

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) USE FEC MAILING LABEL OR TYPE OR PRINT Example: If typing, type over the lines People for Ben

ADDRESS (number and street) PO Box 31129 Sante Fe NM 87594

2. FEC IDENTIFICATION NUMBER C00443689 3. IS THIS REPORT NEW (N) OR AMENDED (A) NM 03

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, Termination Report (TER) (b) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Runoff (12R), Convention (12C), Special (12S) (c) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S)

5. Covering Period 10 16 2008 through 11 24 2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer Carmen Lujan Signature of Treasurer Electronically Filed by Carmen Lujan Date 12 04 2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

People for Ben

Report Covering the Period:

From:

M	M
1	0

D	D
1	6

Y	Y	Y	Y
2	0	0	8

To:

M	M
1	1

D	D
2	4

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	104574.88	1310431.81
(b) Total Contribution Refunds (from Line 20(d)).....	250.00	20310.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	104324.88	1290121.81
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	316790.26	1392186.18
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	316790.26	1392186.18
8. Cash on Hand at Close of Reporting Period (from Line 27).....	37018.50	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	150006.94	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-694-1100

**POST-ELECTION DETAILED
SUMMARY PAGE**
Report of Receipts and Disbursements

FEC Form 3 (Revised 07/05)

Page 5

- . If the candidate participated in the general election, use this form for the 30-day Post-General report.
- . If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name

People for Ben

Report Covering the Period: From:

M	M
1	0

D	D
1	6

Y	Y	Y	Y
2	0	0	8

 To:

M	M
1	1

D	D
2	4

Y	Y	Y	Y
2	0	0	8

I. RECEIPTS

COLUMN A Total this Period	COLUMN B Election Cycle Total as of <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>M</td><td>M</td></tr><tr><td>1</td><td>1</td></tr></table> <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>D</td><td>D</td></tr><tr><td>0</td><td>4</td></tr></table> <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table> (date of general election)	M	M	1	1	D	D	0	4	Y	Y	Y	Y	2	0	0	8	COLUMN C Total for <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>M</td><td>M</td></tr><tr><td>1</td><td>1</td></tr></table> <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>D</td><td>D</td></tr><tr><td>0</td><td>5</td></tr></table> <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table> (date after general election) through <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>M</td><td>M</td></tr><tr><td>1</td><td>1</td></tr></table> <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>D</td><td>D</td></tr><tr><td>2</td><td>4</td></tr></table> <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table> (last day of reporting period)	M	M	1	1	D	D	0	5	Y	Y	Y	Y	2	0	0	8	M	M	1	1	D	D	2	4	Y	Y	Y	Y	2	0	0	8
M	M																																																	
1	1																																																	
D	D																																																	
0	4																																																	
Y	Y	Y	Y																																															
2	0	0	8																																															
M	M																																																	
1	1																																																	
D	D																																																	
0	5																																																	
Y	Y	Y	Y																																															
2	0	0	8																																															
M	M																																																	
1	1																																																	
D	D																																																	
2	4																																																	
Y	Y	Y	Y																																															
2	0	0	8																																															
11. CONTRIBUTIONS (other than loans) FROM:																																																		
(a) Individuals/Persons Other than Political Committees																																																		
(i) Itemized (Use Schedule A)																																																		
47689.00	904897.30	4299.00																																																
(ii) Unitemized																																																		
3560.88	62239.51	300.88																																																
(iii) Total of contributions from individuals																																																		
51249.88	967136.81	4599.88																																																
(b) Political Party Committees																																																		
0.00	0.00	0.00																																																
(c) Other Political Committees																																																		
53325.00	343295.00	11800.00																																																

**POST-ELECTION DETAILED
SUMMARY PAGE
Report of Receipts and Disbursements**

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general Election) (* See page 5 for date)	COLUMN C Total for * (date after general election) Through * (last day of reporting period) (* See page 5 for dates)
(d) The Candidate		
0.00	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))		
104574.88	1310431.81	16399.88
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
0.00	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
0.00	200000.00	0.00
(b). All Other Loans		
0.00	0.00	0.00
(c). TOTAL LOANS (add Lines 13(a) and (b))		
0.00	200000.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (refunds, rebates, etc)		
0.00	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc)		
0.00	33.21	0.00
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		
104574.88	1510465.02	16399.88

POST ELECTION DETAILED SUMMARY PAGE

FEC Form 3 (Revised 1/01)

Report of Receipts and Disbursements

Page 7

Write or Type Committe Name

People for Ben

Report the covering period

From:

MM 10

DD 16

YYYY 2008

To:

MM 11

DD 24

YYYY 2008

II. DISBURSEMENTS

COLUMN A Total this period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * Through * (date after general election) (last day of reporting period) (* See page 5 for date)
17. OPERATING EXPENDITURES		
316790.26	1392186.18	27218.67
18. TRANSFER TO OTHER AUTHORIZED COMMITTEES		
0.00	0.00	0.00
19. LOAN PAYMENTS		
(a) Of Loans Made or Guaranteed by the Candidate		
0.00	49993.06	0.00
(b) Of All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))		
0.00	49993.06	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees		
250.00	20310.00	250.00
(b) Political Party Committees		
0.00	0.00	0.00

POST ELECTION DETAILED SUMMARY PAGE

FEC Form 3 (Revised 1/01)

Report of Receipts and Disbursements

Page 8

COLUMN A Total this period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	Total for * Through *	COLUMN C (date after general election) (last day of reporting period) (* See page 5 for date)
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(c) Other political committees (such as PACs)

0.00	0.00	0.00
------	------	------

(d) TOTAL CONTRIBUTION REFUNDS (See Lines 20(a), (b) and (c))

250.00	20310.00	250.00
--------	----------	--------

21. OTHER DISBURSEMENTS

0.00	0.00	0.00
------	------	------

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

317040.26	1462489.24	27468.67
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III. NET CONTRIBUTIONS (OTHER THAN LOANS)

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract line 20(d) from Line 11(e))

104324.88	1290121.81	16149.88
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IV. NET OPERATING EXPENDITURES

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

316790.26	1392186.18	27218.67
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V. CASH SUMMARY

23. CASH ON HAND AT BEGINING OF REPORTING PERIOD	249483.88
24. TOTAL RECEIPTS AT THIS PERIOD (from Line 16).....	104574.88
25. SUBTOTAL(add Line 23 and Line 24)	354058.76
26. TOTAL DISBURSEMENTS AT THIS PERIOD (from Line 22).....	317040.26
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (Subtract Line 26 from Line 25).....	37018.50

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 63
(check only one)

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

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)
People for Ben

<p>A. Full Name (Last, First, Middle Initial) Jon Adams</p> <p>Mailing Address 417 Riverside Dr Apt 5F</p> <p>City State Zip Code New York NY 10025-7931</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Cohen Milstein Attorney</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">1100.00</p>	<p>Date of Receipt <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">M M</td> <td style="text-align: center;">/</td> <td style="text-align: center;">D D</td> <td style="text-align: center;">/</td> <td style="text-align: center;">Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">1 0</td> <td></td> <td style="text-align: center;">3 0</td> <td></td> <td style="text-align: center;">2 0 0 8</td> </tr> </table> </p> <p>Transaction ID: C2196727</p> <p>Amount of Each Receipt this Period 1000.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>	M M	/	D D	/	Y Y Y Y	1 0		3 0		2 0 0 8
M M	/	D D	/	Y Y Y Y							
1 0		3 0		2 0 0 8							

