

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

Check if different than previously reported. (ACC)

Alma

MI

48801

2. FEC IDENTIFICATION NUMBER ▼

C C00565432

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

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

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 / 11

D D / 04

Y Y Y Y 2014

in the State of

MI

5. Covering Period

M M / 10

D D / 16

Y Y Y Y 2014

through

M M / 11

D D / 24

Y Y Y Y 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

M M / 11

D D / 29

Y Y Y Y 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

FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Jeff Holmes for Congress

Report Covering the Period: From: M M / D D / Y Y Y Y 10 / 16 / 2014 To: M M / D D / Y Y Y Y 11 / 24 / 2014

	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))....	22847.00	100797.00
(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))	22847.00	100797.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	30862.03	29574.03
(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)).....	30862.03	29574.03
8. Cash on Hand at Close of Reporting Period (from Line 27).....	2994.36	
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).....	25550.00	

For further information contact:

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

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

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

- 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

Jeff Holmes for Congress

Report Covering the Period: From: 10 / 16 / 2014 To: 11 / 24 / 2014

I. RECEIPTS

COLUMN A Total this Period	COLUMN B Election Cycle Total as of 11 / 04 / 2014 (date of general election)	COLUMN C Total for 11 / 05 / 2014 (date after general election) through 11 / 24 / 2014 (last day of reporting period)
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other than Political Committees		
(i) Itemized (use Schedule A)		
10400.00	74749.00	0.00
(ii) Unitemized		
3447.00	17048.00	25.00
(iii) Total of contributions from individuals		
13847.00	91797.00	25.00
(b) Political Party Committees		
1500.00	1500.00	0.00
(c) Other Political Committees		
7500.00	7500.00	0.00

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 4 / 37

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* 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))		
22847.00	100797.00	25.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
0.00	0.00	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	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)		
0.00	0.00	0.00
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		
22847.00	100797.00	25.00

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 5 / 37

Write or Type Committee Name

Jeff Holmes for Congress

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

II. DISBURSEMENTS

	COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
17. OPERATING EXPENDITURES	<input type="text" value="30862.03"/>	<input type="text" value="29574.03"/>	<input type="text" value="1288.00"/>
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
19. LOAN REPAYMENTS:			
(a) Of Loans Made or Guaranteed by the Candidate	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Of All Other Loans	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
20. REFUNDS OF CONTRIBUTIONS TO:			
(a) Individuals/Persons Other Than Political Committees	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Political Party Committees	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 6 / 37

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
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(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	0.00	0.00
------	------	------

21. OTHER DISBURSEMENTS

36750.00	36750.00	0.00
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22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d) and 21)

67612.03	66324.03	1288.00
----------	----------	---------

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))

22847.00	100797.00	25.00
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IV. NET OPERATING EXPENDITURES

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

30862.03	29574.03	1288.00
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V. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	47759.39
24. TOTAL RECIEPTS THIS PERIOD (from Line 16).....	22847.00
25. SUBTOTAL (add Line 23 and Line 24).....	70606.39
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	67612.03
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	2994.36

**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 37
	<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)
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
 10 / 16 / 2014

Transaction ID : VNVZED5P8W1

Amount of Each Receipt this Period
 1000.00

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

Mailing Address 2020 S Mission St # 135

City Mount Pleasant State MI Zip Code 48858-4425

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
 10 / 16 / 2014

Transaction ID : VNVZED5P910

Amount of Each Receipt this Period
 1500.00

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

Mailing Address 4200 W Harrison Rd

City Alma State MI Zip Code 48801-9639

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

Name of Employer Anesthesia Associates of Alma Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 16 / 2014

Transaction ID : VNVZED5P8Z5

Amount of Each Receipt this Period
 1000.00

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

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

3500.00

**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 37
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Jeff Holmes for Congress

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

Mailing Address 5460 Blue Heron Dr

City Alma	State MI	Zip Code 48801-9590
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FEC ID number of contributing federal political committee. **C**

