

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than 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  
Republican Campaign Committee Of New Mexico

ADDRESS (number and street) PO Box 94083  
 Check if different than previously reported. (ACC)  
Albuquerque NM 87199-4083

2. **FEC IDENTIFICATION NUMBER** C00020818  
**3. IS THIS REPORT**  NEW (N) **OR**  AMENDED (A)

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 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE**-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12G)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post**-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 03 01 2011 through 03 31 2011

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 Bill Redmond

Signature of Treasurer Electronically Filed by Bill Redmond Date 04 20 2011

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 3X** (Rev. 12/2004)

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
Republican Campaign Committee Of New Mexico

Report Covering the Period: From: 

M	M
0	3

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To: 

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	1	1

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>X</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	X	Y	Y	Y	2	0	1	1		170298.35
X	Y	Y	Y							
2	0	1	1							
(b) Cash on Hand at Beginning of Reporting Period .....	137116.63									
(c) Total Receipts (from Line 19) .....	23847.71	60757.90								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	160964.34	231056.25								
7. Total Disbursements (from Line 31) .....	28297.93	98389.84								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	132666.41	132666.41								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
Republican Campaign Committee Of New Mexico

Report Covering the Period: From: 

M	M
0	3

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To: 

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	1	1

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	9114.57	18887.47
(ii) Unitemized .....	14623.58	36348.02
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	23738.15	55235.49
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	23738.15	55235.49
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	1.64	4.46
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	107.92	5517.95
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	107.92	5517.95
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	23847.71	60757.90
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	23739.79	55239.95

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	91.40	2059.34
(ii) Non-Federal Share.....	260.14	6011.31
(b) Other Federal Operating Expenditures.....	27946.39	90319.19
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	28297.93	98389.84
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	28297.93	98389.84
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	28037.79	92378.53

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	23738.15	55235.49
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	23738.15	55235.49
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	28037.79	92378.53
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	28037.79	92378.53

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 24  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)  
Republican Campaign Committee Of New Mexico

**A.** Full Name (Last, First, Middle Initial)  
Mr. William Conley

Mailing Address PO Box 392

City State Zip Code  
Angel Fire NM 87710-0392

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

Name of Employer Self-Employed Occupation Investigator

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 04 / 2011

**Transaction ID:** SA11AI-1017-101166-c

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. G Williamson

Mailing Address PO Box 32570

City State Zip Code  
Santa Fe NM 87594-2570

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

Name of Employer None Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 25 / 2011

**Transaction ID:** SA11AI18355101429c

Amount of Each Receipt this Period  
220.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. John Skinner

Mailing Address 412 Corrine Place

City State Zip Code  
Carlsbad NM 88220-8854

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

Name of Employer None Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 30 / 2011

**Transaction ID:** SA11AI19100101501c

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 720.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 24  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)  
Republican Campaign Committee Of New Mexico

**A.**

Full Name (Last, First, Middle Initial) Mr. Hoyt Pattison		Date of Receipt MM / DD / YYYY <span style="border: 1px solid black; padding: 2px;">03 / 04 / 2011</span>
Mailing Address 2295 Curry Rd. H		<b>Transaction ID:</b> SA11AI21922101159c
City Clovis	State NM	Zip Code 88101-0900
FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span>		Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">650.00</span>
Name of Employer Self-Employed	Occupation Farmer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">650.00</span>	

**B.**

Full Name (Last, First, Middle Initial) Mr. David Kimble		Date of Receipt MM / DD / YYYY <span style="border: 1px solid black; padding: 2px;">03 / 04 / 2011</span>
Mailing Address 4096 Demos Avenue		<b>Transaction ID:</b> SA11AI25083101165c
City Las Cruces	State NM	Zip Code 88011-4209
FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span>		Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">250.00</span>
Name of Employer Kimble & Associates	Occupation Lobbyist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">250.00</span>	

**C.**

Full Name (Last, First, Middle Initial) Mr. Steve Crespin		Date of Receipt MM / DD / YYYY <span style="border: 1px solid black; padding: 2px;">03 / 04 / 2011</span>
Mailing Address 11501 Appian Way NE		<b>Transaction ID:</b> SA11AI25301101164c
City Albuquerque	State NM	Zip Code 87111-5207
FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span>		Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">250.00</span>
Name of Employer Mechanical Contractors As- soc	Occupation Executive Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">250.00</span>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">1150.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

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

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

FOR LINE NUMBER: PAGE 8 / 24  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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)  
Republican Campaign Committee Of New Mexico