<p>B. Full Name (Last, First, Middle Initial) Catherine A. Allen</p> <p>Mailing Address 5 San Sebastian Rd</p> <p>City State Zip Code Santa Fe NM 87505-1417</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation The Santa Fe Group CEO</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">1500.00</p>	<p>Date of Receipt <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">M M</td> <td style="text-align: center;">/</td> <td style="text-align: center;">D D</td> <td style="text-align: center;">/</td> <td style="text-align: center;">Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">1 0</td> <td></td> <td style="text-align: center;">2 7</td> <td></td> <td style="text-align: center;">2 0 0 8</td> </tr> </table> </p> <p>Transaction ID: C2189699</p> <p>Amount of Each Receipt this Period 500.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>	M M	/	D D	/	Y Y Y Y	1 0		2 7		2 0 0 8
M M	/	D D	/	Y Y Y Y							
1 0		2 7		2 0 0 8							

<p>C. Full Name (Last, First, Middle Initial) Kandace S. Blanchard</p> <p>Mailing Address PO Box 10127</p> <p>City State Zip Code Albuquerque NM 87184-0127</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Nm Council On Gaming President</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">8100.00</p>	<p>Date of Receipt <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">M M</td> <td style="text-align: center;">/</td> <td style="text-align: center;">D D</td> <td style="text-align: center;">/</td> <td style="text-align: center;">Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">1 1</td> <td></td> <td style="text-align: center;">0 4</td> <td></td> <td style="text-align: center;">2 0 0 8</td> </tr> </table> </p> <p>Transaction ID: C2214956</p> <p>Amount of Each Receipt this Period 2100.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>	M M	/	D D	/	Y Y Y Y	1 1		0 4		2 0 0 8
M M	/	D D	/	Y Y Y Y							
1 1		0 4		2 0 0 8							

SUBTOTAL of Receipts This Page (optional)	3600.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 63
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
Paul Blanchard

Mailing Address 5850 Eubank Blvd NE
Ste B-26

City Albuquerque State NM Zip Code 87111

FEC ID number of contributing federal political committee. C

Name of Employer Mountain Run Development Occupation Developer

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 8100.00

Date of Receipt MM / DD / YYYY
11 / 04 / 2008

Transaction ID: C2214954

Amount of Each Receipt this Period 2100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Maurice P. Bonal

Mailing Address 685 Callecita Pecos

City Santa Fe State NM Zip Code 87505-4939

FEC ID number of contributing federal political committee. C

Name of Employer SFCC Inc. Occupation real estate

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2250.00

Date of Receipt MM / DD / YYYY
10 / 31 / 2008

Transaction ID: C2199029

Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 119 Sunlit Dr W

City Santa Fe State NM Zip Code 87508-9383

FEC ID number of contributing federal political committee. C

Name of Employer The Information & Training Co. Occupation Owner

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt MM / DD / YYYY
10 / 21 / 2008

Transaction ID: C2176345

Amount of Each Receipt this Period 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) 3350.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 63
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
John Chavez

Mailing Address 1634 Rancho Guadalupe Trl NW

City Albuquerque State NM Zip Code 87107-3370

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

Name of Employer Sandia Peak Utility Occupation CFO

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 0.00

Date of Receipt 10 / 27 / 2008

Transaction ID: C2189113

Amount of Each Receipt this Period 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Suzanne Cisneros

Mailing Address 16 Zorrillo Ct

City Santa Fe State NM Zip Code 87508-4902

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

Name of Employer Wachovia Securities Occupation Financial Advisor

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 11 / 11 / 2008

Transaction ID: C2221897

Amount of Each Receipt this Period 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 4400 Canyon Ct NE

City Albuquerque State NM Zip Code 87111-3010

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

Name of Employer Self Occupation Attorney

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 10 / 30 / 2008

Transaction ID: C2196633

Amount of Each Receipt this Period 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 1000.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 63
(check only one)

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

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NAME OF COMMITTEE (In Full)
People for Ben

A.

Full Name (Last, First, Middle Initial)
John Daniel

Mailing Address PO Box 4701

City Albuquerque State NM Zip Code 87196-4701

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

Name of Employer Center for Civic Policy Occupation Researcher

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 800.00

Date of Receipt 10 / 27 / 2008

Transaction ID: C2189140

Amount of Each Receipt this Period 350.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Steven Demby

Mailing Address 2301 E Alameda Ave

City Denver State CO Zip Code 80209-3337

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

Name of Employer Brownstein Hyatt Farber Occupation Attorney

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 10 / 27 / 2008

Transaction ID: C2189015

Amount of Each Receipt this Period 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Judith Droz Droz Keyes

Mailing Address 1045 Mason St Apt 502

City San Francisco State CA Zip Code 94108-1900

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

Name of Employer Davis Wright Tremaine Occupation Attorney

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 10 / 27 / 2008

Transaction ID: C2189031

Amount of Each Receipt this Period 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **850.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d (check only one) <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	PAGE 11 / 63
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NAME OF COMMITTEE (In Full)
People for Ben

A.	Full Name (Last, First, Middle Initial) Mel M Eaves	Date of Receipt MM / DD / YYYY 11 / 11 / 2008
	Mailing Address PO Box 35670	Transaction ID: C2221896
	City State Zip Code Albuquerque NM 87176-5670	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Eaves Law Firm attorney	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

B.	Full Name (Last, First, Middle Initial) Moctesuma Esparza	Date of Receipt MM / DD / YYYY 10 / 30 / 2008
	Mailing Address 5618 Berkshire Dr	Transaction ID: C2196722
	City State Zip Code Los Angeles CA 90032-1322	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Maya Cinemas SR. Executive	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

C.	Full Name (Last, First, Middle Initial) Jane Frost	Date of Receipt MM / DD / YYYY 10 / 27 / 2008
	Mailing Address 1710 A Quay Rd 50	Transaction ID: C2188664
	City State Zip Code San Jon NM 88434	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Frost Caprock Creek Holdings, LLC Businesswoman	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	3000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 63
(check only one)

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

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NAME OF COMMITTEE (In Full)
People for Ben

A.

Full Name (Last, First, Middle Initial) Michelle L. Frost		Date of Receipt MM / DD / YYYY 10 / 27 / 2008
Mailing Address 1710 A Quay Rd 50		Transaction ID: C2188616
City San Jon	State NM	Zip Code 88434
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self	Occupation Rancher	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1790.00	

B.

Full Name (Last, First, Middle Initial) Michelle L. Frost		Date of Receipt MM / DD / YYYY 10 / 27 / 2008
Mailing Address 1710 A Quay Rd 50		Transaction ID: C2188956
City San Jon	State NM	Zip Code 88434
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer Self	Occupation Rancher	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1790.00	

C.

Full Name (Last, First, Middle Initial) Ed T Garcia		Date of Receipt MM / DD / YYYY 10 / 21 / 2008
Mailing Address PO Box 26207		Transaction ID: C2176335
City Albuquerque	State NM	Zip Code 87125-6207
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Garia Motors	Occupation President	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional)	▶	1540.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 63

(check only one)

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

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NAME OF COMMITTEE (In Full)
People for Ben

A.

Full Name (Last, First, Middle Initial)
Charles Hamilton

Mailing Address PO Box 1292

City State Zip Code
Silver City NM 88052

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

Name of Employer Occupation
President James Hamilton Construction

Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 8 / 2 0 0 8

Transaction ID: C2230029

Amount of Each Receipt this Period

1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Tracy Holtz

Mailing Address 1007 Don Rovin Ln

City State Zip Code
Farmington NM 87401-7911

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

Name of Employer Occupation
Trucking Company Self-employed

Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 0 8

Transaction ID: C2176346

Amount of Each Receipt this Period

250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

* In-Kind: Event Expense

C.

Full Name (Last, First, Middle Initial)
Thomas Horn

Mailing Address 950 Rockdale Dr

City State Zip Code
San Francisco CA 94127-1725

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

Name of Employer Occupation
Self Businessman

Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: C2188581

Amount of Each Receipt this Period

500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶

1750.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 63
(check only one)

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

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NAME OF COMMITTEE (In Full)
People for Ben

A.

Full Name (Last, First, Middle Initial) Ruth Hughes		Date of Receipt MM / DD / YYYY 10 / 31 / 2008
Mailing Address 2655 Steiner St		Transaction ID: C2199030
City San Francisco	State CA	Zip Code 94115-1141
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer St. Johns Knit	Occupation Retail	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

B.

