

**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

☐Check if different
than previously
reported. (ACC)

Sante Fe

NM

87594

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C00443689

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

NM

03

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

☐

April 15 Quarterly Report (Q1)

☐

July 15 Quarterly Report (Q2)

☐

October 15 Quarterly Report (Q3)

☒

January 31 Year-End Report (YE)

☐

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

in the
State of

(c) 30-Day POST-Election Report for the:

☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

1 1

2 3

2 0 1 0

through

1 2

3 1

2 0 1 0

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

0 2

0 1

2 0 1 1

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

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FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

People for Ben

Report Covering the Period:

From:

M M
1 1D D
2 3Y Y Y Y
2 0 1 0

To:

M M
1 2D D
3 1Y Y Y Y
2 0 1 0

	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)).....	25.00	75.00
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	25.00	75.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	13954.31	24106.59
(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)).....	13954.31	24106.59
8. Cash on Hand at Close of Reporting Period (from Line 27).....	55809.03	
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).....	83830.03	

For further information contact:

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 12/2003)

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Write or Type Committee Name
People for Ben

Report Covering the Period:

From:

M M
1 1D D
2 3Y Y Y Y
2 0 1 0

To:

M M
1 2D D
3 1Y Y Y Y
2 0 1 0

I. RECEIPTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than
Political Committees

(i) Itemized (use Schedule A).....

0.00

0.00

(ii) Unitemized.....

25.00

75.00

(iii) TOTAL of contributions

from individuals..... ▶

25.00

75.00

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees
(such as PACS).....

0.00

0.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS
(other than loans)

(add Lines 11(a)(iii), (b), (c), and (d))

25.00

75.00

12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES.....

0.00

0.00

13. LOANS

(a) Made or Guaranteed by the
Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS

(add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING
EXPENDITURES
(Refunds, Rebates, etc.).....

0.00

0.00

15. OTHER RECEIPTS

(Dividends, Interest, etc.).....

0.00

0.00

16. TOTAL RECEIPTS (add Lines
11(e), 12, 13(c), 14, and 15)
(Carry Total to Line 24, page 4)..... ▶

25.00

75.00

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	13954.31	24106.59
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	11400.00	11400.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	11400.00	11400.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS.....	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	25354.31	35506.59

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	81138.34
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	25.00
25. SUBTOTAL (add Line 23 and Line 24).....	81163.34
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	25354.31
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	55809.03

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 5 / 11

<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) Verizon Wireless Mailing Address PO Box 2167	Transaction ID: D253740 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	9		2	0	1	0	
M	M	/	D	D	/	Y	Y	Y	Y													
1	2		2	9		2	0	1	0													
City Folsom State CA Zip Code 95763-2167 Purpose of Disbursement Cell Phone Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <table border="1"> <tr> <td>158.49</td> </tr> </table>	158.49																				
158.49																						
B. Full Name (Last, First, Middle Initial) YouSendIt Mailing Address 1919 S. Bascom Ave 3rd Floor City Campbell State CA Zip Code 95008 Purpose of Disbursement Computer Software Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D253790 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td>9.99</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	5		2	0	1	0	9.99
M	M	/	D	D	/	Y	Y	Y	Y													
1	2		1	5		2	0	1	0													
9.99																						
C. Full Name (Last, First, Middle Initial) BuzzMaker, LLC Mailing Address 322 Shepherd St NW City Washington State DC Zip Code 20011-4812 Purpose of Disbursement Website Hosting Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D253741 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td>99.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	9		2	0	1	0	99.00
M	M	/	D	D	/	Y	Y	Y	Y													
1	2		2	9		2	0	1	0													
99.00																						

SUBTOTAL of Disbursements This Page (optional)

267.48

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)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
People for Ben

A.

Full Name (Last, First, Middle Initial)
Capitol City Brewing Company

Mailing Address 2 Massachusetts Ave NW

City Washington State DC Zip Code 20001-1432

Purpose of Disbursement
Event - Food

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2012 ☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D253791

Date of Disbursement

12 / 13 / 2010

Amount of Each Disbursement this Period

681.48

B.

Full Name (Last, First, Middle Initial)
Dunkin Donuts

Mailing Address 1085 S Saint Francis Dr

City Santa Fe State NM Zip Code 87505-1653

Purpose of Disbursement
Food for Staff

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2012 ☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D253792

Date of Disbursement

12 / 07 / 2010

Amount of Each Disbursement this Period

13.99

C.

