

FEC FORM 1

STATEMENT OF ORGANIZATION

(See instructions)

Office use only

1. NAME OF COMMITTEE (in full)

(Check if name is changed)

Example: If typing, type over the lines

12FE4M5

HOLMES FOR CONGRESS

ADDRESS (number and street)

11850 KEMPER ROAD SUITE D

(Check if address is changed)

AUBURN

CA

95603

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

njrhs@inreach.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

HolmesforCongress.com

COMMITTEE'S FAX NUMBER

5308886457

2. DATE

08 / 09 / 2007

3. FEC IDENTIFICATION NUMBER

C C00414441

4. IS THIS STATEMENT

NEW (N)

OR

AMENDED (A)

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

Type or Print Name of Treasurer

E. Ken Tokutomi

Signature of Treasurer

Electronically Filed by E. Ken Tokutomi

Date

08 / 09 / 2007

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. S437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS

Office Use Only

For further information contact: Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100

FEC FORM 1 (Revised 02/2003)

5. TYPE OF COMMITTEE (Check One)

- (a) This committee is a principal campaign committee. (Complete the candidate information below.)
- (b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate **JOHN MICHAEL HOLMES**

Candidate Party Affiliation **REP** Office Sought: House Senate President State **CA** District **04**

- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate

- (d) This committee is a (National, State (or subordinate) committee of the (Democratic, Republican, etc.) Party.
- (e) This committee is a separate segregated fund
- (f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee.

6. Name of Any Connected Organization or Affiliated Committee

Mailing Address

 -
CITY ▲ STATE ▲ ZIP CODE ▲

Relationship

Type of Connected Organization:

- Corporation Corporation w/o Capital Stock Labor Organization
- Membership Organization Trade Association Cooperative

Write or Type Committee Name

HOLMES FOR CONGRESS

- 7. **Custodian of Records:** Identify by name, address, (phone number -- optional), and position of the person in possession of Committee books and records.

Full Name **E. Ken Tokutomi**

Mailing Address **11850 Kemper Road**

Suite D

Auburn CA 95603

Title or Position ▼ **CPA** CITY ▲ STATE ▲ ZIP CODE ▲

Telephone number **530 888 1303**

- 8. **Treasurer:** List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer **E. Ken Tokutomi**

Mailing Address **11850 Kemper Road**

Suite D

Auburn CA 95603

Title or Position ▼ **CPA** CITY ▲ STATE ▲ ZIP CODE ▲

Telephone number **530 888 1303**

Full Name of Designated Agent

Mailing Address

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Telephone number

9. **Banks or Other Depositories:** List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

Umpqua Bank

Mailing Address

11795 Atwood Road

Auburn

CA

95603 -

CITY ▲

STATE ▲

ZIP CODE ▲