Full Name (Last, First, Middle Initial) Sandra Jeff		Date of Receipt MM / DD / YYYY 10 / 30 / 2008
Mailing Address 6612 Welton Dr NE		Transaction ID: C2196668
City Albuquerque	State NM	Zip Code 87109-4051
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Information Requested	Occupation Information Requested	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

C.

Full Name (Last, First, Middle Initial) Joe Johnson		Date of Receipt MM / DD / YYYY 10 / 30 / 2008
Mailing Address 1004 Southern Ave SE		Transaction ID: C2196622
City Washington	State DC	Zip Code 20032-6042
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2300.00
Name of Employer Homeland Security LLC	Occupation President	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	

SUBTOTAL of Receipts This Page (optional)	3800.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 15 / 63
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
Kathleen Kennedy
Mailing Address 619 Arizona Ave
City Santa Monica State CA Zip Code 90401-1609
FEC ID number of contributing federal political committee. **C**
Name of Employer Kennedy Marshall Co. Occupation Producers
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼
Date of Receipt 10 / 22 / 2008
Transaction ID: C2178884
Amount of Each Receipt this Period 2300.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Daniel Kovnat
Mailing Address 1259 Cerro Gordo Rd
City Santa Fe State NM Zip Code 87501-6106
FEC ID number of contributing federal political committee. **C**
Name of Employer St. Vincents Occupation Doctor
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼
Date of Receipt 10 / 30 / 2008
Transaction ID: C2196700
Amount of Each Receipt this Period 250.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Alberto Leon
Mailing Address 5004 La Fiesta Dr NE
City Albuquerque State NM Zip Code 87109-2508
FEC ID number of contributing federal political committee. **C**
Name of Employer BAUMAN, DOW & LEON Occupation Attorney
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼
Date of Receipt 10 / 21 / 2008
Transaction ID: C2176316
Amount of Each Receipt this Period 500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **3050.00**
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 63
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
Don E Leonard

Mailing Address PO Box 826

City Corrales State NM Zip Code 87048-0826

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

Name of Employer Leonard Tire Occupation President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1550.00

Date of Receipt MM / DD / YYYY
10 / 27 / 2008

Transaction ID: C2188414

Amount of Each Receipt this Period 200.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Richard Lucero

Mailing Address 229 N Riverside Dr

City Espanola State NM Zip Code 87532

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

Name of Employer Country Farm Supply Occupation Owner

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt MM / DD / YYYY
10 / 27 / 2008

Transaction ID: C2188407

Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 611 Campana Ave

City Belen State NM Zip Code 87002-4607

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

Name of Employer Self Occupation Architect

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt MM / DD / YYYY
11 / 11 / 2008

Transaction ID: C2221895

Amount of Each Receipt this Period 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 1700.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 63
(check only one)

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

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NAME OF COMMITTEE (In Full)
People for Ben

A.

Full Name (Last, First, Middle Initial)
Frank Marshall

Mailing Address 619 Arizona Ave

City Santa Monica State CA Zip Code 90401-1609

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

Name of Employer Kennedy Marshall Co. Occupation Producers

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

Date of Receipt 10 / 22 / 2008

Transaction ID: C2178879

Amount of Each Receipt this Period 2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Veronica L. Martinez

Mailing Address 4504 Olympic Ct NW

City Albuquerque State NM Zip Code 87114-5036

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt 11 / 12 / 2008

Transaction ID: C2238505

Amount of Each Receipt this Period 300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
O.D. D Mcdonald

Mailing Address 2400 Candelaria Rd NE

City Albuquerque State NM Zip Code 87107-2037

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

Name of Employer Westland Development Occupation Executive

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 10 / 21 / 2008

Transaction ID: C2176320

Amount of Each Receipt this Period 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **3100.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 63
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
People for Ben

A.	Full Name (Last, First, Middle Initial) Marjorie Miller-Engel	Date of Receipt MM / DD / YYYY 10 / 27 / 2008
	Mailing Address PO Box 5173	Transaction ID: C2189099
	City State Zip Code Santa Fe NM 87502-5173	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Commissioner Interior Designer	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) Linda Milligan-Duran	Date of Receipt MM / DD / YYYY 10 / 30 / 2008
	Mailing Address 4 Tiwa Trl	Transaction ID: C2196607
	City State Zip Code Placitas NM 87043-9459	Amount of Each Receipt this Period 2000.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation None Housewife	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 5000.00	

C.	Full Name (Last, First, Middle Initial) Alfredo Montoya	Date of Receipt MM / DD / YYYY 10 / 30 / 2008
	Mailing Address PO Box 856	Transaction ID: C2196615
	City State Zip Code San Juan Pueblo NM 87566-0856	Amount of Each Receipt this Period 1600.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Northern College administrator	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1600.00	

SUBTOTAL of Receipts This Page (optional)	▶	3850.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 63
(check only one)

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

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NAME OF COMMITTEE (In Full)
People for Ben

A.

Full Name (Last, First, Middle Initial)
Anthony Moya

Mailing Address 83 Canada Del Rancho

City State Zip Code
Santa Fe NM 87508-1307

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

Name of Employer Occupation
OMNI DEVELOPMENT Owner

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: C2178906

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Allegra A Pacheco

Mailing Address P.O. Box 3677

City State Zip Code
Corrales NM 87048

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

Name of Employer Occupation
Pecos Propane, Inc Owner

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: C2238227

Amount of Each Receipt this Period
750.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Carl Page

Mailing Address 5214 Diamond Heights Blvd # 731

City State Zip Code
San Francisco CA 94131-2118

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

Name of Employer Occupation
Self Technologist

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: C2188564

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **2750.00**

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

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

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

FOR LINE NUMBER: PAGE 20 / 63
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
Carl Page

Mailing Address 5214 Diamond Heights Blvd
731

City San Francisco State CA Zip Code 94131-2118

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

Name of Employer Self Occupation Technologist

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period: 499.00

Transaction ID: C2221890

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Pechanga Band of Mission Indians

Mailing Address 1333 New Hampshire Ave NW

City Washington State DC Zip Code 20036-1511

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period: 2300.00

Transaction ID: C2193326

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Douglas Peterson, Dr

Mailing Address 2325 San Pedro Dr NE
Ste 2A

City Albuquerque State NM Zip Code 87110-4121

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

Name of Employer Peterson Properties Occupation Real Estate

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period: 250.00

Transaction ID: C2176319

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **3049.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 63
(check only one)

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

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NAME OF COMMITTEE (In Full)
People for Ben

A.

Full Name (Last, First, Middle Initial)
Jane Price-Smith

Mailing Address 513 Autumn Wind Way

City State Zip Code
Rockville MD 20850-2893

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

Name of Employer None Occupation Homemaker

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period: 500.00

Transaction ID: C2188405

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Pueblo of Acoma

Mailing Address PO Box 348

City State Zip Code
Pueblo Of Acoma NM 87034-0348

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period: 1000.00

Transaction ID: C2178874

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Redding Rancheria

Mailing Address 2000 Redding Rancheria Rd

City State Zip Code
Redding CA 96001-5528

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period: 1000.00

Transaction ID: C2199037

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **2500.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 / 63
(check only one)

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

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NAME OF COMMITTEE (In Full)
People for Ben

A.