**A.** Full Name (Last, First, Middle Initial)  
Mr. Charles Ferrell

Mailing Address 603 Eagle Drive

City Alamogordo State NM Zip Code 88310-7729

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

Name of Employer New Mexico Exchange Occupation Lobbyist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 04 / 2011  
Transaction ID: SA11AI-3528-101161-c  
Amount of Each Receipt this Period 500.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Janet Richardson

Mailing Address 1301 Lewis Road

City Artesia State NM Zip Code 88210-9438

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

Name of Employer Yates Petroleum Occupation Oil & Gas

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt 03 / 21 / 2011  
Transaction ID: SA11AI39556101303c  
Amount of Each Receipt this Period 360.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. James Casciano

Mailing Address 7400 Arroyo Del Oso Avenue NE

City Albuquerque State NM Zip Code 87109-2927

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

Name of Employer Intel Corp Occupation Engineer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt 03 / 30 / 2011  
Transaction ID: SA11AI39765101510c  
Amount of Each Receipt this Period 180.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1040.00

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

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

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

FOR LINE NUMBER: PAGE 9 / 24  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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)  
Republican Campaign Committee Of New Mexico

**A.** Full Name (Last, First, Middle Initial)  
Cable One

Mailing Address PO Box 78407

City State Zip Code  
Phoenix AZ 85062-8407

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 244.57

Date of Receipt  
03 / 30 / 2011

**Transaction ID:** SA11AI40389101517c

Amount of Each Receipt this Period  
244.57

Refund/rebate for internet service

**B.** Full Name (Last, First, Middle Initial)  
Ernest Byers

Mailing Address 1204 Main St.  
Suite 204

City State Zip Code  
Los Lunas NM 87031

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
03 / 04 / 2011

**Transaction ID:** SA11AI40739101160c

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Ann Maloney Conway

Mailing Address 3636 Vista Grande Drive NW

City State Zip Code  
Albuquerque NM 87120-1144

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Keleher & McLeod PA Attorney

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
03 / 04 / 2011

**Transaction ID:** SA11AI40740101162c

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... 744.57

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 24  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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)  
Republican Campaign Committee Of New Mexico

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Paul Wood

Mailing Address 2416 Rozinante Drive NW

City Albuquerque State NM Zip Code 87104-3081

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

Name of Employer FNF Construction Occupation Contractor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 04 / 2011

Transaction ID: SA11AI40741101163c

Amount of Each Receipt this Period 500.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Butch Matthews

Mailing Address PO Box 600

City Farmington State NM Zip Code 87499-0600

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

Name of Employer M & R Trucking, Inc. Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 25 / 2011

Transaction ID: SA11AI40773101433c

Amount of Each Receipt this Period 1000.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr. David McCoy

Mailing Address 7104 Patricia Drive NE

City Albuquerque State NM Zip Code 87109-4841

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

Name of Employer Association Management Inc Occupation Association Executive Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 04 / 2011

Transaction ID: SA11AI-7484-101157-c

Amount of Each Receipt this Period 250.00

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

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 24  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
							17

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)  
Republican Campaign Committee Of New Mexico

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Marjorie Teague

Mailing Address 4910 Simon Drive NW

City Albuquerque State NM Zip Code 87114-4329

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

Name of Employer Self-Employed Occupation Lobbyist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt 03 / 04 / 2011

Transaction ID: SA11AI-7860-101154-c

Amount of Each Receipt this Period 360.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Edward Lujan

Mailing Address 3700 Andrew Drive NE

City Albuquerque State NM Zip Code 87110-1327

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

Name of Employer Manuel Lujan Insurance, Inc. Occupation Insurance Broker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 25 / 2011

Transaction ID: SA11AI-8274-101414-c

Amount of Each Receipt this Period 300.00

**C.** Full Name (Last, First, Middle Initial)  
The Honora Patrick Rogers

Mailing Address 5819 Padre Roberto Road NW

City Los Ranchos State NM Zip Code 87107-7115

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

Name of Employer Modrall, Sperling et al, P.A. Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1750.00

Date of Receipt 03 / 09 / 2011

Transaction ID: SA11AI-8359-101172-c

Amount of Each Receipt this Period 1750.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2410.00

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

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

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

FOR LINE NUMBER: PAGE 12 / 24  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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)  
Republican Campaign Committee Of New Mexico

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Alice Jurkens

Mailing Address 10801 Lgrma De Oro Road NE  
Apt. 815

City Albuquerque State NM Zip Code 87111-8502

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 16 / 2011  
**Transaction ID:** SA11AI-8568-101261-c  
 Amount of Each Receipt this Period 1000.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. William McAdams

