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FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3	For An Authorized Committee					Office Use Only			
I. NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼		ample: If typing er the lines.	, type	12FE4M5				
GARCIA HOLMES F	OR CONGRESS								
DDD500 (PO BOX 92193								
DDRESS (number and street) •		1 1 1 1							
Check if different than previously reported. (ACC)	ALBUQUERQUE					199			
FEC IDENTIFICATION	NUMBER ▼	CITY ▲		;	STATE A	ZIP CODE ▲			
C C00724245		s. IS THIS REPORT	NEW (N)	OR	AMENDED (A)	STATE ▼ DISTRICT			
. TYPE OF REPORT	(Choose One) (b)	12-Day PRE	-Election Repor	t for the:					
(a) Quarterly Reports:		П	Primary (12P)	Г	General (12G) Runoff (12R)			
April 15 Quarter	ly Report (Q1)	H		00)					
July 15 Quarter	y Report (Q2)		Convention (1	2C)	Special (12S)				
October 15 Qua	arterly Report (Q3)	Election on	M M /	D D /	Y	in the State of			
January 31 Year	r-End Report (YE) (c)	30-Day POS	T -Election Repo	ort for the:					
			General (30G)		Runoff (30R)	Special (30S)			
Termination Rep	oort (TER)	Election on	M M /	D D /	Y	in the State of			
Covering Period	M M / D D / Y	ү ү ү ү ү 2022	through	M M M	/ D D / Y	Y Y Y 2022			
certify that I have examined ope or Print Name of Treas	Catania, Pasquale	•	owledge and b	elief it is tr	ue, correct and co	omplete.			
•	Catania, Pasquale, , ,		[Electronically F	iled] [Date 01	30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
OTE: Submission of false, er	roneous, or incomplete in	formation may	subject the pers	on signing t	his Report to the p	penalties of 52 U.S.C. §3010			
Office			<u> </u>			•			
Use Only						FEC FORM 3 (Revised 05/2016)			

SUMMARY PAGE

of Receipts and Disbursements

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FEC Form 3 (Revised 05/2016)

Write or Type Committee Name
GARCIA HOLMES FOR CONGRESS

2022 2022 12 29 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period **Election Cycle-to-Date** Net Contributions (other than loans) **Total Contributions** (a) 0.00 256468.59 (other than loans) (from Line 11(e)) (b) Total Contribution Refunds 0.00 0.00 (from Line 20(d)) (c) Net Contributions (other than loans) 0.00 256468.59 (subtract Line 6(b) from Line 6(a)) 7. Net Operating Expenditures (a) Total Operating Expenditures 25.00 243959.25 (from Line 17) (b) Total Offsets to Operating 0.00 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 25.00 243959.25 (subtract Line 7(b) from Line 7(a)) Cash on Hand at Close of 1699.35 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 4165.78 Schedule C and/or Schedule D).....

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 05/2016)

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394463.21

Write or Type Committee Name

16. **TOTAL RECEIPTS** (add Lines 11(e), 12, 13(c), 14, and 15)

(Carry Total to Line 24, page 4).....

GARCIA HOLMES FOR CONGRESS

11 29 2022 12 31 2022 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. RECEIPTS **Total This Period Election Cycle-to-Date** 11. CONTRIBUTIONS (other than loans) FROM: Individuals/Persons Other Than Political Committees 0.00 183481.05 (i) Itemized (use Schedule A)..... 64617.54 0.00 (ii) Unitemized (iii) TOTAL of contributions 0.00 248098.59 from individuals 0.00 0.00 Political Party Committees..... Other Political Committees 0.00 8370.00 (such as PACs) 0.00 0.00 The Candidate..... (d) TOTAL CONTRIBUTIONS (other than loans) 0.00 256468.59 (add Lines 11(a)(iii), (b), (c), and (d)).. 12. TRANSFERS FROM OTHER 0.00 0.00 AUTHORIZED COMMITTEES 13. LOANS: (a) Made or Guaranteed by the 0.00 137994.00 Candidate..... 0.00 0.00 (b) All Other Loans..... TOTAL LOANS 0.00 137994.00 (add Lines 13(a) and (b))..... 14. OFFSETS TO OPERATING **EXPENDITURES** 0.00 0.00 (Refunds, Rebates, etc.) 15. OTHER RECEIPTS 0.00 0.62 (Dividends, Interest, etc.)