Full Name (Last, First, Middle Initial)
Robert L. Rivera

Mailing Address 9180 Coors Blvd NW
Apt 1409

City Albuquerque State NM Zip Code 87120-3164

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

Name of Employer Regulatory & Legislative Remedies Occupation Attorney

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt 10 / 20 / 2008

Transaction ID: C2171185

Amount of Each Receipt this Period 2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Debbie Rodella

Mailing Address 16 Private Drive 1156

City Espanola State NM Zip Code 87532

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

Name of Employer Lanl Occupation Materials Science Tech

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt 10 / 27 / 2008

Transaction ID: C2188986

Amount of Each Receipt this Period 200.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Dennis Tim Salazar

Mailing Address PO Box 3978

City Espanola State NM Zip Code 87533-3978

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

Name of Employer City of Espanola Occupation Councilor

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt 10 / 29 / 2008

Transaction ID: C2238233

Amount of Each Receipt this Period 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **3000.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 63
(check only one)

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

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)
People for Ben

A.

Full Name (Last, First, Middle Initial) Jordanna P Schultz		Date of Receipt MM / DD / YYYY 10 / 30 / 2008
Mailing Address PO Box 4625		Transaction ID: C2196644
City Boulder	State CO	Zip Code 80306-4625
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer None	Occupation Student	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

B.

Full Name (Last, First, Middle Initial) Steven Seeger		Date of Receipt MM / DD / YYYY 10 / 30 / 2008
Mailing Address 1220 S Country Club Dr		Transaction ID: C2196679
City Gallup	State NM	Zip Code 87301-5924
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Self	Occupation Attorney	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

C.

Full Name (Last, First, Middle Initial) Marla Shoats		Date of Receipt MM / DD / YYYY 10 / 21 / 2008
Mailing Address 9631 4th St NW		Transaction ID: C2176336
City Albuquerque	State NM	Zip Code 87114-2128
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Shoats & Weak's, Inc.	Occupation public relations firm	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 3500.00	

SUBTOTAL of Receipts This Page (optional)	1500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 63
(check only one)

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

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NAME OF COMMITTEE (In Full)
People for Ben

A.

Full Name (Last, First, Middle Initial)
Daniel P. Silva

Mailing Address 1323 Canyon Trl SW

City Albuquerque State NM Zip Code 87121-8005

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

Name of Employer NM House Occupation Representative

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 450.00

Date of Receipt 10 / 31 / 2008

Transaction ID: C2199614

Amount of Each Receipt this Period 200.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
David M. Stupin

Mailing Address 51 Vista Redonda

City Santa Fe State NM Zip Code 87506-9471

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

Name of Employer LANL Occupation Physicist

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2400.00

Date of Receipt 10 / 30 / 2008

Transaction ID: C2196703

Amount of Each Receipt this Period 2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
John Lee Thompson

Mailing Address PO Box 27055

City Albuquerque State NM Zip Code 87125-7055

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

Name of Employer self-employed Occupation government relations

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 11 / 04 / 2008

Transaction ID: C2214957

Amount of Each Receipt this Period 50.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **2550.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 63
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
People for Ben

A.	Full Name (Last, First, Middle Initial) Hillary Tompkins	Date of Receipt MM / DD / YYYY 11 / 11 / 2008
	Mailing Address 5712 Tinnin Rd NW	Transaction ID: C2221894
	City State Zip Code Los Ranchos NM 87107-7103	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation None None	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

B.	Full Name (Last, First, Middle Initial) Presiliano Torrez	Date of Receipt MM / DD / YYYY 10 / 21 / 2008
	Mailing Address 10301 Coronado Ave NE	Transaction ID: C2176318
	City State Zip Code Albuquerque NM 87122-3501	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Self Attorney	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

C.	Full Name (Last, First, Middle Initial) RE Turner	Date of Receipt MM / DD / YYYY 10 / 28 / 2008
	Mailing Address 214 Hamrick Rd	Transaction ID: C2192404
	City State Zip Code Lamont FL 32336-7408	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation AOL Time Warner Vice Chairman	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	▶	1500.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 26 / 63	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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)
People for Ben

A.

Full Name (Last, First, Middle Initial) Lisa Vigil		Date of Receipt
Mailing Address 301 Gold Ave AW Suite 201		<input type="text" value="10"/> / <input type="text" value="21"/> / <input type="text" value="2008"/>
City	State	Zip Code
Albuquerque	NM	87102
FEC ID number of contributing federal political committee.		Transaction ID: C2176340
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="250.00"/>
Name of Employer Self	Occupation Attorney	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <input type="text" value="750.00"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="250.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="47689.00"/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 / 63
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
AGC Political Action Committee

Mailing Address 2300 Wilson Blvd

City State Zip Code
Arlington VA 22201-5424

FEC ID number of contributing federal political committee. **C** C00082917

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 1 7 / 2 0 0 8

Transaction ID: C2227462

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
AMERICAN INTERNATIONAL AUTOMOBILE DEALERS ASSOCIAT

Mailing Address 211 NORTH UNION STREET SUITE 300

City State Zip Code
ALEXANDRIA VA 22301

FEC ID number of contributing federal political committee. **C** C00040998

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: C2188412

Amount of Each Receipt this Period
5000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 4425 Corporation Lane

City State Zip Code
Virginia Beach VA 23462

FEC ID number of contributing federal political committee. **C** C00428102

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: C2199070

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **7000.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 63
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
BART'S BRIDGE PAC

Mailing Address 817 9th Avenue, Second Floor
PO Box 1021

City Menominee State MI Zip Code 49858

FEC ID number of contributing federal political committee. **C** C00428045

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 11 / 24 / 2008
Transaction ID: C2249313
 Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Bechtel Group

Mailing Address 50 BEALE STREET
50 BEALE STREET

City SAN FRANCISCO State CA Zip Code 94105

FEC ID number of contributing federal political committee. **C** C00103697

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt 10 / 28 / 2008
Transaction ID: C2191581
 Amount of Each Receipt this Period 3000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
BP North America Employees PAC

Mailing Address 4101 Winfield Road - 106D
Mail Code 5N

City Warrenville State IL Zip Code 60555

FEC ID number of contributing federal political committee. **C** C00060103

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 10 / 22 / 2008
Transaction ID: C2178901
 Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 5000.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 29 / 63
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
Brotherhood of Locomotive Engineers
Mailing Address 1370 Ontario St
City Cleveland State OH Zip Code 44113
FEC ID number of contributing federal political committee. **C** C00099234
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 2500.00
Date of Receipt 10 / 30 / 2008
Transaction ID: C2196648
Amount of Each Receipt this Period 2500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
BROWNSTEIN HYATT FARBER SCHRECK P.C. POLITICAL ACT
Mailing Address 410 Seventeenth Street 22nd Floor
City Denver State CO Zip Code 80202
FEC ID number of contributing federal political committee. **C** C00390583
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00
Date of Receipt 11 / 01 / 2008
Transaction ID: C2199612
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
BURLINGTON NORTHERN SANTA FE CORPORATION RAILPAC (
Mailing Address P.O. Box 961039 Suite 220
City Fort Worth State TX Zip Code 76161
FEC ID number of contributing federal political committee. **C** C00235739
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 2500.00
Date of Receipt 11 / 05 / 2008
Transaction ID: C2215331
Amount of Each Receipt this Period 2500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 6000.00
TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 30 / 63
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
Committee to Elect Senator Phil Griego
Mailing Address PO Box 10
City San Jose State NM Zip Code 87565-0010
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
1000.00
Date of Receipt
M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 0 8
Transaction ID: C2196606
Amount of Each Receipt this Period
1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
DAIRY FARMERS OF AMERICA INC DEPAC (DAIRY EDUCATIO
Mailing Address P O BOX 909700
City KANSAS CITY State MO Zip Code 64190
FEC ID number of contributing federal political committee. **C** C00001388
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
1000.00
Date of Receipt
M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8
Transaction ID: C2199096
Amount of Each Receipt this Period
1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
David Wu for Congress
Mailing Address 818 SW 3rd Ave
City Portland State OR Zip Code 97204-2405
FEC ID number of contributing federal political committee. **C** C00329292
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
1000.00
Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 8
Transaction ID: C2192432
Amount of Each Receipt this Period
1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 3000.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 31 / 63
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A.

