tri-Lakes Petroleum LLC Occupation Executive Vice President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **150.00**

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 13 / 2014

Transaction ID : VNVZECACHT8

Amount of Each Receipt this Period
150.00

B. Full Name (Last, First, Middle Initial)
Robin A Whitmore

Mailing Address 4543 Sanctuary Dr

City Alma State MI Zip Code 48801-9208

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

Name of Employer Mid-Michigan Medical Center-Gratiot Occupation Vice President of Nursing

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **100.00**

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 13 / 2014

Transaction ID : VNVZECACJ96

Amount of Each Receipt this Period
100.00

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

Mailing Address 206 Fleming Dr

City Alma State MI Zip Code 48801-2178

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **200.00**

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 14 / 2014

Transaction ID : VNVZECAH360

Amount of Each Receipt this Period
200.00

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

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

450.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 23
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Jeff Holmes for Congress

A. Full Name (Last, First, Middle Initial)
Elie Obeid MD

Mailing Address 941 W Broomfield Rd

City State Zip Code
Mount Pleasant MI 48858-9079

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

Name of Employer Occupation
Elie Obied, MD Pulmonologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
125.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 14 / 2014

Transaction ID : VNVZECAG211

Amount of Each Receipt this Period
125.00

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

Mailing Address 4170 E Timbercrest Dr

City State Zip Code
Bloomington IN 47408-9652

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

Name of Employer Occupation
Professor Emeritus Indiana University

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 14 / 2014

Transaction ID : VNVZECAH2A1

Amount of Each Receipt this Period
300.00

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

Mailing Address 6881 Mayfair Dr

City State Zip Code
Stanwood MI 49346-9600

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

Name of Employer Occupation
n/a homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
100.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 14 / 2014

Transaction ID : VNVZECAG1M8

Amount of Each Receipt this Period
100.00

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

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

525.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 23
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Jeff Holmes for Congress

A. Full Name (Last, First, Middle Initial)
Adrian Vanlonkhuyzen

Mailing Address 75 Old Mill Dr
Unit 20

City Holland State MI Zip Code 49423-5284

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 14 / 2014

Transaction ID : VNVZECAH2X1

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Michael J Moerlins

Mailing Address 1020 Pineview Ct

City Alma State MI Zip Code 48801-2155

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
25.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 15 / 2014

Transaction ID : VNVZECANRC3

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
Arlene F Nyman

Mailing Address 303 E End St

City Alma State MI Zip Code 48801-1140

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
30.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 15 / 2014

Transaction ID : VNVZECANR32

Amount of Each Receipt this Period
30.00

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

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

305.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 23
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Jeff Holmes for Congress

A. Full Name (Last, First, Middle Initial)
Martha Tune

Mailing Address 3484 Baldwin Ave

City Alliance State OH Zip Code 44601-5207

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 15 / 2014

Transaction ID : VNVZECANQZ1

Amount of Each Receipt this Period
 200.00

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

Mailing Address 3510 W Harrison Rd

City Alma State MI Zip Code 48801-9628

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

Name of Employer Revolution Electric LLC Occupation Electrician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 16 / 2014

Transaction ID : VNVZECATG51

Amount of Each Receipt this Period
 100.00

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

Mailing Address 315 E Warwick Dr

City Alma State MI Zip Code 48801-1083

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

Name of Employer Surgeon Occupation Great Lakes Surgical Associates

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 16 / 2014

Transaction ID : VNVZECAS54

Amount of Each Receipt this Period
 1000.00

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

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

1300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 23
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Jeff Holmes for Congress

A. Full Name (Last, First, Middle Initial)
Brent Moeggenborg MD

Mailing Address 10755 N Reid Rd

City Alma State MI Zip Code 48801-9576

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

Name of Employer Wassenaar, Frutiger, Moeggenborg, DDS Occupation Dentist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 16 / 2014