0.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 05/2016)

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	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date		
17.	OPERATING EXPENDITURES	25.00	243959.25		
	TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00		
19.	LOAN REPAYMENTS:				
	(a) Of Loans Made or Guaranteed by the Candidate	0.00	137994.00		
		0.00	0.00		
	(b) Of All Other Loans (c) TOTAL LOAN REPAYMENTS	0.00	0.00		
	(add Lines 19(a) and (b))	0.00	137994.00		
20.	REFUNDS OF CONTRIBUTIONS TO:				
	(a) Individuals/Persons Other Than Political Committees	0.00	0.00		
	man Political Committees	7 7 7			
	(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		
	TOTAL DISBURSEMENTS	25.00	381953.25		
	(add Lines 17, 18, 19(c), 20(d), and 21)				
	III. CASH SU	MMARY	1724.35		
23.	CASH ON HAND AT BEGINNING OF REPOF	RTING PERIOD	112-1.00		
24 TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)			0.00		
25.	SUBTOTAL (add Line 23 and Line 24)		1724.35		
26.	TOTAL DISBURSEMENTS THIS PERIOD (from	m Line 22)	25.00		
27.	CASH ON HAND AT CLOSE OF REPORTING	S PERIOD	1699.35		
	(subtract Line 26 from Line 25)		1099.33		

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

PAGE 5 OF FOR LINE NUMBER: (check only one)

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Transaction ID: SC/10.7760 NAME OF COMMITTEE (In Full) GARCIA HOLMES FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2022 Memo Item Primary GARCIA HOLMES, MICHELLE, , , General Mailing Address PO BOX 92193 Other (specify) City State ZIP Code X Personal Funds of the Candidate NM 87199 **ALBUQUERQUE** Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 40.55 0.00 40.55 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D24D M 04M **Ž**02Ž upon demand x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 40.55 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.

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

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Transaction ID: SC/10.7727 NAME OF COMMITTEE (In Full) GARCIA HOLMES FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2022 Memo Item Primary GARCIA HOLMES, MICHELLE, , , General Mailing Address PO BOX 92193 Other (specify) City State ZIP Code X Personal Funds of the Candidate NM 87199 **ALBUQUERQUE** Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 23.58 0.00 23.58 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D01D M 05M **Ž**02Ž upon demand x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 23.58 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.

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

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Transaction ID: SC/10.7728 NAME OF COMMITTEE (In Full) GARCIA HOLMES FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2022 Memo Item Primary GARCIA HOLMES, MICHELLE, , , General Mailing Address PO BOX 92193 Other (specify) City State ZIP Code X Personal Funds of the Candidate NM 87199 **ALBUQUERQUE** Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 26.94 0.00 26.94 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D01D M 05M **Ž**02Ž upon demand x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 26.94 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.

Use separate schedule(s) for each category of the

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X 13a (check only one) Detailed Summary Page 13b Transaction ID: SC/10.7729 NAME OF COMMITTEE (In Full) GARCIA HOLMES FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2022 Memo Item Primary GARCIA HOLMES, MICHELLE, , , General Mailing Address PO BOX 92193 Other (specify) City State ZIP Code X Personal Funds of the Candidate NM 87199 **ALBUQUERQUE** Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 25.00 0.00 25.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D01D M 05M **Ž**02Ž ňone x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 25.00 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.

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

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Transaction ID: SC/10.7738 NAME OF COMMITTEE (In Full) GARCIA HOLMES FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2022 Memo Item Primary GARCIA HOLMES, MICHELLE, , , General Mailing Address PO BOX 92193 Other (specify) City State ZIP Code X Personal Funds of the Candidate NM 87199 **ALBUQUERQUE** Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 43.14 0.00 43.14 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D01D M 05M **Ž**02Ž upon demand x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 43.14 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.

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

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X 13a 13b Transaction ID: SC/10.7739 NAME OF COMMITTEE (In Full) GARCIA HOLMES FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2022 Memo Item Primary GARCIA HOLMES, MICHELLE, , , General Mailing Address PO BOX 92193 Other (specify) City State ZIP Code X Personal Funds of the Candidate NM 87199 **ALBUQUERQUE** Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 60.69 0.00 60.69 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D01D M 05M **Ž**02Ž upon demand x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 60.69 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.

