

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Conservative Hispanic Initiative PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2012"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="6500.00"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="31825.00"/>	<input type="text" value="38325.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="38325.00"/>	<input type="text" value="38325.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="25783.90"/>	<input type="text" value="25783.90"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="12541.10"/>	<input type="text" value="12541.10"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

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 3X (Rev. 06/2004)

Write or Type Committee Name

Conservative Hispanic Initiative PAC

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	8800.00	14300.00
(ii) Unitemized	525.00	525.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	9325.00	14825.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	9325.00	14825.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	22500.00	23500.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	31825.00	38325.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	31825.00	38325.00

DETAILED SUMMARY PAGE

of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	1550.45	1550.45
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1550.45	1550.45
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	6550.00	6550.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	17683.45	17683.45
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	25783.90	25783.90
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	25783.90	25783.90

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	9325.00	14825.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	9325.00	14825.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1550.45	1550.45
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1550.45	1550.45

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

Form/Schedule: F3XN

Transaction ID :

Please note, none of the independent expenditures were for any federal candidate or federal candidate committee.

Form/Schedule:

Transaction ID:

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

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Conservative Hispanic Initiative PAC

A. Thomas Dugan
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 234
 City Farmington State NM Zip Code 87499
 FEC ID number of contributing federal political committee. **C**
 Name of Employer .Information Requested
 Occupation .Information Requested
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2012
Transaction ID : 21224.C1
 Amount of Each Receipt this Period
 500.00
 Receipt

B. David McBee
 Full Name (Last, First, Middle Initial)
 Mailing Address 3103 North Mesa Verde Avenue
 City Farmington State CT Zip Code 87401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer .Information Requested
 Occupation .Information Requested
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 15 / 2012
Transaction ID : 21224.C2
 Amount of Each Receipt this Period
 1000.00
 Receipt

C. David Matthews
 Full Name (Last, First, Middle Initial)
 Mailing Address 2 Calle Pinonero
 City Santa Fe State NM Zip Code 87505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer .Information Requested
 Occupation .Information Requested
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 15 / 2012
Transaction ID : 21224.C3
 Amount of Each Receipt this Period
 500.00
 Receipt

SUBTOTAL of Receipts This Page (optional).....▶	2000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 23
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Conservative Hispanic Initiative PAC

A. William Hutchison
Full Name (Last, First, Middle Initial)

Mailing Address 200 Circle Drive

City Santa Fe State NM Zip Code 87501

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
10 / 25 / 2012
Transaction ID : 21224.C5

Amount of Each Receipt this Period
500.00

Receipt

B. W. Peyton Nau
Full Name (Last, First, Middle Initial)

Mailing Address 907 Old Santa Fe Trail

City Santa Fe State NM Zip Code 87505

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
10 / 05 / 2012
Transaction ID : 21224.C16

Amount of Each Receipt this Period
1000.00

Receipt

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

Mailing Address 149 Wildhorse

City Santa Fe State NM Zip Code 87506

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
10 / 05 / 2012
Transaction ID : 21224.C17

Amount of Each Receipt this Period
5000.00

Receipt

SUBTOTAL of Receipts This Page (optional)..... ▶ 6500.00

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

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

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

FOR LINE NUMBER: PAGE 9 OF 23
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Conservative Hispanic Initiative PAC

A. Full Name (Last, First, Middle Initial)
Pablo Baca

Mailing Address 2535 Camino San Patricio

City Santa Fe State NM Zip Code 87505

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 05 / 2012

Transaction ID : 21224.C20

Amount of Each Receipt this Period
300.00

Receipt

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) ▼

Aggregate Year-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) ▼

Aggregate Year-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).....▶	300.00
TOTAL This Period (last page this line number only).....▶	8800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 23
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Conservative Hispanic Initiative PAC

A. Jack Stamm
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 2512

City Santa Fe	State NM	Zip Code 87504-
------------------	-------------	--------------------

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

Name of Employer .Information Requested	Occupation .Information Requested
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	17	/	2012

Transaction ID : 21224.C7

Amount of Each Receipt this Period
2500.00

Other Receipt

NOTE: NonConnected Acct.

