

# 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  
Southwest Leadership Fund

ADDRESS (number and street) PO Box 25084  
 Check if different than previously reported. (ACC)  
Albuquerque NM 87125

2. **FEC IDENTIFICATION NUMBER** C00471334  
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 (12S)  
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 05 01 2010 through 05 31 2010

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 Carolyn Gonzales

Signature of Treasurer Electronically Filed by Carolyn Gonzales Date 06 20 2010

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									
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**FEC FORM 3X**  
(Rev. 12/2004)

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

Write or Type Committee Name  
Southwest Leadership Fund

Report Covering the Period: From: 

M	M
0	5

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	5

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		60991.48
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period .....	8496.08									
(c) Total Receipts (from Line 19) .....	46810.00	90819.14								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	55306.08	151810.62								
7. Total Disbursements (from Line 31) .....	12250.93	108755.47								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	43055.15	43055.15								
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**

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name  
Southwest Leadership Fund

Report Covering the Period: From: 

M	M
0	5

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	5

D	D
3	1

Y	Y	Y	Y
2	0	1	0

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) .....	36750.00	53209.14
(ii) Unitemized .....	25.00	1575.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	36775.00	54784.14
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	10000.00	36000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	46775.00	90784.14
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) .....	35.00	35.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	46810.00	90819.14
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	46810.00	90819.14

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	12250.93	72555.47
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	12250.93	72555.47
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	36200.00
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))..	12250.93	108755.47
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	12250.93	108755.47

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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) .....	46775.00	90784.14
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	46775.00	90784.14
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	12250.93	72555.47
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	35.00	35.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	12215.93	72520.47

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:	PAGE 6 / 18
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<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)  
Southwest Leadership Fund

<b>A.</b>	Full Name (Last, First, Middle Initial) GREGORY SMITH	Date of Receipt MM / DD / YYYY 05 / 06 / 2010
	Mailing Address 513 AUTUMN WIND WAY	<b>Transaction ID:</b> 11 ai-000023795
	City State Zip Code ROCKVILLE MD 20850-2893	Amount of Each Receipt this Period 2500.00
	FEC ID number of contributing federal political committee. <b>C</b>	EARMARKED THROUGH ACT BLUE
	Name of Employer Occupation SMITH BROWN-YAZZIE LLP ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) JOHN QUINN	Date of Receipt MM / DD / YYYY 05 / 06 / 2010
	Mailing Address 4600 CATHEDRAL AVE NW	<b>Transaction ID:</b> 11 ai-000023796
	City State Zip Code WASHINGTON DC 20016	Amount of Each Receipt this Period 2500.00
	FEC ID number of contributing federal political committee. <b>C</b>	EARMARKED THROUGH ACT BLUE
	Name of Employer Occupation QUINN GILLESPIE AND ASSOC- IATES CHAIRMAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) MOSES MERCADO	Date of Receipt MM / DD / YYYY 05 / 06 / 2010
	Mailing Address 1333 CONSTITUTION AVE NE UNIT A	<b>Transaction ID:</b> 11 ai-000023797
	City State Zip Code WASHINGTON DC 20002	Amount of Each Receipt this Period 2500.00
	FEC ID number of contributing federal political committee. <b>C</b>	EARMARKED THROUGH ACT BLUE
	Name of Employer Occupation OGILVY GOVERNMENT RELATIO- NS CHAIRMAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>7500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 18
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Southwest Leadership Fund