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

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Transaction ID: SC/10.7741 NAME OF COMMITTEE (In Full) GARCIA HOLMES FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2022 Memo Item Primary GARCIA HOLMES, MICHELLE, , , General Mailing Address PO BOX 92193 Other (specify) City State ZIP Code X Personal Funds of the Candidate NM 87199 **ALBUQUERQUE** Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 120.00 0.00 120.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D01D M 05M **Ž**02Ž upon demand x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 120.00 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.

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

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Transaction ID: SC/10.7743 NAME OF COMMITTEE (In Full) GARCIA HOLMES FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2022 Memo Item Primary GARCIA HOLMES, MICHELLE, , , General Mailing Address PO BOX 92193 Other (specify) City State ZIP Code X Personal Funds of the Candidate NM 87199 **ALBUQUERQUE** Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 62.55 0.00 62.55 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D01D M 05M **Ž**02Ž upon demand x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 62.55 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.

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

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Transaction ID: SC/10.7744 NAME OF COMMITTEE (In Full) GARCIA HOLMES FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2022 Memo Item Primary GARCIA HOLMES, MICHELLE, , , General Mailing Address PO BOX 92193 Other (specify) City State ZIP Code X Personal Funds of the Candidate NM 87199 **ALBUQUERQUE** Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 147.22 0.00 147.22 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D01D M 05M **Ž**02Ž upon demand x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 147.22 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.

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

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AME OF COMMITTEE (In Full) GARCIA HOLMES FOR CON	GRES	S			Transac	ction ID :	SC/10.7745		
LOAN SOURCE Full Name (Last, Fir GARCIA HOLMES, MICHEL	[Memo Item	1	n: 2022 imary eneral					
Mailing Address PO BOX 92193						1	her (specify)	•	
City	S	State ZIP Code							
ALBUQUERQUE		NM	87199			X P	ersonal Fun	ds of the	Candidate
Original Amount of Loan Cumulative Payment 1				To Date Balance Outstanding at Close of This Period				This Period	
288.73	3	ļ.,	,	0.0	00			28	38.73
TERMS Date Incurred					Interest Rate (If none, enter			Secure	d:
M05 ^M / D01 ^D / Y Ž02Ž Y	M	M / D D	/ upo	n ^v demand		00	% (apr)	Ye	s X No
List All Endorsers or Guarantors (if	any) to	Loan Source							
1. Full Name (Last, First, Middle Initi	ial)			Name of Employer					
Mailing Address				Occupation	<u> </u>				
				Amount					
City	tate	ZIP Code		Guaranteed Outstanding		7	7		
2. Full Name (Last, First, Middle Initial)				Name of Employer					
Mailing Address				Occupation					
				Amount					_
City	tate	ZIP Code		Guaranteed Outstanding		7	7		
3. Full Name (Last, First, Middle Initial)				Name of Employer					
Mailing Address				Occupation					
				Amount			$\overline{}$		
City	tate	ZIP Code		Guaranteed Outstanding		7	7		
4. Full Name (Last, First, Middle Initia	al)			Name of Employer					
Mailing Address				Occupation	ı				
				Amount					
City	tate	ZIP Code		Guaranteed Outstanding		7	7		
SUBTOTALS This Period This Page (optional)					8.73				
FOTALS This Period (last page in this lin	ne only)				▶				
Carry outstanding balance only to LINE	3, Sched	dule D, for this	line. If i	no Schedule	D, carry forv	vard to a	appropriate	line of S	ummary.

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

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Transaction ID: SC/10.7746 NAME OF COMMITTEE (In Full) GARCIA HOLMES FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2022 Memo Item Primary GARCIA HOLMES, MICHELLE, , , General Mailing Address PO BOX 92193 Other (specify) City State ZIP Code X Personal Funds of the Candidate NM 87199 **ALBUQUERQUE** Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 174.00 0.00 174.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D01D M 05M **Ž**02Ž upon demand x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 174.00 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.

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

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Transaction ID: SC/10.7747 NAME OF COMMITTEE (In Full) GARCIA HOLMES FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2022 Memo Item Primary GARCIA HOLMES, MICHELLE, , , General Mailing Address PO BOX 92193 Other (specify) City State ZIP Code X Personal Funds of the Candidate NM 87199 **ALBUQUERQUE** Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 51.77 0.00 51.77 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D01D M 05M **Ž**02Ž upon demand x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 51.77 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.