Full Name (Last, First, Middle Initial)
DemOC PAC

Mailing Address 1212 S Victory Blvd

City Burbank State CA Zip Code 91502-2551

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt: 10 / 27 / 2008

Transaction ID: C2189716

Amount of Each Receipt this Period: 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Democrats for Rick Lass

Mailing Address 989 Paseo Del Sur

City Santa Fe State NM Zip Code 87501-7019

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt: 10 / 27 / 2008

Transaction ID: C2188593

Amount of Each Receipt this Period: 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
FOREST CITY ENTERPRISES INC. UNITED FOR A SENSIBLE

Mailing Address 50 Public Square-
Terminal Tower, Suite 1100

City Cleveland State OH Zip Code 44113

FEC ID number of contributing federal political committee. **C** C00123513

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt: 11 / 04 / 2008

Transaction ID: C2214958

Amount of Each Receipt this Period: 5000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **5750.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 32 / 63
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
Freeport-McMorAN Copper & Gold Inc. Citenship Comm

Mailing Address 1615 Poydras Street
23rd Floor

City State Zip Code
New Orleans LA 70112

FEC ID number of contributing federal political committee. **C** C00320101

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 7500.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 2 2 / 2 0 0 8

Transaction ID: C2178858

Amount of Each Receipt this Period
2500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Friends of Feldman

Mailing Address 1821 Meadow View Dr NW

City State Zip Code
Albuquerque NM 87104-2511

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 1 / 1 2 / 2 0 0 8

Transaction ID: C2259541

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
H & H Federal PAC

Mailing Address 555 17th St

City State Zip Code
Denver CO 80202-3950

FEC ID number of contributing federal political committee. **C** C00137729

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 2 1 / 2 0 0 8

Transaction ID: C2176334

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 4500.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 33 / 63
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
HUMAN RIGHTS CAMPAIGN PAC

Mailing Address 1640 Rhode Island Avenue NW

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00235853

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3025.00

Date of Receipt: 10 / 31 / 2008
Transaction ID: C2199075
 Amount of Each Receipt this Period: 25.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

* In-Kind: Website Endorsement

B. Full Name (Last, First, Middle Initial)
IBEW COPE

Mailing Address 900 7th St NW

City Washington State DC Zip Code 20001-3720

FEC ID number of contributing federal political committee. **C** C00027342

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 11 / 24 / 2008
Transaction ID: C2249317
 Amount of Each Receipt this Period: 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
John D. Dingell for Congress Committee

Mailing Address 607 14th Street N.W. Suite 800

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00002600

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt: 11 / 24 / 2008
Transaction ID: C2249329
 Amount of Each Receipt this Period: 2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 3025.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 34 / 63
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
Machinists Non Partisan Political League

Mailing Address 9000 Machinists Pl

City State Zip Code
Upper Marlboro MD 20772-2675

FEC ID number of contributing federal political committee. **C** C00002469

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: C2178860

Amount of Each Receipt this Period
4000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF INSURANCE AND FINANCIAL AD

Mailing Address 2901 Telestar Court

City State Zip Code
Falls Church VA 22042

FEC ID number of contributing federal political committee. **C** C00005249

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: C2191599

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
NATIONAL BEER WHOLESALERS ASSOCIATION POLITICAL AC

Mailing Address 1101 King Street
Suite 600

City State Zip Code
Alexandria VA 22314

FEC ID number of contributing federal political committee. **C** C00144766

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: C2178929

Amount of Each Receipt this Period
5000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **10000.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 35 / 63
	(check only one)
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
People for Ben

A.	Full Name (Last, First, Middle Initial) New Millennium PAC		Date of Receipt
	Mailing Address P.O. Box 632		<input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Union City	NJ	07087
	FEC ID number of contributing federal political committee.		<input type="text" value="C00349233"/>
Name of Employer		Occupation	Transaction ID: C2189729
Receipt For: 2008		Amount of Each Receipt this Period	
<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General	<input type="text" value="2500.00"/>	
<input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.	Full Name (Last, First, Middle Initial) NIGA Sovereignty PAC		Date of Receipt
	Mailing Address 224 2nd St SE		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Washington	DC	20003-1943
	FEC ID number of contributing federal political committee.		<input type="text" value="C00367177"/>
Name of Employer		Occupation	Transaction ID: C2196630
Receipt For: 2008		Amount of Each Receipt this Period	
<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General	<input type="text" value="1000.00"/>	
<input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.	Full Name (Last, First, Middle Initial) Penn National Gaming PAC		Date of Receipt
	Mailing Address 825 Berkshire Blvd		<input type="text" value="10"/> / <input type="text" value="28"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Reading	PA	19610-1247
	FEC ID number of contributing federal political committee.		<input type="text" value="C00423814"/>
Name of Employer		Occupation	Transaction ID: C2191608
Receipt For: 2008		Amount of Each Receipt this Period	
<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General	<input type="text" value="500.00"/>	
<input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="4000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 36 / 63
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
Rep. Bobby & Charlene Gonzales

Mailing Address 6193 Ndcbu

City Taos State NM Zip Code 87571-6208

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 750.00

Date of Receipt: 10 / 30 / 2008
Transaction ID: C2249343
Amount of Each Receipt this Period: 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
State Rep Patty Lundstrom Campaign Fund

Mailing Address 3406 Blue Hill Ave

City Gallup State NM Zip Code 87301-6901

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt: 10 / 30 / 2008
Transaction ID: C2196655
Amount of Each Receipt this Period: 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
United States Telecom Association

Mailing Address 607 14th Street Northwest Suite 400

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00000984

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 11 / 24 / 2008
Transaction ID: C2249319
Amount of Each Receipt this Period: 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **1750.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 37 / 63
	(check only one)
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
People for Ben

A.

Full Name (Last, First, Middle Initial) VERIZON COMMUNICATION INC. GOOD GOVT CLUB		Date of Receipt MM / DD / YYYY 11 / 02 / 2008
Mailing Address 1300 I St NW Ste 400 West		Transaction ID: C2196654
City Washington	State DC	Zip Code 20005
FEC ID number of contributing federal political committee. C C00186288		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

B.

Full Name (Last, First, Middle Initial) Wolverine PAC		Date of Receipt MM / DD / YYYY 11 / 24 / 2008
Mailing Address 607 14TH STREET NW SUITE 800		Transaction ID: C2249326
City WASHINGTON	State DC	Zip Code 20005
FEC ID number of contributing federal political committee. C C00451583		Amount of Each Receipt this Period 2300.00
Name of Employer	Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	

SUBTOTAL of Receipts This Page (optional)	3300.00
TOTAL This Period (last page this line number only)	53325.00

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
People for Ben

A.

Full Name (Last, First, Middle Initial)
Auburn Quad, Inc

Transaction ID: D141376
Date of Disbursement

Mailing Address PO Box 390728

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	7		2	0	0	8

City Cambridge State MA Zip Code 02139-0008

Amount of Each Disbursement this Period

121.48

Purpose of Disbursement
Credit Card Service Fee

--

Candidate Name

Category/
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Auburn Quad, Inc

Transaction ID: D141377
Date of Disbursement

Mailing Address PO Box 390728

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	7		2	0	0	8

City Cambridge State MA Zip Code 02139-0008

Amount of Each Disbursement this Period

13.83

Purpose of Disbursement
Credit Card Service Fee

--

Candidate Name

Category/
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Auburn Quad, Inc

Transaction ID: D141381
Date of Disbursement

Mailing Address PO Box 390728

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	7		2	0	0	8

City Cambridge State MA Zip Code 02139-0008

Amount of Each Disbursement this Period

69.73

Purpose of Disbursement
Credit Card Service Fee

--

Candidate Name

Category/
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

205.04

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

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
People for Ben

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Auburn Quad, Inc</p> <p>Mailing Address PO Box 390728</p> <p>City Cambridge State MA Zip Code 02139-0008</p> <p>Purpose of Disbursement Credit Card Service Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D141382</p> <p>Date of Disbursement 10 / 27 / 2008</p> <p>Amount of Each Disbursement this Period 4.75</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Auburn Quad, Inc</p> <p>Mailing Address PO Box 390728</p> <p>City Cambridge State MA Zip Code 02139-0008</p> <p>Purpose of Disbursement Credit Card Service Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D141383</p> <p>Date of Disbursement 10 / 27 / 2008</p> <p>Amount of Each Disbursement this Period 5.14</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Auburn Quad, Inc</p> <p>Mailing Address PO Box 390728</p> <p>City Cambridge State MA Zip Code 02139-0008</p> <p>Purpose of Disbursement Credit Card Service Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D141384</p> <p>Date of Disbursement 10 / 27 / 2008</p> <p>Amount of Each Disbursement this Period 40.10</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

49.99

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
People for Ben

A.