<b>A.</b>	Full Name (Last, First, Middle Initial) SALLY SAUNDERS TOLES	Date of Receipt MM / DD / YYYY 05 / 12 / 2010
	Mailing Address PO BOX 1300	<b>Transaction ID:</b> 11 ai-000023799
	City State Zip Code ROSWELL NM 88202-1300	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	EARMARKED THROUGH ACT BLUE
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) MORTON S. SIMON	Date of Receipt MM / DD / YYYY 05 / 14 / 2010
	Mailing Address 1300 CANYON RD	<b>Transaction ID:</b> 11 ai-000023800
	City State Zip Code SANTA FE NM 87501	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	EARMARKED THROUGH ACT BLUE
	Name of Employer Occupation SELF-EMPLOYED TEACHER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) ACTBLUE	Date of Receipt MM / DD / YYYY 05 / 18 / 2010
	Mailing Address PO BOX 382110	<b>Transaction ID:</b> 11 ai-000023801
	City State Zip Code CAMBRIDGE MA 02238	Amount of Each Receipt this Period 6000.00
	FEC ID number of contributing federal political committee. C	[MEMO ITEM] ACT BLUE
	Name of Employer Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 15450.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	6000.00
<b>TOTAL</b> 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 8 / 18  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Southwest Leadership Fund

<p><b>A.</b> Full Name (Last, First, Middle Initial) ACTBLUE</p> <p>Mailing Address PO BOX 382110</p> <p>City State Zip Code CAMBRIDGE MA 02238</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">22950.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">05 / 18 / 2010</span></p> <p><b>Transaction ID:</b> 11 ai-000023798</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">7500.00</span></p> <p><b>[MEMO ITEM]</b> ACT BLUE</p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) RICHARD MAYOL</p> <p>Mailing Address 2601 N FORT VALLEY RD</p> <p>City State Zip Code FLAGSTAFF AZ 86001</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation GRAND CANYON TRUST DIRECTOR OF COMMUNICATIONS</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">500.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">05 / 21 / 2010</span></p> <p><b>Transaction ID:</b> 11 ai-000023812</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">500.00</span></p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) JANE PETRIE DANOWITZ</p> <p>Mailing Address 2760 BON HAVEN LN.</p> <p>City State Zip Code ANNAPOLIS MD 21401</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation NATIONAL ENVIRONMENTAL TR-UST ATTORNEY</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">1000.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">05 / 21 / 2010</span></p> <p><b>Transaction ID:</b> 11 ai-000023813</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">1000.00</span></p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">1500.00</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: (check only one)	PAGE 9 / 18
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Southwest Leadership Fund

**A.**

Full Name (Last, First, Middle Initial)  
PATRICK MITCHELL

Mailing Address 2760 BON HAVEN LN.

City State Zip Code  
ANNAPOLIS MD 21401

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

Name of Employer Occupation  
STRATEGIC IMPACT GOVERNMENT RELATIONS

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 1 / 2 0 1 0

**Transaction ID:** 11 ai-000023810

Amount of Each Receipt this Period  
2500.00

**B.**

Full Name (Last, First, Middle Initial)  
JICARILLA APACHE NATION

Mailing Address PO BOX 507

City State Zip Code  
DULCE NM 87528-0507

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 1 / 2 0 1 0

**Transaction ID:** 11 ai-000023811

Amount of Each Receipt this Period  
5000.00

**C.**

Full Name (Last, First, Middle Initial)  
BENJAMIN WARNER

Mailing Address 903 TEWA LOOP

City State Zip Code  
LOS ALAMOS NM 87544-3210

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

Name of Employer Occupation  
CALDERA PHARMACEUTICALS SCIENTIST

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 5 / 2 0 1 0

**Transaction ID:** 11 ai-000023802

Amount of Each Receipt this Period  
2500.00

EARMARKED THROUGH ACT BLUE

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 18
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Southwest Leadership Fund