B. Republican Party Of Santa Fe County
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 31995

City Santa Fe	State NM	Zip Code 87594-
------------------	-------------	--------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	10	/	2012

Transaction ID : 21224.C22

Amount of Each Receipt this Period
1000.00

Other Receipt

NOTE: NonConnected Acct.

C. Republican Party Of Santa Fe County
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 31995

City Santa Fe	State NM	Zip Code 87594-
------------------	-------------	--------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2012

Transaction ID : 21224.C8

Amount of Each Receipt this Period
1000.00

Other Receipt

NOTE: NonConnected Acct.

SUBTOTAL of Receipts This Page (optional).....▶	4500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 23
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Conservative Hispanic Initiative PAC

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

Mailing Address PO Box 2484

City Roswell State NM Zip Code 88202-

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

Name of Employer .Information Requested Occupation .Information Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			26			2012			

Transaction ID : 21224.C9

Amount of Each Receipt this Period
5000.00

Other Receipt

NOTE: NonConnected Acct.

B. Kysar Insurance Agency Inc.
Full Name (Last, First, Middle Initial)

Mailing Address 300 West Arrington #100

City Farmington State CT Zip Code 87401-

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			31			2012			

Transaction ID : 21224.C10

Amount of Each Receipt this Period
5000.00

Other Receipt

NOTE: NonConnected Acct.

C. Merrion Oil & Gas
Full Name (Last, First, Middle Initial)

Mailing Address 610 Reilly Avenue

City Junction State TX Zip Code 84740-1

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			10			2012			

Transaction ID : 21224.C21

Amount of Each Receipt this Period
5000.00

Other Receipt

NOTE: NonConnected Acct.

SUBTOTAL of Receipts This Page (optional).....▶	15000.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 12 OF 23
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Conservative Hispanic Initiative PAC

A. SFFRW PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 31665
 City Santa Fe State NM Zip Code 87594-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 10 / 2012
Transaction ID : 21224.C23
 Amount of Each Receipt this Period
 3000.00
 Other Receipt
 NOTE: NonConnected Acct.

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) ▼
 Aggregate Year-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) ▼
 Aggregate Year-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).....▶	3000.00
TOTAL This Period (last page this line number only).....▶	22500.00

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Conservative Hispanic Initiative PAC

Full Name (Last, First, Middle Initial)

A. Albuquerque Marriott

Mailing Address 5151 San Francisco Road NE

City Albuquerque State NM Zip Code 87109-

Purpose of Disbursement
Facility Fees & Catering

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 20 / 2012

Transaction ID : 21224.E25

Amount of Each Disbursement this Period

1430.84

FACILITY FEES & CATERING

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

1430.84

1430.84

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Conservative Hispanic Initiative PAC

Full Name (Last, First, Middle Initial)

A. Alberson for State Senate

Mailing Address 4991 Ruby Mine Road

City Las Cruces State NM Zip Code 88011-

Purpose of Disbursement
STATE CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: 2012
 Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 10 / 2012

Transaction ID : 21224.E21

Amount of Each Disbursement this Period

500.00

STATE CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. Alonzo Baldonado for StateRepresentativ

Mailing Address PO BOX 485

City Belen State NM Zip Code 87002-

Purpose of Disbursement
STATE CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: 2012
 Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 10 / 2012

Transaction ID : 21224.E18

Amount of Each Disbursement this Period

500.00

STATE CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. Aubrey Dunn for Senate

Mailing Address PO BOX 8151

City Roswell State NM Zip Code 88202-

Purpose of Disbursement
GENERAL

Candidate Name

Aubrey Dunn

Office Sought: House Senate President

Disbursement For: 2012
 Primary General Other (specify) ▼

State: NM District:

Date of Disbursement

MM / DD / YYYY
10 / 22 / 2012

Transaction ID : 21224.E10

Amount of Each Disbursement this Period

500.00

GENERAL

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

1500.00

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Conservative Hispanic Initiative PAC

Full Name (Last, First, Middle Initial)