Full Name (Last, First, Middle Initial)
Auburn Quad, Inc

Mailing Address PO Box 390728

City Cambridge State MA Zip Code 02139-0008

Purpose of Disbursement
Credit Card Service Fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D142430
Date of Disbursement

10 / 29 / 2008

Amount of Each Disbursement this Period

159.99

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)
Auburn Quad, Inc

Mailing Address PO Box 390728

City Cambridge State MA Zip Code 02139-0008

Purpose of Disbursement
Credit Card Service Fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D142431
Date of Disbursement

11 / 02 / 2008

Amount of Each Disbursement this Period

110.59

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)
Auburn Quad, Inc

Mailing Address PO Box 390728

City Cambridge State MA Zip Code 02139-0008

Purpose of Disbursement
Credit Card Service Fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D142432
Date of Disbursement

11 / 04 / 2008

Amount of Each Disbursement this Period

59.25

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

329.83

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
People for Ben

A.

Full Name (Last, First, Middle Initial)
Terri Nikole Nikole Baca

Mailing Address 5125 Northern Trl NW

City Albuquerque State NM Zip Code 87120-2025

Purpose of Disbursement
Supplies

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D144200
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	3	/	2	0	0	8

Amount of Each Disbursement this Period

186.30

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)
Terri Nikole Nikole Baca

Mailing Address 5125 Northern Trl NW

City Albuquerque State NM Zip Code 87120-2025

Purpose of Disbursement
Labor

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D144201
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	1	/	2	0	0	8

Amount of Each Disbursement this Period

2000.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)
Terri Nikole Nikole Baca

Mailing Address 5125 Northern Trl NW

City Albuquerque State NM Zip Code 87120-2025

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D145126
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	5	/	2	0	0	8

Amount of Each Disbursement this Period

2000.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

4186.30

TOTAL This Period (last page this line number only)

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
People for Ben

A.	Full Name (Last, First, Middle Initial) MARKEY FOR CONGRESS	Transaction ID: D141761
	Mailing Address PO Box 1333	Date of Disbursement 10 / 29 / 2008
	City Fort Collins State CO Zip Code 80521	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Donation	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name Betsy Markey	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) BOB LORD FOR CONGRESS	Transaction ID: D141760
	Mailing Address 4340 E INDIAN SCHOOL SUITE 21-502	Date of Disbursement 10 / 29 / 2008
	City PHOENIX State AZ Zip Code 85018	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Donation	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name Bob Lord	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Century Bank	Transaction ID: D141756
	Mailing Address PO Box 1507	Date of Disbursement 10 / 31 / 2008
	City Santa Fe State NM Zip Code 87504-1507	Amount of Each Disbursement this Period 4397.10
	Purpose of Disbursement Payroll Taxes	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	6397.10
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
People for Ben

<p>A. Full Name (Last, First, Middle Initial) Century Bank</p> <p>Mailing Address PO Box 1507</p> <p>City Santa Fe State NM Zip Code 87504-1507</p> <p>Purpose of Disbursement Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D144185 Date of Disbursement 11 / 24 / 2008</p> <p>Amount of Each Disbursement this Period 3963.85</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) City of Santa Fe</p> <p>Mailing Address 2515 Camino Entrada</p> <p>City Santa Fe State NM Zip Code 87507-4808</p> <p>Purpose of Disbursement Utilities</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D141768 Date of Disbursement 10 / 20 / 2008</p> <p>Amount of Each Disbursement this Period 25.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Corwin Research</p> <p>Mailing Address 11024 Montgomery Blvd. NE #128</p> <p>City Albuquerque State NM Zip Code 87111</p> <p>Purpose of Disbursement Research</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D145129 Date of Disbursement 11 / 15 / 2008</p> <p>Amount of Each Disbursement this Period 186.81</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

4175.66

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
People for Ben

A.	Full Name (Last, First, Middle Initial) DAN SEALS FOR CONGRESS	Transaction ID: D141767
	Mailing Address P.O. Box 584	Date of Disbursement 10 / 29 / 2008
	City Wilmette State IL Zip Code 60091	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Donation	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name Dan Seals	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) DAN SEALS FOR CONGRESS	Transaction ID: D143268
	Mailing Address P.O. Box 584	Date of Disbursement 11 / 03 / 2008
	City Wilmette State IL Zip Code 60091	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name Dan Seals	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Elections in Motion	Transaction ID: D143264
	Mailing Address 1019 Don Diego Ave	Date of Disbursement 10 / 22 / 2008
	City Santa Fe State NM Zip Code 87505-1626	Amount of Each Disbursement this Period 6405.00
	Purpose of Disbursement Fundraising Consulting	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	8405.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
People for Ben

A.	Full Name (Last, First, Middle Initial) KRATOVIL FOR CONGRESS	Transaction ID: D141763 Date of Disbursement 10 / 29 / 2008
	Mailing Address 222 Main Sail Drive PO Box 518	Amount of Each Disbursement this Period 2000.00
	City Stevensville State MD Zip Code 21666	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Donation Candidate Name Frank Kratovil Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Chris Garcia	Transaction ID: D144188 Date of Disbursement 11 / 18 / 2008
	Mailing Address 6230 Saint Josephs Ct NW	Amount of Each Disbursement this Period 1594.61
	City Albuquerque State NM Zip Code 87120-3708	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Salary Candidate Name Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Chris Garcia	Transaction ID: D144190 Date of Disbursement 11 / 01 / 2008
	Mailing Address 6230 Saint Josephs Ct NW	Amount of Each Disbursement this Period 1594.61
	City Albuquerque State NM Zip Code 87120-3708	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Salary Candidate Name Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	5189.22
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
HARRY TEAGUE FOR CONGRESS

Mailing Address PO BOX 5153
PO BOX 5153

City HOBBS State NM Zip Code 88241

Purpose of Disbursement
Donation

Candidate Name
Harry Teague

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D141762
Date of Disbursement

/ /

Amount of Each Disbursement this Period

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial)
HM Consulting

Mailing Address 422 C St NE

City Washington State DC Zip Code 20002-5818

Purpose of Disbursement
Consulting Services

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D145121
Date of Disbursement

/ /

Amount of Each Disbursement this Period

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

Mailing Address 1007 Don Rovin Ln

City Farmington State NM Zip Code 87401-7911

Purpose of Disbursement
Event Expense

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D140018
Date of Disbursement

/ /

Amount of Each Disbursement this Period

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

* In-Kind Received

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
People for Ben

A.	Full Name (Last, First, Middle Initial) Hotel Santa Fe <hr/> Mailing Address 1501 Paseo De Peralta <hr/> City Santa Fe State NM Zip Code 87501-3721 <hr/> Purpose of Disbursement Campaign Event Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D143272 Date of Disbursement 11 / 13 / 2008 <hr/> Amount of Each Disbursement this Period 3696.82 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) HUMAN RIGHTS CAMPAIGN PAC <hr/> Mailing Address 1640 Rhode Island Avenue NW <hr/> City Washington State DC Zip Code 20036 <hr/> Purpose of Disbursement Website Endorsment Candidate Name HUMAN RIGHTS CAMPAIGN PAC <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D141703 Date of Disbursement 10 / 31 / 2008 <hr/> Amount of Each Disbursement this Period 25.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 * In-Kind Received
C.	Full Name (Last, First, Middle Initial) JOE GARCIA FOR CONGRESS <hr/> Mailing Address PO Box 0595 Suite 102 <hr/> City Miami State FL Zip Code 33196 <hr/> Purpose of Disbursement Donation Candidate Name Joe Garcia <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D141765 Date of Disbursement 10 / 29 / 2008 <hr/> Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

4721.82

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
People for Ben

A.