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

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
 10 / 16 / 2014

Transaction ID : VNVZED5P8Q1

Amount of Each Receipt this Period
1000.00

B. 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. **C**

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 16 / 2014

Transaction ID : VNVZED5P8R9

Amount of Each Receipt this Period
500.00

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

Mailing Address 3330 N Union Rd

City Alma	State MI	Zip Code 48801-9740
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FEC ID number of contributing federal political committee. **C**

Name of Employer Family Medical Care	Occupation Physician
---	-------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 16 / 2014

Transaction ID : VNVZED5P9M1

Amount of Each Receipt this Period
500.00

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 37
	<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 Wassenaar

Mailing Address 258 Blue Springs Ln

City State Zip Code
Charlottesville VA 22903-7111

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

Name of Employer Occupation
Wassenaar Architect Group Investment Management

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 18 / 2014

Transaction ID : VNVZED63ZB8

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
Thomas P Noyle

Mailing Address 707 Oakbrook Ct

City State Zip Code
Midland MI 48642-8908

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

Name of Employer Occupation
MMDG Partner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 20 / 2014

Transaction ID : VNVZED643P2

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Robert D Alexander

Mailing Address 1429 Somerset Close St

City State Zip Code
East Lansing MI 48823-2435

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 29 / 2014

Transaction ID : VNVZED86139

Amount of Each Receipt this Period
400.00

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

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

2900.00

**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 10 OF 37
	<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)
Chelsea M Holmes

Mailing Address 3740 N Halsted St

City Chicago State IL Zip Code 60613

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

Name of Employer Orange Occupation Information Tech sales and implementat

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 29 / 2014

Transaction ID : VNVZED83JZ2

Amount of Each Receipt this Period
2000.00

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).....

2000.00

10400.00

**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 37
	<input type="checkbox"/> 11a 12 <input checked="" 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)
MICHIGAN DEMOCRATIC STATE CENTRAL COMMITTEE

Mailing Address 606 Townsend St

City State Zip Code
Lansing MI 48933-2313

FEC ID number of contributing federal political committee. **C** C00031054

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 22 / 2014

Transaction ID : VNVZED6N9A7

Amount of Each Receipt this Period
1500.00

* In-Kind: VAN access

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).....

1500.00

1500.00

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

Form/Schedule: SA11B

Transaction ID : VNVZED6N9A7

VAN access

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 13 OF 37
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" 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

Full Name (Last, First, Middle Initial)
A. UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Mailing Address 8000 E Jefferson Ave
City Detroit State MI Zip Code 48214-3963

FEC ID number of contributing federal political committee. **C C00002840**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
Election Cycle-to-Date **2500.00**

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 23 / 2014
Transaction ID : VNVZED6R4H1

Amount of Each Receipt this Period
2500.00

Full Name (Last, First, Middle Initial)
B. U A LOCAL 85 POLITICAL ACTION COMMITTEE

Mailing Address PO Box 6547
City Saginaw State MI Zip Code 48608-6547

FEC ID number of contributing federal political committee. **C C00281303**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
Election Cycle-to-Date **5000.00**

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 25 / 2014
Transaction ID : VNVZED74V02

Amount of Each Receipt this Period
5000.00

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

Mailing Address
City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)
Election Cycle-to-Date

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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....	7500.00
TOTAL This Period (last page this line number only).....	7500.00

**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 14 OF 37	
	<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. Jessica L Montgomery		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014
Mailing Address 8855 N 83rd St		Amount of Each Disbursement this Period 2000.00 Transaction ID : VNV069Q0MQ7
City Omaha	State NE Zip Code 68122-2269	
Purpose of Disbursement Consulting Fees for campaign		consulting fee
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type 001
State: District:		

Full Name (Last, First, Middle Initial) B. Elisa Ramos		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014
Mailing Address 2167 Twilight Pass		Amount of Each Disbursement this Period 40.27 Transaction ID : VNV069Q0PZ6
City Holt	State MI Zip Code 48842-7708	
Purpose of Disbursement Reimbursement for Large map of district for planning		Large map of district to plan travel
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type 001
State: District:		

Full Name (Last, First, Middle Initial) c. Sawicki & Son		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2014
Mailing Address 1521 W Lafayette Blvd		Amount of Each Disbursement this Period 344.50 Transaction ID : VNV069Q5QH7
City Detroit	State MI Zip Code 48216-1926	
Purpose of Disbursement Final payment on large campaign signs		Final payment on large campaign signs
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type 006
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2384.77
TOTAL This Period (last page this line number only).....	