Full Name (Last, First, Middle Initial)
Elections in Motion

Mailing Address 1019 Don Diego Ave

City Santa Fe State NM Zip Code 87505-1626

Purpose of Disbursement
Fundraising Consulting

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2012 ☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D253743

Date of Disbursement

12 / 31 / 2010

Amount of Each Disbursement this Period

6000.75

SUBTOTAL of Disbursements This Page (optional)

6696.22

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)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
People for Ben

<p>A.</p> <p>Full Name (Last, First, Middle Initial) NGP Software</p> <p>Mailing Address 1225 I St NW Ste 1225</p> <p>City Washington State DC Zip Code 20005-5918</p> <p>Purpose of Disbursement Fundraising Software</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: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D253793</p> <p>Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 2 / 2 0 1 0</p> <p>Amount of Each Disbursement this Period 500.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Google Adwords</p> <p>Mailing Address 1600 Amphitheatre Pkwy</p> <p>City Mountain View State CA Zip Code 94043-1351</p> <p>Purpose of Disbursement Internet Advertising</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: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D253794</p> <p>Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 1 0</p> <p>Amount of Each Disbursement this Period 217.09</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Le Peep Restaurant</p> <p>Mailing Address 2125 Louisiana Blvd</p> <p>City Albuquerque State NM Zip Code 87110</p> <p>Purpose of Disbursement Event - Food</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: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D253786</p> <p>Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 1 / 2 0 1 0</p> <p>Amount of Each Disbursement this Period 205.83</p>

SUBTOTAL of Disbursements This Page (optional)

922.92

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)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial) ActBlue Technical Services	Transaction ID: D253737 Date of Disbursement
Mailing Address PO Box 382110	<div> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div>1 2 / 2 9 / 2 0 1 0</div> </div>
City Cambridge State MA Zip Code 02238-2110	Amount of Each Disbursement this Period
Purpose of Disbursement Credit Card Service Fee	<div> <div></div> <div>0.99</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Fax.com	Transaction ID: D253787 Date of Disbursement
Mailing Address PO Box 22500	<div> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div>1 2 / 2 0 / 2 0 1 0</div> </div>
City San Diego State CA Zip Code 92192-2500	Amount of Each Disbursement this Period
Purpose of Disbursement Professional Services	<div> <div></div> <div>12.59</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Elections in Motion	Transaction ID: D253738 Date of Disbursement
Mailing Address 1019 Don Diego Ave	<div> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div>1 2 / 0 1 / 2 0 1 0</div> </div>
City Santa Fe State NM Zip Code 87505-1626	Amount of Each Disbursement this Period
Purpose of Disbursement Fundraising Consulting	<div> <div></div> <div>5885.00</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

5898.58

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)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

People for Ben

A.

Full Name (Last, First, Middle Initial)

Verizon Wireless

Mailing Address PO Box 2167

City
Folsom

State
CA

Zip Code
95763-2167

Purpose of Disbursement
Cell Phone

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State:

District:

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: D253739

Date of Disbursement

/ /

Amount of Each Disbursement this Period

169.11

SUBTOTAL of Disbursements This Page (optional)

169.11

TOTAL This Period (last page this line number only)

13954.31

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)

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☐ 17 ☐ 18 ☒ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

People for Ben

A.

Full Name (Last, First, Middle Initial)

Mr. Ben Ray Lujan

Mailing Address 05 Entrada Celedon Y Nestora

City
Santa Fe

State
NM

Zip Code
87506-9740

Purpose of Disbursement
Loan Repayment

Candidate Name
Mr. Ben Ray Lujan

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: NM District: 03

Transaction ID: D253742

Date of Disbursement

/ /

Amount of Each Disbursement this Period

11400.00

SUBTOTAL of Disbursements This Page (optional)

11400.00

TOTAL This Period (last page this line number only)

11400.00

SCHEDULE C (FEC Form 3)Use separate schedule(s)
for each category of the
Detailed Summary Page

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LOANSFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

People for Ben

Transaction ID: L167

LOAN SOURCE Full Name (Last, First, Middle Initial)
Mr. Ben Ray Lujan

Election:

☒ Primary
☐ General
☐ 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

66169.97

Balance Outstanding at Close of This Period

83830.03

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M
0 5D D
1 9Y Y Y Y
2 0 0 8

05/16/2009

7.00 % (apr)

☒ Yes ☐ No

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

Full Name (Last, First, Middle Initial)
Mr. Ben Ray LujanName of Employer
State of New MexicoMailing Address
05 Entrada Celedon Y NestoraOccupation
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) ▶

83830.03

TOTALS This Period (last page in this line only) ▶

83830.03

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