Full Name (Last, First, Middle Initial)
KFUN Radio

Mailing Address PO Box 700

City Las Vegas State NM Zip Code 87701-0700

Purpose of Disbursement
Advertising

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D141769
Date of Disbursement

10 / 30 / 2008

Amount of Each Disbursement this Period

533.05

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)
Daniel H. Kloke

Mailing Address 3804 Copper Ave NE
Apt 2

City Albuquerque State NM Zip Code 87108-1049

Purpose of Disbursement
Communications

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D144196
Date of Disbursement

11 / 12 / 2008

Amount of Each Disbursement this Period

1264.12

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)
KNMX

Mailing Address 304 S Grand Ave

City Las Vegas State NM Zip Code 87701-3873

Purpose of Disbursement
Advertising

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D143267
Date of Disbursement

10 / 31 / 2008

Amount of Each Disbursement this Period

635.45

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

2432.62

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
People for Ben

A.	Full Name (Last, First, Middle Initial) KNMX	Transaction ID: D141753 Date of Disbursement 10 / 29 / 2008
	Mailing Address 304 S Grand Ave	Amount of Each Disbursement this Period 667.82
	City Las Vegas State NM Zip Code 87701-3873	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Advertising Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) KRSN AM 1490	Transaction ID: D141754 Date of Disbursement 10 / 29 / 2008
	Mailing Address 145 Central Park Sq	Amount of Each Disbursement this Period 325.37
	City Los Alamos State NM Zip Code 87544-4025	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Advertising Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) KSWV Radio	Transaction ID: D141414 Date of Disbursement 10 / 20 / 2008
	Mailing Address 102 Taos St	Amount of Each Disbursement this Period 4481.57
	City Santa Fe State NM Zip Code 87505	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Advertising Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	5474.76
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
People for Ben

A.	Full Name (Last, First, Middle Initial) Jason Loera Mailing Address 640 Bradshawe Ave City Los Angeles State CA Zip Code 90022-3403 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D145127 Date of Disbursement 11 / 15 / 2008 Amount of Each Disbursement this Period 1500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Jason Loera Mailing Address 640 Bradshawe Ave City Los Angeles State CA Zip Code 90022-3403 Purpose of Disbursement Labor Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D144204 Date of Disbursement 11 / 01 / 2008 Amount of Each Disbursement this Period 1500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Mack Course Group Mailing Address 2001 N Beaugard St City Alexandria State VA Zip Code 22311-1739 Purpose of Disbursement Direct Mail Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D141755 Date of Disbursement 10 / 30 / 2008 Amount of Each Disbursement this Period 6450.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

9450.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
People for Ben

<p>A. Full Name (Last, First, Middle Initial) Martin Heinrich for Congress</p> <p>Mailing Address 2118 Central Ave SE</p> <p>City Albuquerque State NM Zip Code 87106-4004</p> <p>Purpose of Disbursement Donation</p> <p>Candidate Name Martin Heinrich</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D141764 Date of Disbursement 10 / 29 / 2008</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Kathleen Martinez</p> <p>Mailing Address 909 Calle Armada</p> <p>City Espanola State NM Zip Code 87532-3460</p> <p>Purpose of Disbursement Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D141747 Date of Disbursement 10 / 23 / 2008</p> <p>Amount of Each Disbursement this Period 982.48</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Kathleen Martinez</p> <p>Mailing Address 909 Calle Armada</p> <p>City Espanola State NM Zip Code 87532-3460</p> <p>Purpose of Disbursement Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D144187 Date of Disbursement 11 / 18 / 2008</p> <p>Amount of Each Disbursement this Period 982.48</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ►

3964.96

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
People for Ben

A.	Full Name (Last, First, Middle Initial) Matthew Reichbach <hr/> Mailing Address 1516 Paseo De Peralta <hr/> City Santa Fe State NM Zip Code 87501-3722 <hr/> Purpose of Disbursement Contract Services Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D139715 Date of Disbursement 10 / 20 / 2008 <hr/> Amount of Each Disbursement this Period 450.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Media Strategies and Research <hr/> Mailing Address 9990 Lee Hwy <hr/> City Fairfax State VA Zip Code 22030 <hr/> Purpose of Disbursement Media Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D141413 Date of Disbursement 10 / 16 / 2008 <hr/> Amount of Each Disbursement this Period 113605.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Media Strategies and Research <hr/> Mailing Address 9990 Lee Hwy <hr/> City Fairfax State VA Zip Code 22030 <hr/> Purpose of Disbursement Media Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D143266 Date of Disbursement 10 / 24 / 2008 <hr/> Amount of Each Disbursement this Period 113200.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

227255.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
People for Ben

A.	Full Name (Last, First, Middle Initial) Justin Mount Mailing Address 3289 Agua Fria St City Santa Fe State NM Zip Code 87507-8474 Purpose of Disbursement Contract Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D144205 Date of Disbursement 11 / 01 / 2008 Amount of Each Disbursement this Period 800.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) New Mexico Department of Workforce Solutions Mailing Address 401 Broadway Blvd NE City Albuquerque State NM Zip Code 87102-2330 Purpose of Disbursement SUTA Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D141757 Date of Disbursement 10 / 31 / 2008 Amount of Each Disbursement this Period 621.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) New Mexico Taxation and Revenue Department Mailing Address 1100 S Saint Francis Dr City Santa Fe State NM Zip Code 87505-4147 Purpose of Disbursement Workmen's Comp Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D141758 Date of Disbursement 10 / 31 / 2008 Amount of Each Disbursement this Period 21.50 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

1442.50

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
People for Ben

A.	Full Name (Last, First, Middle Initial) Mark Nicastre	Transaction ID: D145123 Date of Disbursement 11 / 15 / 2008
	Mailing Address 2794 Via Caballero Del Sur	Amount of Each Disbursement this Period 1423.00
	City Santa Fe State NM Zip Code 87505-5359	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Salary Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Mark Nicastre	Transaction ID: D144191 Date of Disbursement 11 / 01 / 2008
	Mailing Address 2794 Via Caballero Del Sur	Amount of Each Disbursement this Period 1480.00
	City Santa Fe State NM Zip Code 87505-5359	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Salary Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Andrew J. Perkins	Transaction ID: D144202 Date of Disbursement 11 / 03 / 2008
	Mailing Address 117 Mateo Cir N	Amount of Each Disbursement this Period 450.00
	City Santa Fe State NM Zip Code 87505-4029	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Accounting Fees Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	3353.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
RAUL MARTINEZ FOR CONGRESS

Mailing Address 700 WEST 76 STREET

City HIALEAH State FL Zip Code 33014

Purpose of Disbursement
Donation

Candidate Name
Raul Martinez

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D141766

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	9		2	0	0	8

Amount of Each Disbursement this Period

1000.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial)
Rio Rancho Event Center

Mailing Address 3001 Civic Center Cir NE

City Rio Rancho State NM Zip Code 87144-4500

Purpose of Disbursement
Event

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D141751

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	9		2	0	0	8

Amount of Each Disbursement this Period

50.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial)
Safeguard Business Systems