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

Form/Schedule: SB17

Transaction ID : VNV069Q0MQ7

Consulting fee for communications and scheduling services for Sept 16 to Oct 16, 2014

Form/Schedule: SB17

Transaction ID: VNV069Q0PZ6

Reimbursed Elisa for purchasing a large map of the district. This will help plan travel as we traverse our 15 county district

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

Form/Schedule: SB17

Transaction ID : VNV069Q5QH7

This is the other half of the payment on large campaign signs to match up with the Oct 14 payment

Form/Schedule:

Transaction ID:

**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 17 OF 37	
	<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. Deep Blue Strategies		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2014
Mailing Address 2130 W Chicago Ave 2F		Amount of Each Disbursement this Period 6000.00
City Chicago State IL Zip Code 60622-4217	Purpose of Disbursement Tracking Survey Oct 8-10	Transaction ID : VNV069Q5D11
Candidate Name	Category/Type 005	Tracking Survey Oct. 8-10
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Sawicki & Son		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2014
Mailing Address 1521 W Lafayette Blvd		Amount of Each Disbursement this Period 916.90
City Detroit State MI Zip Code 48216-1926	Purpose of Disbursement Campaign Signs	Transaction ID : VNV069Q79N5
Candidate Name	Category/Type 006	Campaign Signs
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Alma College		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2014
Mailing Address 614 W Superior St		Amount of Each Disbursement this Period 1.68
City Alma State MI Zip Code 48801-1504	Purpose of Disbursement Printing	Transaction ID : VNV069Q9RH0
Candidate Name	Category/Type 001	Printing
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	6918.58
TOTAL This Period (last page this line number only).....	

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

Form/Schedule: SB17

Transaction ID : VNV069Q5D11

This was for polling data and tracking survey Oct. 8-10

Form/Schedule: SB17

Transaction ID: VNV069Q79N5

For Campaign signs

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

Form/Schedule: SB17

Transaction ID : VNV069Q9RH0

Cheaper printing service

Form/Schedule:

Transaction ID:

**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 20 OF 37	
	<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. Alma College		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2014
Mailing Address 614 W Superior St		Amount of Each Disbursement this Period 4.80
City Alma State MI Zip Code 48801-1504	Purpose of Disbursement Printing	
Candidate Name	Category/Type 001	Transaction ID : VNV069Q9RJ8
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Printing	

Full Name (Last, First, Middle Initial) B. MICHIGAN DEMOCRATIC STATE CENTRAL COMMITEE		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2014
Mailing Address 606 Townsend St		Amount of Each Disbursement this Period 1500.00
City Lansing State MI Zip Code 48933-2313	Purpose of Disbursement VAN access	
Candidate Name MICHIGAN DEMOCRATIC STATE CENTRAL COMMITEE	Category/Type	Transaction ID : VNVZED6N9A7I
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	* In-Kind Received	

Full Name (Last, First, Middle Initial) c. Ariana A Borrello		Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2014
Mailing Address 717 Gratiot Ave		Amount of Each Disbursement this Period 2000.00
City Alma State MI Zip Code 48801-1142	Purpose of Disbursement final payment consulting fees	
Candidate Name	Category/Type 001	Transaction ID : VNV069Q9RB3
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	final payment consulting fees	

SUBTOTAL of Disbursements This Page (optional).....	3504.80
TOTAL This Period (last page this line number only).....	