<b>A.</b>	Full Name (Last, First, Middle Initial) TROY LAPSYS	Date of Receipt MM / DD / YYYY 05 / 26 / 2010
	Mailing Address 6828 LA ROCCA RD NW	<b>Transaction ID:</b> 11ai-000023803
	City State Zip Code ALBUQUERQUE NM 87114-3649	Amount of Each Receipt this Period 875.00
	FEC ID number of contributing federal political committee. <b>C</b>	<b>EARMARKED THROUGH ACT BLUE</b>
	Name of Employer Occupation INCITOR LLC BIOFUELS EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 875.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) JACOB BERMAN	Date of Receipt MM / DD / YYYY 05 / 26 / 2010
	Mailing Address 21 MARSHALL ST	<b>Transaction ID:</b> 11ai-000023804
	City State Zip Code OLD GREENWICH CT 08760	Amount of Each Receipt this Period 875.00
	FEC ID number of contributing federal political committee. <b>C</b>	<b>EARMARKED THROUGH ACT BLUE</b>
	Name of Employer Occupation INCITOR BUSINESS EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 875.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) SAN MANUEL BAND OF MISSION INDIANS	Date of Receipt MM / DD / YYYY 05 / 27 / 2010
	Mailing Address 26569 COMMUNITY CENTER DRIVE	<b>Transaction ID:</b> 11ai-000023814
	City State Zip Code HIGHLAND CA 92346	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>6750.00</b>
<b>TOTAL</b> 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 / 18  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Southwest Leadership Fund

**A.** Full Name (Last, First, Middle Initial)  
JEANNE KLEIN

Mailing Address 500 WEST TEXAS AVE

City MIDLAND State TX Zip Code 79701

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

Name of Employer SELF-EMPLOYED Occupation ARTS MANAGER

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 28 / 2010  
**Transaction ID:** 11ai-000023805  
 Amount of Each Receipt this Period 5000.00

EARMARKED THROUGH ACT BLUE

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

Mailing Address PO BOX 382110

City CAMBRIDGE State MA Zip Code 02238

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 32225.00

Date of Receipt 05 / 31 / 2010  
**Transaction ID:** 11ai-000023807  
 Amount of Each Receipt this Period 9275.00

[MEMO ITEM]  
ACT BLUE

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	5000.00
<b>TOTAL</b> This Period (last page this line number only) .....	36750.00

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

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

FOR LINE NUMBER: PAGE 12 / 18  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Southwest Leadership Fund

**A.** Full Name (Last, First, Middle Initial)  
I.B.E.W. - C.O.P.E.  
Mailing Address 900 7TH ST NW  
City WASHINGTON State DC Zip Code 20001-3886  
FEC ID number of contributing federal political committee. **C** C00027342  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00  
Date of Receipt 05 / 12 / 2010  
Transaction ID: 11c-000023808  
Amount of Each Receipt this Period 5000.00

**B.** Full Name (Last, First, Middle Initial)  
HEALTH CARE SERVICE CORPORATION EMPLOYEES' PAC  
Mailing Address 300 EAST RANDOLPH STREET  
19TH FLOOR  
City CHICAGO State IL Zip Code 60601  
FEC ID number of contributing federal political committee. **C** C00199711  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2500.00  
Date of Receipt 05 / 13 / 2010  
Transaction ID: 11c-000023809  
Amount of Each Receipt this Period 2500.00

**C.** Full Name (Last, First, Middle Initial)  
COMCAST COPORATION PAC  
Mailing Address 1701 JFK BLVD  
City PHILADELPHIA State PA Zip Code 19103  
FEC ID number of contributing federal political committee. **C** C00248716  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00  
Date of Receipt 05 / 28 / 2010  
Transaction ID: 11c-000023815  
Amount of Each Receipt this Period 2500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 10000.00  
**TOTAL** This Period (last page this line number only) ..... ► 10000.00

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Southwest Leadership Fund

A.	Full Name (Last, First, Middle Initial) UPS	Transaction ID: 21b-06-00097-00116
	Mailing Address 55 GLENLAKE PARKWAY NE	Date of Disbursement MM / DD / YYYY 05 / 02 / 2010
	City ATLANTA State GA Zip Code 30328	Amount of Each Disbursement this Period 29.79
	Purpose of Disbursement SHIPPING	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) ACTBLUE TECHNICAL SERVICES	Transaction ID: 21b-07-00053-00053
	Mailing Address P.O. BOX 382110	Date of Disbursement MM / DD / YYYY 05 / 14 / 2010
	City CAMBRIDGE State MA Zip Code 02238-2110	Amount of Each Disbursement this Period 296.25
	Purpose of Disbursement MERCHANT FEES	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) PAYROLL COMPANY	Transaction ID: 21b-06-00099-00118
	Mailing Address 10433 MONTGOMERY PARKWAY LOOP NE SUITE 100	Date of Disbursement MM / DD / YYYY 05 / 14 / 2010
	City ALBUQUERQUE State NM Zip Code 87111	Amount of Each Disbursement this Period 816.85
	Purpose of Disbursement PAYROLL TAXES	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>1142.89</b>
<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)