Transaction ID : VNVZECASVH2

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
James H Seals, Jr MD

Mailing Address 2181 W Cheesman Rd

City Alma State MI Zip Code 48801-9760

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

Name of Employer Seals Tacia Bartz Zainea Whitmore Occupation Optometrist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 16 / 2014

Transaction ID : VNVZECASVE8

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Peter Tacia MD

Mailing Address 1160 N Lawn Park

City Alma State MI Zip Code 48801-2108

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

Name of Employer Seals Tacia Bartz Zainea Whitmore Occupation Optometrist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 16 / 2014

Transaction ID : VNVZECASF3

Amount of Each Receipt this Period
 1000.00

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

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

2000.00

13382.00

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

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

FOR LINE NUMBER: PAGE 18 OF 23
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Jeff Holmes for Congress

A. Full Name (Last, First, Middle Initial)
Charles J Holmes MD

Mailing Address 4488 Arcada Dr

City Alma State MI Zip Code 48801-9593

FEC ID number of contributing federal political committee. **C H4MI04134**

Name of Employer Alma Family Practice, and Candidate fo Occupation The candidate, Jeff Holmes. Family Phy

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 25000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 14 / 2014

Transaction ID : VNVZECACKQ7

Amount of Each Receipt this Period
 _____ 25000.00

Loan from the candidate

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 Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

_____ 25000.00

_____ 25000.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 19 OF 23	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Jeff Holmes for Congress

Full Name (Last, First, Middle Initial) A. Sage Payment Solutions		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2014
Mailing Address 1750 Old Meadow Rd Ste 300		Amount of Each Disbursement this Period 3.18
City McLean State VA Zip Code 22102-4304	Purpose of Disbursement Payment for Credit Card payment services through our NGP website	
Candidate Name	Category/Type 003	Transaction ID : VNV069NHGZ4
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Credit Card service	
State: District:		

Full Name (Last, First, Middle Initial) B. Keystone Millbrook		Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2014
Mailing Address 3540 Jefferson Hwy		Amount of Each Disbursement this Period 267.12
City Grand Ledge State MI Zip Code 48837-9750	Purpose of Disbursement Magnetic car signs	
Candidate Name	Category/Type 006	Transaction ID : VNV069MR4S5
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) C. NGP VAN, Inc.		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2014
Mailing Address 1101 15t Street, NW Suite 500		Amount of Each Disbursement this Period 2100.00
City Washington State DC Zip Code 20005	Purpose of Disbursement Building Website, software for FEC compliance	
Candidate Name	Category/Type 001	Transaction ID : VNV069MY2M7
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Electronic, computer, software purchases	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2370.30
TOTAL This Period (last page this line number only).....	2370.30

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`-H9A-N5HCB

Form/Schedule: SB17

Transaction ID : VNV069NHGZ4

This is the company that NGP-VAN contracts with to provide credit card services, so contributors can pay through the website.

Form/Schedule: SB17

Transaction ID: VNV069MR4S5

Four Magnetic car signs

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : VNV069MY2M7

This is part of the costs for NGP VAN software, track donations and expenses, provide online credit card donation support. This helps create the reports for FEC compliance. Invoice #: 71616.

Form/Schedule:

Transaction ID:

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Jeff Holmes for Congress** Transaction ID : **VNVZECACKQ7L**

LOAN SOURCE Full Name (Last, First, Middle Initial) **[PERSONAL FUNDS]** Charles J Holmes MD
 Election: 2014
 Primary
 General
 Other (specify) ▼

Mailing Address 4488 Arcada Dr
 City Alma State MI ZIP Code 48801-9593

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
25000.00	0.00	25000.00

TERMS
 Date Incurred: M 07 / D 14 / Y 2014
 Date Due: M / D / Y none
 Interest Rate: none % (apr)
 Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....	▶	25000.00
TOTALS This Period (last page in this line only).....	▶	25000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SC/10

Transaction ID : VNVZECACKQ7L

Loan for campaign expenses

Form/Schedule:

Transaction ID: