

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

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

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day Post -Election Report for the: General, Runoff, Special

5. Covering Period 08 01 2006 through 08 31 2006

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 James P. White

Signature of Treasurer Electronically Filed by James P. White Date 10 25 2006

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

**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	8

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	8

D	D
3	1

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		84361.55
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period .....	581444.28									
(c) Total Receipts (from Line 19) .....	225715.24	1150264.44								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	807159.52	1234625.99								
7. Total Disbursements (from Line 31) .....	161366.50	588832.97								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	645793.02	645793.02								
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	8

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	8

D	D
3	1

Y	Y	Y	Y
2	0	0	6

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	125425.95	271109.95
(i) Itemized (use Schedule A) .....	8140.00	129761.12
(ii) Unitemized .....	133565.95	400871.07
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	2500.00	17300.00
(c) Other Political Committees (such as PACs) .....	136065.95	418171.07
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....		
12. Transfers From Affiliated/Other Party Committees .....	73638.46	570006.08
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	200.73
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	1070.83	1284.56
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	14357.00	151332.00
(b) Levin Funds (from Schedule H5) .....	583.00	9270.00
(c) Total Transfer (add 18(a) and 18(b)).	14940.00	160602.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	225715.24	1150264.44
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	210775.24	989662.44

**DETAILED SUMMARY PAGE**

of Disbursements

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.....	4662.95	46572.79
(ii) Non-Federal Share.....	17541.44	152345.02
(b) Other Federal Operating Expenditures.....	54559.50	203559.77
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	76763.89	402477.58
22. Transfers to Affiliated/Other Party Committees.....	568.00	568.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5000.00	18000.00
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 .....	154.70	2453.78
(ii) "Levin" Share .....	581.97	9230.89
(b) Federal Election Activity Paid Entirely With Federal Funds .....	78297.94	156102.72
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	79034.61	167787.39
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	161366.50	588832.97
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	143243.09	427257.06

**DETAILED SUMMARY PAGE**  
of Disbursements

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) .....	136065.95	418171.07
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	136065.95	418171.07
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	59222.45	250132.56
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	200.73
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	59222.45	249931.83

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

**AGGREGATION PAGE: LEVIN FUNDS**

Transaction ID: SL1

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	23000.00
3. TOTAL RECEIPTS..... (Add Lines 1c and 2)	0.00	23000.00
4. TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT (Use Schedule L-B)		
a. Voter Registration.....	583.00	9270.00
b. Voter ID.....	0.00	0.00
c. GOTV.....	0.00	0.00
d. Generic Campaign.....	0.00	0.00
e. Total.....	583.00	9270.00
5. OTHER DISBURSEMENTS.....	0.00	0.00
6. TOTAL DISBURSEMENTS..... (Add Lines 4e and 5)	583.00	9270.00
7. BEGINNING CASH ON HAND..... (for Column B, use cash as of January 1st)	14313.00	0.00
8. RECEIPTS..... (from Line 3)	0.00	23000.00
9. SUBTOTAL..... (Add Lines 7 and 8)	14313.00	23000.00
10. DISBURSEMENTS..... (From Line 6)	583.00	9270.00
11. ENDING CASH ON HAND..... (Subtract Line 10 From Line 9)		13730.00

**SCHEDULE L-B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS  
OF LEVIN FUNDS**

Use separate schedule(s) for each category of the Aggregation Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 96
	<input checked="" type="checkbox"/> 4a <input type="checkbox"/> 4b <input type="checkbox"/> 4c <input type="checkbox"/> 5	

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

Full Name (Last, First, Middle Initial) / Full Organization Name	<b>Transaction ID:</b> 4B60818.E10185																				
<b>A. RPNM Allocation Transfers</b>	Date of Disbursement																				
Mailing Address PO Box 94083	<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>8</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	0		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	0		2	0	0	6												
City State Zip Code	Amount of Each Disbursement this Period																				
Albuquerque NM 87199-4083	292.00																				
Purpose of Disbursement	<b>Account:</b> 002302810																				
Voter Reg Xfer																					

Full Name (Last, First, Middle Initial) / Full Organization Name	<b>Transaction ID:</b> 4B60919.E10259																				
<b>B. RPNM Allocation Transfers</b>	Date of Disbursement																				
Mailing Address PO Box 94083	<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>8</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	1		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		2	1		2	0	0	6												
City State Zip Code	Amount of Each Disbursement this Period																				
Albuquerque NM 87199-4083	291.00																				
Purpose of Disbursement	<b>Account:</b> 002302810																				
Voter Reg Xfer																					

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	583.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	583.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 96
	<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)  
Republican Campaign Committee of New Mexico

**A.** Full Name (Last, First, Middle Initial)  
Phelps Anderson

Mailing Address 612 N Kentucky Ave

City Roswell State NM Zip Code 88201-4820

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

Name of Employer Sun Valley Energy Corp. Occupation Chairman

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
08 / 16 / 2006

Transaction ID: 60818.C67656

Amount of Each Receipt this Period  
5000.00

Receipt

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

Mailing Address 614 Fairway Loop SE

City Rio Rancho State NM Zip Code 87124-3407

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

Name of Employer Lectrosonics, Inc. Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
08 / 23 / 2006

Transaction ID: 60919.C67768

Amount of Each Receipt this Period  
500.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Barbara Baltz

Mailing Address 3648 Vista Grande Dr NW

City Albuquerque State NM Zip Code 87120-1144

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 ▼ 230.00

Date of Receipt  
08 / 03 / 2006

Transaction ID: 60818.C67495

Amount of Each Receipt this Period  
20.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	5520.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 96
	<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)  
Republican Campaign Committee of New Mexico

Full Name (Last, First, Middle Initial) <b>A. Price Bayless</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 6 / 2 0 0 6	
Mailing Address PO Box 2367		<b>Transaction ID:</b> 60818.C67666	
City Farmington	State NM	Amount of Each Receipt this Period 2000.00	
Zip Code 87499-2367		Receipt	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2000.00	
Name of Employer Bayless Drilling Co.	Occupation Engineer	Receipt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	Receipt	

Full Name (Last, First, Middle Initial) <b>B. Charles Beeson</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 6 / 2 0 0 6	
Mailing Address 413 San Juan Mnr		<b>Transaction ID:</b> 60818.C67667	
City Carlsbad	State NM	Amount of Each Receipt this Period 600.00	
Zip Code 88220-6606		Receipt	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 600.00	
Name of Employer Self-Employed	Occupation Tree Farmer/Retired Physician	Receipt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	Receipt	

Full Name (Last, First, Middle Initial) <b>C. Bill Bogle</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 6	
Mailing Address PO Box 430		<b>Transaction ID:</b> 60818.C67540	
City Dexter	State NM	Amount of Each Receipt this Period 5000.00	
Zip Code 88230-0430		Receipt	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 5000.00	
Name of Employer Self-Employed	Occupation Rancher	Receipt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	Receipt	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	7600.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 96
	<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)  
Republican Campaign Committee of New Mexico

**A.** Full Name (Last, First, Middle Initial)  
Mike Boling

Mailing Address PO Box 2021

City Roswell State NM Zip Code 88202-2021

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

Name of Employer Self-Employed Occupation Petroleum Geologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
MM / DD / YYYY  
08 / 02 / 2006

Transaction ID: 60818.C67485

Amount of Each Receipt this Period  
600.00

Receipt

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

Mailing Address 400 E Zia Dr

City Hobbs State NM Zip Code 88240-3429

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

Name of Employer Best Effort Made Occupation Best Effort Made

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
08 / 16 / 2006

Transaction ID: 60818.C67669

Amount of Each Receipt this Period  
1000.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Daniel Chang