A. Peggy Carabual For Valancia Clerk

Mailing Address PO Box 122

City Los Lunas State NM Zip Code 87031-

Purpose of Disbursement
STATE CONTRIBUTION

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			31			2012			

Transaction ID : 21224.E17

Amount of Each Disbursement this Period

250.00

STATE CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. Committe to Elect Chris Saucedo

Mailing Address 7227 Copper Grass Ct. NE

City Albuquerque State NM Zip Code 87113-

Purpose of Disbursement
STATE CONTRIBUTION

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			22			2012			

Transaction ID : 21224.E13

Amount of Each Disbursement this Period

500.00

STATE CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. David Chavez for State Senate

Mailing Address 651 Highway 314

City Los Lunas State NM Zip Code 87031-

Purpose of Disbursement
STATE CONTRIBUTION

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			20			2012			

Transaction ID : 21224.E24

Amount of Each Disbursement this Period

500.00

STATE CONTRIBUTION

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

1250.00

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Conservative Hispanic Initiative PAC

Full Name (Last, First, Middle Initial)

A. Janice Arnold Jones for Congress

Mailing Address PO BOX 20460

City Albuquerque State NM Zip Code 87154-

Purpose of Disbursement
GENERAL

Candidate Name

Janice Jones

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: NM District: 01

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 11 / 2012

Transaction ID : 21224.E19

Amount of Each Disbursement this Period

1000.00

GENERAL

Full Name (Last, First, Middle Initial)

B. Committee to Elect Kelly Fajardo

Mailing Address 1125 N. Molina

City Belen State NM Zip Code 87002-

Purpose of Disbursement
STATE CONTRIBUTION

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 20 / 2012

Transaction ID : 21224.E22

Amount of Each Disbursement this Period

500.00

STATE CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. Paul Pacheco for State Representative

Mailing Address P.O. Box 25022

City Albuquerque State NM Zip Code 87125-

Purpose of Disbursement
STATE CONTRIBUTION

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 22 / 2012

Transaction ID : 21224.E12

Amount of Each Disbursement this Period

500.00

STATE CONTRIBUTION

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

2000.00

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Conservative Hispanic Initiative PAC

Full Name (Last, First, Middle Initial)

A. Republican Party of Rio Arriba County

Mailing Address PO Box 454

City Espanola State NM Zip Code 87532-

Purpose of Disbursement
STATE CONTRIBUTION

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			25			2012			

Transaction ID : 21224.E14

Amount of Each Disbursement this Period

300.00

STATE CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. Sierra County Republican Party

Mailing Address PO Box 4343

City Truth Or Conseq State NM Zip Code 87901-

Purpose of Disbursement
STATE CONTRIBUTION

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			25			2012			

Transaction ID : 21224.E15

Amount of Each Disbursement this Period

500.00

STATE CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. Valencia County Republican Party

Mailing Address PO Box 2178

City Los Lunas State NM Zip Code 87031-

Purpose of Disbursement
STATE CONTRIBUTION

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			25			2012			

Transaction ID : 21224.E16

Amount of Each Disbursement this Period

500.00

STATE CONTRIBUTION

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

1300.00

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Conservative Hispanic Initiative PAC

Full Name (Last, First, Middle Initial)

A. Vicki Perea for State Senate

Mailing Address P.O. Box 1486

City Belen State NM Zip Code 87002-

Purpose of Disbursement
STATE CONTRIBUTION

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2012

Transaction ID : 21224.E23

Amount of Each Disbursement this Period

500.00

STATE CONTRIBUTION

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

--

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional)..... ▶

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

500.00

6550.00

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Conservative Hispanic Initiative PAC

Full Name (Last, First, Middle Initial)

A. Albuquerque Journal

Mailing Address 7777 Jefferson Street NE

City Albuquerque State NM Zip Code 87109-

Purpose of Disbursement
IND EXP: ADVERTISE NONCANDIDATE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 02 / 2012

Transaction ID : 21224.E31

Amount of Each Disbursement this Period

2536.30

Full Name (Last, First, Middle Initial)