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

Form/Schedule: SB17

Transaction ID : VNV069Q9RJ8

Cheaper printing Services

Form/Schedule: SB17

Transaction ID: VNV069Q9RB3

This is the final payment through Nov. 4, 2014 for Field Operation Consulting Fees

**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 22 OF 37	
	<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. Chad M Schoch		Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2014
Mailing Address 907 Grand Ave		Amount of Each Disbursement this Period 2667.00
City Owosso State MI Zip Code 48867-4517	Purpose of Disbursement Final payment consulting fees	Transaction ID : VNV069Q9RC1
Candidate Name	Category/Type 001	Final payment consulting fees
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Alma College		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address 614 W Superior St		Amount of Each Disbursement this Period 460.50
City Alma State MI Zip Code 48801-1504	Purpose of Disbursement Video production of events and for online advertising	Transaction ID : VNV069QBC08
Candidate Name	Category/Type 004	Video production work
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Capital One Bank		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address PO Box 6492		Amount of Each Disbursement this Period 2648.00
City Carol Stream State IL Zip Code 60197-6492	Purpose of Disbursement Radio Ad Buys	Transaction ID : VNV069QC2Y0
Candidate Name	Category/Type 004	[MEMO ITEM] * Radio Ad Buys
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3127.50
TOTAL This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : VNV069Q9RC1

This is the final payment through Nov. 4 for Field Operations Consulting Fees

Form/Schedule: SB17

Transaction ID: VNV069QBC08

Video Production Work for online ad, event recording

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

Form/Schedule: SB17

Transaction ID : VNV069QC2Y0

This purchase required a credit card payment because it was higher than daily limit on Campaign account.

Form/Schedule:

Transaction ID:

**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 25 OF 37	
	<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. Amber McAndrews		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 1736 Stockman Rd		Amount of Each Disbursement this Period 2500.00
City Mt Pleasant	State MI	
Zip Code 48858-4219	Purpose of Disbursement Consulting Fees, Oct 1 to Nov 1	Transaction ID : VNV069QBGP8
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Consulting fee for Oct 1 to Nov 1
State: District:		

Full Name (Last, First, Middle Initial) B. Townsquare Media		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 3420 Pinetree Rd		Amount of Each Disbursement this Period 1550.00
City Lansing	State MI	
Zip Code 48911-4207	Purpose of Disbursement Radio Ad Buys	Transaction ID : VNV069QBQR0
Candidate Name	Category/Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Radio Ad Buys
State: District:		

Full Name (Last, First, Middle Initial) c. A Hearst Newspaper		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014
Mailing Address 124 S McDonald St		Amount of Each Disbursement this Period 882.00
City Midland	State MI	
Zip Code 48640-5161	Purpose of Disbursement Midland Daily News Advertisement	Transaction ID : VNV069QC4Z3
Candidate Name	Category/Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4932.00
TOTAL This Period (last page this line number only).....	

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

Form/Schedule: SB17

Transaction ID : VNV069QBG8

Payment for consulting fees for finance advising

Form/Schedule: SB17

Transaction ID: VNV069QBQR0

To buy radio ad spots from Townsquare Media.

**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 27 OF 37	
	<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. Digital First Media		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014
Mailing Address 5 Hanover Square 25th Floor		Amount of Each Disbursement this Period 518.00
City New York	State NY	
Zip Code 10005-2850	Purpose of Disbursement Morning Sun Advertisement	Transaction ID : VNV069QC4Y6
Candidate Name	Category/ Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Grenax Broadcasting LLC		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014
Mailing Address 5847 Venture Way		Amount of Each Disbursement this Period 690.00
City Mt Pleasant	State MI	
Zip Code 48858-1152	Purpose of Disbursement Radio Ads	Transaction ID : VNV069QNGB1
Candidate Name	Category/ Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	For radio ads on WCFX
State: District:		

Full Name (Last, First, Middle Initial) c. Jessica L Montgomery		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2014
Mailing Address 8855 N 83rd St		Amount of Each Disbursement this Period 1200.00
City Omaha	State NE	
Zip Code 68122-2269	Purpose of Disbursement Final Payment consulting fees	Transaction ID : VNV069QCGY0
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Final Payment consulting fees
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2408.00
TOTAL This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : VNV069QNGB1