Mailing Address 1428 Pinnacle View Drive NE

City Albuquerque State NM Zip Code 87112-6616

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

Name of Employer None Occupation Retired

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 08 / 2011  
**Transaction ID:** SA11AI-8623-101171-c  
 Amount of Each Receipt this Period 300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1300.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>9114.57</b>

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 13 / 24

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

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)  
Republican Campaign Committee Of New Mexico

<b>A.</b> Full Name (Last, First, Middle Initial) Xerox Corporation <hr/> Mailing Address PO Box 7405 <hr/> City Pasadena State CA Zip Code 91109-7405 <hr/> Purpose of Disbursement Printing charges Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-7801-101244-e Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2011
	Amount of Each Disbursement this Period 79.95
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Mrs. Pam Wolfe <hr/> Mailing Address PO Box 15129 <hr/> City Las Cruces State NM Zip Code 88004-5129 <hr/> Purpose of Disbursement Salary and Severance Pay Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-2665-101218-e Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2011
	Amount of Each Disbursement this Period 4214.79
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Heather Hall <hr/> Mailing Address 142 Big Horn Ridge Court NE <hr/> City Albuquerque State NM Zip Code 87122-1902 <hr/> Purpose of Disbursement Administrative/Salary/Overhead: Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-40332-101470-e Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2011
	Amount of Each Disbursement this Period 915.24
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

5209.98

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 14 / 24

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

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)  
Republican Campaign Committee Of New Mexico

<p><b>A.</b> Full Name (Last, First, Middle Initial) Wells Fargo Bank, NA</p> <p>Mailing Address 7412 Jefferson Street NE</p> <p>City Albuquerque State NM Zip Code 87109-4336</p> <p>Purpose of Disbursement Wells Fargo Direct Pay Subscription 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-39724-101716-e</p> <p>Date of Disbursement MM / DD / YYYY 03 / 08 / 2011</p> <p>Amount of Each Disbursement this Period 11.77</p> <p>Category/Type 001</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Ms. Heather Hall</p> <p>Mailing Address 142 Big Horn Ridge Court NE</p> <p>City Albuquerque State NM Zip Code 87122-1902</p> <p>Purpose of Disbursement Reimbursement for travel expenses</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-40332-101242-e</p> <p>Date of Disbursement MM / DD / YYYY 03 / 15 / 2011</p> <p>Amount of Each Disbursement this Period 168.28</p> <p>Category/Type 001</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Taxation &amp; Revenue Department</p> <p>Mailing Address PO Box 25128</p> <p>City Santa Fe State NM Zip Code 87504-5128</p> <p>Purpose of Disbursement CRS-1 (Gross Receipts Tax)</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-18771-101522-e</p> <p>Date of Disbursement MM / DD / YYYY 03 / 15 / 2011</p> <p>Amount of Each Disbursement this Period 114.92</p> <p>Category/Type 001</p>

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

294.97

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

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

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

FOR LINE NUMBER: (check only one)

PAGE 15 / 24

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

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)  
Republican Campaign Committee Of New Mexico

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Bryan Watkins <hr/> Mailing Address 1445 Popenoe Road <hr/> City La Habra Heights State CA Zip Code 90631-8433 Purpose of Disbursement Administrative/Salary/Overhead: Salary Candidate Name	Transaction ID: SB21B-40759-101471-e Date of Disbursement MM / DD / YYYY 03 / 31 / 2011
	Amount of Each Disbursement this Period 2037.08
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Heather Hall <hr/> Mailing Address 142 Big Horn Ridge Court NE <hr/> City Albuquerque State NM Zip Code 87122-1902 Purpose of Disbursement Administrative/Salary/Overhead: Salary Candidate Name	Transaction ID: SB21B-40332-101216-e Date of Disbursement MM / DD / YYYY 03 / 15 / 2011
	Amount of Each Disbursement this Period 915.25
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:
<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Bryan Watkins <hr/> Mailing Address 1445 Popenoe Road <hr/> City La Habra Heights State CA Zip Code 90631-8433 Purpose of Disbursement Administrative/Salary/Overhead: Salary Candidate Name	Transaction ID: SB21B-40759-101217-e Date of Disbursement MM / DD / YYYY 03 / 15 / 2011
	Amount of Each Disbursement this Period 2657.76
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:

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

5610.09

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

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

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

FOR LINE NUMBER: (check only one)

PAGE 16 / 24

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

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)  
Republican Campaign Committee Of New Mexico