Mailing Address 375 Teton Dr

City Farmington State NM Zip Code 87401-8608

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

Name of Employer Self-Employed Occupation Doctor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
08 / 16 / 2006

Transaction ID: 60818.C67670

Amount of Each Receipt this Period  
1000.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2600.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 96
	<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)  
Republican Campaign Committee of New Mexico

<b>A.</b> Full Name (Last, First, Middle Initial) Gary Clingman		Date of Receipt M M / D D / Y Y Y Y 08 / 09 / 2006	
Mailing Address 612 E Seco Dr		<b>Transaction ID:</b> 60818.C67584	
City Hobbs	State NM	Amount of Each Receipt this Period 300.00	
Zip Code 88240-4032		Receipt	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self-Employed	Occupation Professional		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Charles Coll		Date of Receipt M M / D D / Y Y Y Y 08 / 16 / 2006	
Mailing Address PO Box 1018		<b>Transaction ID:</b> 60818.C67662	
City Roswell	State NM	Amount of Each Receipt this Period 300.00	
Zip Code 88202-1018		Receipt	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self-Employed	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Charles Coll		Date of Receipt M M / D D / Y Y Y Y 08 / 16 / 2006	
Mailing Address PO Box 1018		<b>Transaction ID:</b> 60818.C67657	
City Roswell	State NM	Amount of Each Receipt this Period 300.00	
Zip Code 88202-1018		Receipt	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self-Employed	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 725.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	900.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 96
	<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)  
Republican Campaign Committee of New Mexico

**A.** Full Name (Last, First, Middle Initial)  
Clarke Coll

Mailing Address PO Box 1818

City Roswell State NM Zip Code 88202-1818

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

Name of Employer C.C.s Oil & Gas Co. Occupation Self Employed

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
08 / 16 / 2006

Transaction ID: 60818.C67660

Amount of Each Receipt this Period  
300.00

Receipt

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

Mailing Address PO Box 1818

City Roswell State NM Zip Code 88202-1818

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

Name of Employer Coll Brothers Oil Company Occupation Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
08 / 16 / 2006

Transaction ID: 60818.C67661

Amount of Each Receipt this Period  
300.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Eva Constantine

Mailing Address 1905 Sol Rio Ct NW

City Albuquerque State NM Zip Code 87107-3070

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 ▼ 235.00

Date of Receipt  
MM / DD / YYYY  
08 / 30 / 2006

Transaction ID: 60919.C67820

Amount of Each Receipt this Period  
100.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	700.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 96
	<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	

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)  
Patricia Cooper

Mailing Address 1409 S Sunset Ave

City Roswell State NM Zip Code 88203-2626

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

Name of Employer Self-Employed Occupation Self Employed

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
MM / DD / YYYY  
08 / 04 / 2006

Transaction ID: 60818.C67538

Amount of Each Receipt this Period  
300.00

Receipt

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

Mailing Address 620 State Road 58

City Cimarron State NM Zip Code 87714-9683

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

Name of Employer C S Ranch Occupation Rancher

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
08 / 18 / 2006

Transaction ID: 60919.C67739

Amount of Each Receipt this Period  
50.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Linda Davis

Mailing Address 620 State Road 58

City Cimarron State NM Zip Code 87714-9683

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

Name of Employer C S Ranch Occupation Rancher

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
MM / DD / YYYY  
08 / 24 / 2006

Transaction ID: 60919.C67774

Amount of Each Receipt this Period  
100.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	450.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 96
	<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)  
Republican Campaign Committee of New Mexico

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

Mailing Address 342 E Darby Rd

City Dexter State NM Zip Code 88230-9723

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

Name of Employer Self-Employed Occupation Dairyman

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
08 / 16 / 2006

Transaction ID: 60818.C67672

Amount of Each Receipt this Period  
300.00

Receipt

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

Mailing Address 1906 Cheyenne Trl

City Dalhart State TX Zip Code 79022-5226

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

Name of Employer Agri Vision Farm Management Occupation CFO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
08 / 16 / 2006