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

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NAME OF COMMITTEE (In Full)  
Southwest Leadership Fund

A.	Full Name (Last, First, Middle Initial) <b>PAYROLL COMPANY</b>	<b>Transaction ID:</b> 21b-06-00100-0000
	Mailing Address 10433 MONTGOMERY PARKWAY LOOP NE SUITE 100	Date of Disbursement MM / DD / YYYY 05 / 14 / 2010
	City ALBUQUERQUE State NM Zip Code 87111	Amount of Each Disbursement this Period 827.90
	Purpose of Disbursement PAYROLL - SEE MEMO ENTRY	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) <b>MEREDITH DIXON</b>	<b>Transaction ID:</b> 21b-06-00100-00119
	Mailing Address 832 CALLE CORONADO SE	Date of Disbursement MM / DD / YYYY 05 / 14 / 2010
	City ALBUQUERQUE State NM Zip Code 87123	Amount of Each Disbursement this Period 827.90
	Purpose of Disbursement PAYROLL	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) ▼

**[MEMO ITEM]**

C.	Full Name (Last, First, Middle Initial) <b>PAYROLL COMPANY</b>	<b>Transaction ID:</b> 21b-06-00101-00120
	Mailing Address 10433 MONTGOMERY PARKWAY LOOP NE SUITE 100	Date of Disbursement MM / DD / YYYY 05 / 14 / 2010
	City ALBUQUERQUE State NM Zip Code 87111	Amount of Each Disbursement this Period 44.52
	Purpose of Disbursement PAYROLL SERVICE	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) .....	<b>872.42</b>
<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)

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

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NAME OF COMMITTEE (In Full)  
Southwest Leadership Fund

<b>A.</b> Full Name (Last, First, Middle Initial) UNITED STATES POSTAL SERVICE <hr/> Mailing Address 1135 BROADWAY NE <hr/> City ALBUQUERQUE State NM Zip Code 87101-9998 Purpose of Disbursement PO BOX RENTAL Candidate Name <hr/> 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) ▼	Transaction ID: 21b-06-00103-00122 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 7 / 2 0 1 0
	Amount of Each Disbursement this Period 176.00
<b>B.</b> Full Name (Last, First, Middle Initial) INN AND SPA AT LORETTO <hr/> Mailing Address 211 OLD SANTA FE TRAIL <hr/> City SANTA FE State NM Zip Code 87501 Purpose of Disbursement CATERING Candidate Name <hr/> 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) ▼	Transaction ID: 21b-06-00104-00123 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 7 / 2 0 1 0
	Amount of Each Disbursement this Period 959.75
<b>C.</b> Full Name (Last, First, Middle Initial) CLASSIC PARTY RENTALS <hr/> Mailing Address 8615 ALAMEDA PARK DRIVE NE <hr/> City ALBUQUERQUE State NM Zip Code 87113 Purpose of Disbursement EVENT RENTALS Candidate Name <hr/> 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) ▼	Transaction ID: 21b-06-00107-00126 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 1 0
	Amount of Each Disbursement this Period 512.68

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

1648.43

**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)

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

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NAME OF COMMITTEE (In Full)  
Southwest Leadership Fund