B. Albuquerque Journal

Mailing Address 7777 Jefferson Street NE

City Albuquerque State NM Zip Code 87109-

Purpose of Disbursement
IND EXP: ADVERTISE NONCANDIDATE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 05 / 2012

Transaction ID : 21224.E42

Amount of Each Disbursement this Period

2536.30

Full Name (Last, First, Middle Initial)

C. Clark Hill PLC

Mailing Address 601 Pennsylvania Ave. NW #1000

City Washington State DC Zip Code 20004-

Purpose of Disbursement
CONSULTING LEGAL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 14 / 2012

Transaction ID : 21224.E2

Amount of Each Disbursement this Period

391.96

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

5464.56

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Conservative Hispanic Initiative PAC

Full Name (Last, First, Middle Initial)

A. Clark Hill PLC

Mailing Address 601 Pennsylvania Ave. NW #1000

City Washington State DC Zip Code 20004-

Purpose of Disbursement
CONSULTING LEGAL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 22 / 2012

Transaction ID : 21224.E8

Amount of Each Disbursement this Period

775.00

Full Name (Last, First, Middle Initial)

B. Dialing Services LLC

Mailing Address 5149 Cotton Road

City Roswell State NM Zip Code 88201-

Purpose of Disbursement
IND EXP:STATECANDIDATE TELEPHONE SVC

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 31 / 2012

Transaction ID : 21224.E6

Amount of Each Disbursement this Period

456.15

Full Name (Last, First, Middle Initial)

C. Dialing Services LLC

Mailing Address 5149 Cotton Road

City Roswell State NM Zip Code 88201-

Purpose of Disbursement
IND EXP:STATECANDIDATE TELEPHONE SVC

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 29 / 2012

Transaction ID : 21224.E5

Amount of Each Disbursement this Period

300.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

1531.15

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Conservative Hispanic Initiative PAC

Full Name (Last, First, Middle Initial)

A. Hamilton Consulting Services

Mailing Address 10 East Doty Street

City Madison State WI Zip Code 53703-

Purpose of Disbursement
CONSULTING POLITICAL RELATIONS

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			25			2012			

Transaction ID : 21224.E4

Amount of Each Disbursement this Period

7	2	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. KWYK Radio

Mailing Address 1515 W Main Street

City Farmington State CT Zip Code 87401-

Purpose of Disbursement
IND EXP: ADVERTISE FEA GENERIC CAMP

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			31			2012			

Transaction ID : 21224.E30

Amount of Each Disbursement this Period

1	2	8	5	.	5	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. Roberts Oil

Mailing Address 1517 Gibson Blvd SE

City Albuquerque State NM Zip Code 87106-

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			15			2012			

Transaction ID : 21224.E28

Amount of Each Disbursement this Period

1	5	2	.	1	4
---	---	---	---	---	---

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

8	6	3	7	.	6	4
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Conservative Hispanic Initiative PAC

Full Name (Last, First, Middle Initial)

A. Roberts Oil

Mailing Address 1517 Gibson Blvd SE

City Albuquerque State NM Zip Code 87106-

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
11 / 13 / 2012

Transaction ID : 21224.E39

Amount of Each Disbursement this Period

64.31

B. Roberts Oil

Full Name (Last, First, Middle Initial)

Mailing Address 1517 Gibson Blvd SE

City Albuquerque State NM Zip Code 87106-

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
11 / 07 / 2012

Transaction ID : 21224.E36

Amount of Each Disbursement this Period

49.28

C. Vince Torres

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 15993

City Santa Fe State NM Zip Code 87592-

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
11 / 12 / 2012

Transaction ID : 21224.E1

Amount of Each Disbursement this Period

200.79

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

314.38

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Conservative Hispanic Initiative PAC

Full Name (Last, First, Middle Initial)

A. United Airlines

Mailing Address 77 West Wacker Drive

City Chicago State IL Zip Code 60601-

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 19 / 2012

Transaction ID : 21224.E40

Amount of Each Disbursement this Period

941.60

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

941.60

16889.33