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

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OF

13b Transaction ID: SC/10.7748 NAME OF COMMITTEE (In Full) GARCIA HOLMES FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2022 Memo Item Primary GARCIA HOLMES, MICHELLE, , , General Mailing Address PO BOX 92193 Other (specify) City State ZIP Code X Personal Funds of the Candidate NM 87199 **ALBUQUERQUE** Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 174.00 0.00 174.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D01D M 05M **Ž**02Ž upon demand x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 174.00 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.

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

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Transaction ID: SC/10.7749 NAME OF COMMITTEE (In Full) GARCIA HOLMES FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2022 Memo Item Primary GARCIA HOLMES, MICHELLE, , , General Mailing Address PO BOX 92193 Other (specify) City State ZIP Code X Personal Funds of the Candidate NM 87199 **ALBUQUERQUE** Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 100.00 0.00 100.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D01D M 05M **Ž**02Ž upon demand x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 100.00 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.

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

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NAME OF COMMITTEE (In Full)	-00		Transac	ction ID : SC/10.7750			
GARCIA HOLMES FOR CONGRE LOAN SOURCE Full Name (Last, First, Mi GARCIA HOLMES, MICHELLE,	ddle Initial)		☐ Memo Item	x Primary			
Mailing Address PO BOX 92193				General Other (specify) ▼			
City	State	ZIP Code 87199		Personal Funds of the Candidate			
Original Amount of Loan	Cumulative Pay	ment To Date	Date Balance Outstanding at Close of This Peric				
1741.46	3	,	0.00	1741.46			
TERMS Date Incurred	D	Date Due Interest R. (If none, en					
M05 ^M / D01 D / Y Ž02Ž Y	M M / D D	[/] upon deman	ď	00 % (apr) Yes X No			
List All Endorsers or Guarantors (if any)	to Loan Source						
1. Full Name (Last, First, Middle Initial)		Name of	of Employer				
Mailing Address		Occupa	Occupation				
			Amount				
City	ZIP Code	Guaran Outstar		9 9 9			
2. Full Name (Last, First, Middle Initial)	'	Name o	Name of Employer				
Mailing Address		Occupa	Occupation				
			Amount Guaranteed				
City	ZIP Code	Outstar		7 7 7			
3. Full Name (Last, First, Middle Initial)		Name o	Name of Employer				
Mailing Address		Occupa	Occupation				
		Amoun					
City	ZIP Code	Guaran Outstar		y y x			
4. Full Name (Last, First, Middle Initial)		Name o	Name of Employer				
Mailing Address	Mailing Address			Occupation			
City State	ZIP Code	Amouni Guaran					
Sity	211 0000	Outstar	nding:	7 7 7			
SUBTOTALS This Period This Page (optional)				1741.46			
TOTALS This Period (last page in this line only	ly)		············	y			
Carry outstanding balance only to LINE 3, Sc	hedule D, for this	line. If no Sche	dule D, carry for	ward to appropriate line of Summary.			

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Transaction ID: SC/10.7758 NAME OF COMMITTEE (In Full) GARCIA HOLMES FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2022 Memo Item Primary GARCIA HOLMES, MICHELLE, , , General Mailing Address PO BOX 92193 Other (specify) City State ZIP Code X Personal Funds of the Candidate NM 87199 **ALBUQUERQUE** Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 120.00 0.00 120.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D01D M 05M **Ž**02Ž upon demand x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 120.00 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.

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Transaction ID: SC/10.7759 NAME OF COMMITTEE (In Full) GARCIA HOLMES FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2022 Memo Item Primary GARCIA HOLMES, MICHELLE, , , General Mailing Address PO BOX 92193 Other (specify) City State ZIP Code X Personal Funds of the Candidate NM 87199 **ALBUQUERQUE** Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 38.71 0.00 38.71 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D01D M 05M **Ž**02Ž upon demand x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 38.71 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.

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Transaction ID: SC/10.7790 NAME OF COMMITTEE (In Full) GARCIA HOLMES FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2022 Memo Item Primary GARCIA HOLMES, MICHELLE, , , General Mailing Address PO BOX 92193 Other (specify) City State ZIP Code X Personal Funds of the Candidate NM 87199 **ALBUQUERQUE** Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 12.44 0.00 12.44 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D03D M 05M **Ž**02Ž upon demand x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 12.44 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.

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NAME OF COMMITTEE (In Full) GARCIA HOLMES FOR CONG	RESS	Transaction ID : SC/10.7772
LOAN SOURCE Full Name (Last, First GARCIA HOLMES, MICHELI	☐ Memo Item	
Mailing Address PO BOX 92193	Other (specify) ▼	
City	State	ZIP Code 87199 Personal Funds of the Candidate
Original Amount of Loan	Cumulative Pay	/ment To Date Balance Outstanding at Close of This Period
100.39		0.00 100.39
TERMS Date Incurred M05M / P12P / Y 2022	M M / D D	ate Due Interest Rate (If none, enter 0) / upon demand 0.00 // upon demand 0.00
List All Endorsers or Guarantors (if a	ny) to Loan Source	% (apr) Yes X No
Full Name (Last, First, Middle Initial)	• •	Name of Employer
Mailing Address		Occupation
City	te ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	l .	Name of Employer
Mailing Address		Occupation
City	te ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City	te ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City	te ZIP Code	Amount Guaranteed Outstanding:
SUBTOTALS This Period This Page (option	nal)	100.39
TOTALS This Period (last page in this line	only)	
Carry outstanding balance only to LINE 3	, Schedule D. for this	s line. If no Schedule D, carry forward to appropriate line of Summary.

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Transaction ID: SC/10.8048 NAME OF COMMITTEE (In Full) GARCIA HOLMES FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2022 Memo Item Primary GARCIA HOLMES, MICHELLE, , , General X Mailing Address PO BOX 92193 Other (specify) City State ZIP Code X Personal Funds of the Candidate NM 87199 **ALBUQUERQUE** Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 204.48 0.00 204.48 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 ^D27^D M 06M **Ž**02Ž upon demand x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 204.48 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.

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Transaction ID: SC/10.7877 NAME OF COMMITTEE (In Full) GARCIA HOLMES FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2022 Memo Item Primary GARCIA HOLMES FOR CONGRESS General Mailing Address PO BOX 92193 Other (specify) \blacktriangledown City State ZIP Code X Personal Funds of the Candidate NM 87199 **ALBUQUERQUE** Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 168.28 0.00 168.28 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D31 D M 05M **Ž**02Ž upon demand x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 168.28 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.

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Transaction ID: SC/10.7879 NAME OF COMMITTEE (In Full) GARCIA HOLMES FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2022 Memo Item Primary GARCIA HOLMES FOR CONGRESS General Mailing Address PO BOX 92193 Other (specify) City State ZIP Code X Personal Funds of the Candidate NM 87199 **ALBUQUERQUE** Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 5.96 0.00 5.96 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D31 D M 05M **Ž**02Ž upon demand x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 5.96 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.

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Transaction ID: SC/10.7875 NAME OF COMMITTEE (In Full) GARCIA HOLMES FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2022 Memo Item Primary GARCIA HOLMES FOR CONGRESS General Mailing Address PO BOX 92193 Other (specify) City State ZIP Code X Personal Funds of the Candidate NM 87199 **ALBUQUERQUE** Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 12.89 0.00 12.89 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D03D M06M **Ž**02Ž upon demand x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 12.89 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.

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Transaction ID: SC/10.7878 NAME OF COMMITTEE (In Full) GARCIA HOLMES FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2022 Memo Item Primary GARCIA HOLMES FOR CONGRESS General Mailing Address PO BOX 92193 Other (specify) \blacktriangledown City State ZIP Code X Personal Funds of the Candidate NM 87199 **ALBUQUERQUE** Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 116.00 0.00 116.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D03D M 06M **Ž**02Ž upon demand x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 116.00 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.

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Transaction ID: SC/10.7869 NAME OF COMMITTEE (In Full) GARCIA HOLMES FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2022 Memo Item Primary GARCIA HOLMES FOR CONGRESS General Mailing Address PO BOX 92193 Other (specify) City State ZIP Code X Personal Funds of the Candidate NM 87199 **ALBUQUERQUE** Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 232.00 0.00 232.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 ^D23^D M 06M **Ž**02Ž upon demand x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 232.00 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.

Use separate schedule(s)

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