A.	Full Name (Last, First, Middle Initial) Verizon Wireless	Transaction ID: SB21B-6914-101238-e
	Mailing Address PO Box 660108	Date of Disbursement MM / DD / YYYY 03 / 15 / 2011
	City Dallas State TX Zip Code 75266-0108	Amount of Each Disbursement this Period 42.99
	Purpose of Disbursement Cell phones	001 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Wells Fargo Bank, NA	Transaction ID: SB21B-39724-101715-e
	Mailing Address 7412 Jefferson Street NE	Date of Disbursement MM / DD / YYYY 03 / 31 / 2011
	City Albuquerque State NM Zip Code 87109-4336	Amount of Each Disbursement this Period 378.82
	Purpose of Disbursement Bank fees	001 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Mr. Mitch Meyers	Transaction ID: SB21B-25022-101474-e
	Mailing Address 1713 Gabaldon Drive NW	Date of Disbursement MM / DD / YYYY 03 / 30 / 2011
	City Albuquerque State NM Zip Code 87104-2770	Amount of Each Disbursement this Period 627.00
	Purpose of Disbursement Voter reg table	001 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1048.81
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 17 / 24

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

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)  
Republican Campaign Committee Of New Mexico

<p><b>A.</b> Full Name (Last, First, Middle Initial) Mountain States Mutual Casualty Co.</p> <p>Mailing Address PO Box 93254</p> <p>City Albuquerque State NM Zip Code 87199-3254</p> <p>Purpose of Disbursement BAP, CPP, WCI insurance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-34706-101435-e</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="832.99"/></p> <p>Category/Type: <input type="text" value="001"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Hyatt Regency</p> <p>Mailing Address 330 Tijeras Avenue NW</p> <p>City Albuquerque State NM Zip Code 87102-3267</p> <p>Purpose of Disbursement Fundraising: Booking deposit</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-1933-101345-e</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="4000.00"/></p> <p>Category/Type: <input type="text" value="003"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) New Mexico Gas Company</p> <p>Mailing Address PO Box 173341</p> <p>City Denver State CO Zip Code 80217-3341</p> <p>Purpose of Disbursement Utilities: Gas</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-39214-101243-e</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="132.91"/></p> <p>Category/Type: <input type="text" value="001"/></p>

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

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 18 / 24

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

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)  
Republican Campaign Committee Of New Mexico

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Heather Hall <hr/> Mailing Address 142 Big Horn Ridge Court NE <hr/> City Albuquerque State NM Zip Code 87122-1902 <hr/> Purpose of Disbursement Reimbursement: Health Insurance Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-40332-101239-e Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 5 / 2 0 1 1
	Amount of Each Disbursement this Period 47.00
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Wells Fargo Bank, NA <hr/> Mailing Address 7412 Jefferson Street NE <hr/> City Albuquerque State NM Zip Code 87109-4336 <hr/> Purpose of Disbursement Wells Fargo Paid and Deposited Items fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-39724-101717-e Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 1 1
	Amount of Each Disbursement this Period 64.50
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) EFTPS <hr/> Mailing Address Internal Revenue Serv Center <hr/> City Ogden State UT Zip Code 84201-0001 <hr/> Purpose of Disbursement 941 Taxes Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-20457-101472-e Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 1 1
	Amount of Each Disbursement this Period 1076.22
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

1187.72

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 19 / 24

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

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)  
Republican Campaign Committee Of New Mexico

<p><b>A.</b> Full Name (Last, First, Middle Initial) EFTPS</p> <p>Mailing Address Internal Revenue Serv Center</p> <p>City Ogden State UT Zip Code 84201-0001</p> <p>Purpose of Disbursement 941 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-20457-101215-e <b>Date of Disbursement</b> 03 / 15 / 2011</p> <p>Amount of Each Disbursement this Period 3154.35</p> <p>001 Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) PNM</p> <p>Mailing Address PO Box 17970</p> <p>City Denver State CO Zip Code 80217-0970</p> <p>Purpose of Disbursement Utilities: Electricity</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-23373-101237-e <b>Date of Disbursement</b> 03 / 15 / 2011</p> <p>Amount of Each Disbursement this Period 200.98</p> <p>001 Category/ Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Postmaster</p> <p>Mailing Address 6255 San Antonio Drive NE</p> <p>City Albuquerque State NM Zip Code 87109-9211</p> <p>Purpose of Disbursement Postage - replace</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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-7798-101350-e <b>Date of Disbursement</b> 03 / 24 / 2011</p> <p>Amount of Each Disbursement this Period 200.00</p> <p>001 Category/ Type</p>

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

3555.33

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



**SCHEDULE H2 (FEC Form 3X)  
ALLOCATION RATIOS**

NAME OF COMMITTEE (In Full)  
**Republican Campaign Committee Of New Mexico**

**RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDATE SUPPORT  
ACTIVITIES APPEARING ON THIS REPORT.**

Methods of allocation :

- I. FUNDRAISING activities are allocated using the 'funds received method' where the federal proportion of expenses must equal the federal proportion of monies raised.
- II. Shared **DIRECT CANDIDATE SUPPORT** activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity.  
**For PACs Only** : Direct candidate support includes public communications or voter drives that refer to both federal and nonfederal candidates, regardless of whether there is a reference to a political party. Such expenses are allocated using a time/space method.