Mailing Address 8585 N. Stemmons, Suite 600 N

City Dallas State TX Zip Code 75247

Purpose of Disbursement
Stationary

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D144197

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	2		2	0	0	8

Amount of Each Disbursement this Period

101.04

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

1151.04

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
People for Ben

A.	Full Name (Last, First, Middle Initial) John Sullivan	Transaction ID: D141748 Date of Disbursement 10 / 23 / 2008
	Mailing Address 49 Churchill Rd	Amount of Each Disbursement this Period 250.00
	City Santa Fe State NM Zip Code 87508-4885	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Rent, Parking, Utilities	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Sullivan Design Group	Transaction ID: D144203 Date of Disbursement 11 / 01 / 2008
	Mailing Address 227 E Palace Ave	Amount of Each Disbursement this Period 6000.00
	City Santa Fe State NM Zip Code 87501-2043	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Rent, Parking, Utilities	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Tamayo Restaurant	Transaction ID: D143265 Date of Disbursement 10 / 23 / 2008
	Mailing Address 1400 Larimer St	Amount of Each Disbursement this Period 695.52
	City Denver State CO Zip Code 80202-1744	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Food and Beverage	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	6945.52
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
People for Ben

A.	Full Name (Last, First, Middle Initial) Aaron Trujillo	Transaction ID: D141752
	Mailing Address 6804 Toratolla Ct NW	Date of Disbursement 10 / 29 / 2008
	City Albuquerque State NM Zip Code 87120-6098	Amount of Each Disbursement this Period 175.74
	Purpose of Disbursement Reimbursement for Gas	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Aaron Trujillo	Transaction ID: D145125
	Mailing Address 6804 Toratolla Ct NW	Date of Disbursement 11 / 15 / 2008
	City Albuquerque State NM Zip Code 87120-6098	Amount of Each Disbursement this Period 1632.57
	Purpose of Disbursement Salary	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Aaron Trujillo	Transaction ID: D144194
	Mailing Address 6804 Toratolla Ct NW	Date of Disbursement 11 / 01 / 2008
	City Albuquerque State NM Zip Code 87120-6098	Amount of Each Disbursement this Period 1610.10
	Purpose of Disbursement Salary	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	3418.41
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
People for Ben

A.	Full Name (Last, First, Middle Initial) Carlos Trujillo <hr/> Mailing Address 309 Rio Grande #4 <hr/> City Albuquerque State NM Zip Code 87104 <hr/> Purpose of Disbursement Expenses Candidate Name Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D144198 Date of Disbursement 11 / 07 / 2008 <hr/> Amount of Each Disbursement this Period 482.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Carlos Trujillo <hr/> Mailing Address 309 Rio Grande #4 <hr/> City Albuquerque State NM Zip Code 87104 <hr/> Purpose of Disbursement Salary Candidate Name Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D144199 Date of Disbursement 11 / 03 / 2008 <hr/> Amount of Each Disbursement this Period 3000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Carlos Trujillo <hr/> Mailing Address 309 Rio Grande #4 <hr/> City Albuquerque State NM Zip Code 87104 <hr/> Purpose of Disbursement Salary Candidate Name Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D145124 Date of Disbursement 11 / 15 / 2008 <hr/> Amount of Each Disbursement this Period 1500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

4982.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
People for Ben

A.	Full Name (Last, First, Middle Initial) Carlos Trujillo <hr/> Mailing Address 309 Rio Grande #4 <hr/> City Albuquerque State NM Zip Code 87104 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D141749 Date of Disbursement 10 / 24 / 2008 <hr/> Amount of Each Disbursement this Period 600.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Carlos Trujillo <hr/> Mailing Address 309 Rio Grande #4 <hr/> City Albuquerque State NM Zip Code 87104 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D141750 Date of Disbursement 10 / 27 / 2008 <hr/> Amount of Each Disbursement this Period 3500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) United States Post Office <hr/> Mailing Address 2110 S Pacheco St <hr/> City Santa Fe State NM Zip Code 87505-5458 <hr/> Purpose of Disbursement Postage Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D143271 Date of Disbursement 11 / 13 / 2008 <hr/> Amount of Each Disbursement this Period 525.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

4625.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
People for Ben

A.	Full Name (Last, First, Middle Initial) United States Treasury <hr/> Mailing Address 1500 Pennsylvania Ave NW <hr/> City Washington State DC Zip Code 20220-0001 <hr/> Purpose of Disbursement Tax Adjustment Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D141759 Date of Disbursement 10 / 31 / 2008 <hr/> Amount of Each Disbursement this Period 19.12 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Verizon Wireless <hr/> Mailing Address PO Box 2167 <hr/> City Folsom State CA Zip Code 95763-2167 <hr/> Purpose of Disbursement Cell Phone Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D143269 Date of Disbursement 11 / 06 / 2008 <hr/> Amount of Each Disbursement this Period 165.49 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Zata 3 <hr/> Mailing Address 458 New Jersey Ave SE <hr/> City Washington State DC Zip Code 20003-4008 <hr/> Purpose of Disbursement Voter Outreach Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D144207 Date of Disbursement 11 / 10 / 2008 <hr/> Amount of Each Disbursement this Period 1700.88 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

1885.49

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

316790.26

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

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

FOR LINE NUMBER:
(check only one)

PAGE 61 / 63

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

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NAME OF COMMITTEE (In Full)
People for Ben

A.

Full Name (Last, First, Middle Initial)
John Chavez

Mailing Address 1634 Rancho Guadalupe Trl NW

City Albuquerque State NM Zip Code 87107-3370

Purpose of Disbursement
Contribution Refund

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D146907

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE C (FEC Form 3)

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

PAGE 62 / 63

FOR LINE NUMBER: (check only one) 13a 13b

LOANS

NAME OF COMMITTEE (In Full)
People for Ben

Transaction ID: L167

LOAN SOURCE Full Name (Last, First, Middle Initial) Mr. Ben Ray Lujan	Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 05 Entrada Celedon Y Nestora	
City Santa Fe State NM ZIP Code 87506-9740	

Original Amount of Loan 150000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 150000.00
--------------------------------------	------------------------------------	--

TERMS

Date Incurred MM DD YY YY 05 19 2008	Date Due 05/16/2009	Interest Rate One Year % (apr)	Secured: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
--	------------------------	-----------------------------------	---

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial) Mr. Ben Ray Lujan	Name of Employer State of New Mexico
Mailing Address 05 Entrada Celedon Y Nestora	Occupation PRC
City Santa Fe State NM ZIP Code 87506-9740	Amount Guaranteed Outstanding: 150000.00
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)	150000.00
TOTALS This Period (last page in this line only)00

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

SCHEDULE C (FEC Form 3)

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

PAGE 63 / 63

FOR LINE NUMBER: (check only one) 13a 13b

LOANS

NAME OF COMMITTEE (In Full)
People for Ben

Transaction ID: L168

LOAN SOURCE Full Name (Last, First, Middle Initial) Mr. Ben Ray Lujan	Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 05 Entrada Celedon Y Nestora	
City Santa Fe State NM ZIP Code 87506-9740	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
50000.00	49993.06	6.94

TERMS

Date Incurred	Date Due	Interest Rate	Secured:																
<table style="font-size: small;"> <tr><td>M</td><td>M</td></tr> <tr><td>1</td><td>2</td></tr> </table>	M	M	1	2	<table style="font-size: small;"> <tr><td>D</td><td>D</td></tr> <tr><td>0</td><td>6</td></tr> </table>	D	D	0	6	<table style="font-size: small;"> <tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>2</td><td>0</td><td>0</td><td>7</td></tr> </table>	Y	Y	Y	Y	2	0	0	7	12/06/2008
M	M																		
1	2																		
D	D																		
0	6																		
Y	Y	Y	Y																
2	0	0	7																
		5.00 % (apr)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No																

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial) Mr. Ben Ray Lujan	Name of Employer State of New Mexico
Mailing Address 05 Entrada Celedon Y Nestora	Occupation PRC
City Santa Fe State NM ZIP Code 87506-9740	Amount Guaranteed Outstanding: 50000.00
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)	6.94
TOTALS This Period (last page in this line only)	150006.94

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