A.	Full Name (Last, First, Middle Initial) DENISE SADLER	Transaction ID: 21b-06-00106-00125 Date of Disbursement																			
	Mailing Address 915 LORENZO STREET	<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>0</td><td>5</td><td></td><td>2</td><td>0</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	0	5		2	0		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		2	0		2	0	1	0												
	City SANTA FE State NM Zip Code 87501	Amount of Each Disbursement this Period																			
	Purpose of Disbursement CATERING	<table border="1"><tr><td>1329.17</td></tr></table>	1329.17																		
1329.17																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

B.	Full Name (Last, First, Middle Initial) ACTBLUE TECHNICAL SERVICES	Transaction ID: 21b-07-00056-00056 Date of Disbursement																			
	Mailing Address P.O. BOX 382110	<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>0</td><td>5</td><td></td><td>2</td><td>1</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	0	5		2	1		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		2	1		2	0	1	0												
	City CAMBRIDGE State MA Zip Code 02238-2110	Amount of Each Disbursement this Period																			
	Purpose of Disbursement MERCHANT FEES	<table border="1"><tr><td>237.00</td></tr></table>	237.00																		
237.00																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

C.	Full Name (Last, First, Middle Initial) INN AND SPA AT LORETTO	Transaction ID: 21b-06-00119-00138 Date of Disbursement																			
	Mailing Address 211 OLD SANTA FE TRAIL	<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>0</td><td>5</td><td></td><td>2</td><td>5</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	0	5		2	5		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		2	5		2	0	1	0												
	City SANTA FE State NM Zip Code 87501	Amount of Each Disbursement this Period																			
	Purpose of Disbursement TRAVEL	<table border="1"><tr><td>207.62</td></tr></table>	207.62																		
207.62																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>1773.79</td></tr></table>	1773.79
1773.79		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td></td></tr></table>	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Southwest Leadership Fund

A.	Full Name (Last, First, Middle Initial) JYP CONSULTING	Transaction ID: 21b-06-00110-00129
	Mailing Address 303 MASSACHUSETTS AVE. NE 3RD FLOOR	Date of Disbursement MM / DD / YYYY 05 / 26 / 2010
	City WASHINGTON State DC Zip Code 20002	Amount of Each Disbursement this Period 3000.00
	Purpose of Disbursement CONSULTANT - FUNDRAISING	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) PAUL THOMPSON & ASSOCIATES INC.	Transaction ID: 21b-06-00111-00130
	Mailing Address P.O. BOX 22551	Date of Disbursement MM / DD / YYYY 05 / 26 / 2010
	City SANTA FE State NM Zip Code 87502	Amount of Each Disbursement this Period 661.08
	Purpose of Disbursement TRANSPORTATION	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) GEISE2 STRATEGIES, LLC	Transaction ID: 21b-06-00115-00134
	Mailing Address 1229 N. FRANKLIN ST. UNIT E	Date of Disbursement MM / DD / YYYY 05 / 26 / 2010
	City TAMPA State FL Zip Code 33602	Amount of Each Disbursement this Period 1668.74
	Purpose of Disbursement CONSULTANT - COMPLIANCE	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) .....	5329.82
<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)

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

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NAME OF COMMITTEE (In Full)  
Southwest Leadership Fund

**A.**

Full Name (Last, First, Middle Initial)  
RIO CHAMA STEAKHOUSE

**Transaction ID:** 21b-06-00121-00140  
Date of Disbursement

Mailing Address 414 OLD SANTA FE TRAIL

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	6		2	0	1	0

City State Zip Code  
SANTA FE NM 87501

Amount of Each Disbursement this Period

808.96
--------

Purpose of Disbursement  
CATERING

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

**B.**

Full Name (Last, First, Middle Initial)  
ACTBLUE TECHNICAL SERVICES

**Transaction ID:** 21b-07-00061-00061  
Date of Disbursement

Mailing Address P.O. BOX 382110

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	1		2	0	1	0

City State Zip Code  
CAMBRIDGE MA 02238-2110

Amount of Each Disbursement this Period

366.38
--------

Purpose of Disbursement  
MERCHANT FEES

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

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

1175.34
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**TOTAL** This Period (last page this line number only) ..... ►

11942.69
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