For Radio Ad on 11-4-2014

Form/Schedule: SB17

Transaction ID: VNV069QCGY0

Final Payment for Communications consulting

**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 29 OF 37	
	<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. Elisa Ramos		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2014
Mailing Address 2167 Twilight Pass		Amount of Each Disbursement this Period 3300.00 Transaction ID : VNV069QCGZ8
City Holt State MI Zip Code 48842-7708	Purpose of Disbursement Final Payment consulting fees Candidate Name 001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	Final Payment Consulting fees

Full Name (Last, First, Middle Initial) B. Sean M Whiting		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2014
Mailing Address 412 Gratiot Ave		Amount of Each Disbursement this Period 2500.00 Transaction ID : VNV069QCH06
City Alma State MI Zip Code 48801-1811	Purpose of Disbursement Final Payment consulting fees Candidate Name 001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	Final payment Consulting fees

Full Name (Last, First, Middle Initial) C. Amber McAndrews		Date of Disbursement M M / D D / Y Y Y Y 11 / 11 / 2014
Mailing Address 1736 Stockman Rd		Amount of Each Disbursement this Period 1250.00 Transaction ID : VNV069QDVT0
City Mt Pleasant State MI Zip Code 48858-4219	Purpose of Disbursement Final payment consulting fees Candidate Name 001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	Final payment Consulting fees

SUBTOTAL of Disbursements This Page (optional).....	7050.00
TOTAL This Period (last page this line number only).....	30325.65

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

Form/Schedule: SB17

Transaction ID : VNV069QCGZ8

Final payment for consulting with Field, Communications, Canvassing

Form/Schedule: SB17

Transaction ID: VNV069QCH06

Final payment for consulting for Field Organization, Campaign organization, Management duties

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

Form/Schedule: SB17

Transaction ID : VNV069QDVT0

Final payment for consulting fees for campaign

Form/Schedule:

Transaction ID:

**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 32 OF 37	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Jeff Holmes for Congress

Full Name (Last, First, Middle Initial) A. Michigan Democratic Party		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2014
Mailing Address 606 Townsend St		Amount of Each Disbursement this Period 36750.00
City Lansing State MI Zip Code 48933-2313	Purpose of Disbursement Party Contribution	Transaction ID : VNV069Q7925
Candidate Name	011 Category/ Type	Contribution to Party
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	36750.00
TOTAL This Period (last page this line number only).....	36750.00

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

Form/Schedule: SB21

Transaction ID : VNV069Q7925

Contribution to Party

Form/Schedule:

Transaction ID:

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Jeff Holmes for Congress

Transaction ID : **VNVZECACKQ7L**

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2014

Charles J Holmes MD

Primary

General

Other (specify) ▼

Mailing Address
4488 Arcada Dr

City State ZIP Code
Alma MI 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

Date Due

Interest Rate

Secured:

M 07 M

D 14 D

Y 2014 Y

M M

D D

Y none Y

none % (apr)

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)..... ▶

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:

SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Jeff Holmes for Congress

Transaction ID : **VNVZECXN304L**

LOAN SOURCE Full Name (Last, First, Middle Initial)
Charles J Holmes MD

[PERSONAL FUNDS]

Election: 2014

Primary
 General
 Other (specify) ▼

Mailing Address
4488 Arcada Dr

City State ZIP Code
Alma MI 48801-9593

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
550.00 0.00 550.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 09 / D 01 / Y 2014 M M / D D / Y none none % (apr) 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)..... ▶ 550.00
TOTALS This Period (last page in this line only)..... ▶ 25550.00

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 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SC/10

Transaction ID : VNVZECXN304L

This payment was made to my American Express; NGP VAN billed the credit card instead of directly to the campaign.
I paid it as a loan to the campaign.

Form/Schedule:

Transaction ID: