

**FEC
FORM 1****STATEMENT OF
ORGANIZATION**

Office Use Only

1. NAME OF COMMITTEE (in full) ☐ (Check if name is changed) Example: If typing, type over the lines.

12FE4M5

Moolenaar for Congress

ADDRESS (number and street)

2014 N. Saginaw Road

☒ (Check if address is changed)

Suite 209

Midland

CITY ▲

MI

STATE ▲

48640-6824

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

☒ (Check if address is changed)

kimh.cacservices@outlook.com

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

☐ (Check if address is changed)

johnmoolenaarforcongress.com

2. DATE

MM / DD / YYYY
06 / 23 / 2025

3. FEC IDENTIFICATION NUMBER ►

C C00561530

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 Holzhauser, Kim, D., Ms.,

Signature of Treasurer Holzhauser, Kim, D., Ms.,

Date

MM / DD / YYYY
06 / 23 / 2025

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office
Use
OnlyFor further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100**FEC FORM 1**
(Revised 06/2012)

C

Write or Type Committee Name

Moolenaar for Congress

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

Western Michigan Victory Fund

Mailing Address

228 S Washington St

Ste 115

Alexandria

VA

22314-5404

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship: ☐ Connected Organization ☐ Affiliated Organization ☒ Joint Fundraising Representative ☐ Leadership PAC Sponsor

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

Holzhauer, Kim, D., Ms.,

Mailing Address

2014 N. Saginaw Road

Ste 209

Midland

MI

48640-6614

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

Custodian of Records

Telephone number

989

878

0996

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

Holzhauer, Kim, D., Ms.,

Mailing Address

2014 N. Saginaw Road

Ste 209

Midland

MI

48640-6614

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

Treasurer

Telephone number

989

878

0996

Full Name of
Designated
Agent

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

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.

Isabella Bank

Mailing Address

PO Box 100

Mount Pleasant

CITY ▲

MI

STATE ▲

48804-0100

ZIP CODE ▲

Name of Bank, Depository, etc.

Truist

Mailing Address

1445 New York Avenue NW

4th Floor

Washington

CITY ▲

DC

STATE ▲

20005

ZIP CODE ▲