ACTIVITY OR EVENT IDENTIFIER <b>Legislative Reception 2/10/11</b>	FEDERAL %	NONFEDERAL %
ACTIVITY IS: <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support	<input type="text" value="26.00"/> %	<input type="text" value="74.00"/> %
CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input checked="" type="checkbox"/> Same as Previously Reported	Transaction ID: H2-A-29	

**SCHEDULE H3 (FEC Form 3X)  
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR  
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
 Republican Campaign Committee Of New Mexico

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
WF Allocation	M M / D D / Y Y Y Y 03 / 29 / 2011	107.92

**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....		0.00	Transaction ID: H3A-40629-82229
<b>ii) Generic Voter Drive</b> .....			Transaction ID:
<b>iii) Exempt Activities</b> .....			Transaction ID:
<b>iv) Direct Fundraising</b> (List Activity or Event Identifier)			
a) Legislative Reception 2/10/11	107.92		Transaction ID: H340629-82229
b) _____			Transaction ID:
c) Total Amount Transferred for Direct Fundraising .....		107.92	
<b>v) Direct Candidate Support</b> (List of Activity or Event Identifier)			
a) _____			Transaction ID:
b) _____			Transaction ID:
c) Total Amount Transferred For Direct Candidate Support .....			
<b>vi) Public Communications Referring Only to Party</b> (Made by PAC)			Transaction ID:

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

<b>TOTAL</b> This Period (Administrative) .....	0.00
<b>TOTAL</b> This Period (Generic Voter Drive) .....	0.00
<b>TOTAL</b> This Period (Exempt Activities) .....	0.00
<b>TOTAL</b> This Period (Direct Fundraising) .....	107.92
<b>TOTAL</b> This Period (Direct Candidate Support) .....	0.00
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	0.00
<b>TOTAL</b> This Period (Total Amount Transferred) .....	107.92

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
Republican Campaign Committee Of New Mexico

A. Full Name (Last, First, Middle Initial)  
Print Mart, LLC

Mailing Address  
2408 Candelaria Road NE

City	State	Zip Code
Albuquerque	NM	87107-2037

Purpose of Disbursement:  
Invitations

Category/  
Type

Type of Allocated Activity:

- Administrative     Fundraising     Exempt  
 Voter Drive     Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

7715.87

Activity or Event Identifier:  
Legislative Reception 2/10/11

Date 03 / 29 / 2011

Transaction ID: H4-34496-101473-e

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
91.40		260.14		351.54

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
91.40		260.14		351.54

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
91.40		260.14		351.54

**SCHEDULE L (FEC Form 3X)**

**AGGREGATION PAGE: LEVIN FUNDS**

Transaction ID: Levin-1

NAME OF COMMITTEE (In Full) Republican Campaign Committee Of New Mexico
NAME OF ACCOUNT Levin

	COLUMN A TOTAL THIS PERIOD	COLUMN B YEAR-TO-DATE
1. RECEIPTS FROM PERSONS		
a. Itemized..... (Use Schedule L-A)	0.00	0.00
b. Unitemized.....	0.00	0.00
c. Total.....	0.00	0.00
2. OTHER RECEIPTS.....	0.00	0.00
3. TOTAL RECEIPTS..... (Add Lines 1c and 2)	0.00	0.00
4. TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT (Use Schedule L-B)		
a. Voter Registration.....	0.00	0.00
b. Voter ID.....	0.00	0.00
c. GOTV.....	0.00	0.00
d. Generic Campaign.....	0.00	0.00
e. Total.....	0.00	0.00
5. OTHER DISBURSEMENTS.....	0.00	0.00
6. TOTAL DISBURSEMENTS..... (Add Lines 4e and 5)	0.00	0.00
7. BEGINNING CASH ON HAND..... (for Column B, use cash as of January 1st)	4486.00	4486.00
8. RECEIPTS..... (from Line 3)	0.00	0.00
9. SUBTOTAL..... (Add Lines 7 and 8)	4486.00	4486.00
10. DISBURSEMENTS..... (From Line 6)	0.00	0.00
11. ENDING CASH ON HAND..... (Subtract Line 10 From Line 9)	4486.00	4486.00