Transaction ID: 60818.C67665

Amount of Each Receipt this Period  
5000.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Brent DePonte

Mailing Address PO Box 9304

City Albuquerque State NM Zip Code 87119-9304

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

Name of Employer DePonte Investments, Inc. Occupation CEO/President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 4677.50

Date of Receipt  
MM / DD / YYYY  
08 / 15 / 2006

Transaction ID: 60919.C67770

Amount of Each Receipt this Period  
1711.00

In-Kind  
Air charter

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **7011.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 96
	<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	

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) Harry Dewit Mailing Address 2440 Highway 86 City Friona State TX Zip Code 79035-7543 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 6 / 2 0 0 6 <b>Transaction ID:</b> 60818.C67671 Amount of Each Receipt this Period 1000.00 Receipt
Name of Employer Occupation Self-Employed Dairyman Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1000.00		

<b>B.</b> Full Name (Last, First, Middle Initial) JoAnn Drake Mailing Address PO Box 1846 City Farmington State NM Zip Code 87499-1846 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 6 / 2 0 0 6 <b>Transaction ID:</b> 60818.C67664 Amount of Each Receipt this Period 2000.00 Receipt
Name of Employer Occupation JA Drake Well Service Secretary/Treasurer Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2000.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Christopher Driskill Mailing Address 1218 W Taos St City Hobbs State NM Zip Code 88240-1114 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 6 / 2 0 0 6 <b>Transaction ID:</b> 60818.C67675 Amount of Each Receipt this Period 1000.00 Receipt
Name of Employer Occupation Premier OB/GYN Physician Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	4000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 96
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A.</b> John Dunker		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 6 / 2 0 0 6
Mailing Address 8219 E Panther Hollow Ln		Transaction ID: 60818.C67676
City State Zip Code Rogersville MO 65742-8386	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer None	Occupation Student	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mark Flavin		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 6 / 2 0 0 6
Mailing Address 115 E College Blvd		Transaction ID: 60818.C67673
City State Zip Code Roswell NM 88201-5158	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer Best Effort Made	Occupation Best Effort Made	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Robert Forrest		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 6 / 2 0 0 6
Mailing Address 1306 W Riverside Dr		Transaction ID: 60818.C67674
City State Zip Code Carlsbad NM 88220-4033	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer Best Effort Made	Occupation Best Effort Made	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	2600.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty field)

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 96
	<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)  
Republican Campaign Committee of New Mexico

**A.** Full Name (Last, First, Middle Initial)  
Myrl Good

Mailing Address 2707 Coronado Dr

City State Zip Code  
Roswell NM 88201-3464

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 ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
08 / 14 / 2006

Transaction ID: 60818.C67613

Amount of Each Receipt this Period  
500.00

Receipt

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

Mailing Address 617 Queens Hwy

City State Zip Code  
Carlsbad NM 88220-9422

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

Name of Employer Best Effort Made Occupation Best Effort Made

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
08 / 16 / 2006

Transaction ID: 60818.C67687

Amount of Each Receipt this Period  
500.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Norman Gregory

Mailing Address 1707 Watson Ct

City State Zip Code  
Carlsbad NM 88220-4172

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

Name of Employer Best Effort Made Occupation Best Effort Made

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
08 / 16 / 2006

Transaction ID: 60818.C67688

Amount of Each Receipt this Period  
500.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 96
	<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)  
Republican Campaign Committee of New Mexico

Full Name (Last, First, Middle Initial) <b>A. Thomas Growney</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 6 / 2 0 0 6	
Mailing Address PO Box 6157		Transaction ID: 60818.C67663	
City Albuquerque	State NM	Amount of Each Receipt this Period 1000.00	
Zip Code 87197-6157		Receipt	
FEC ID number of contributing federal political committee. C			
Name of Employer Tom Growney Equipment	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) <b>B. Lawrence Harris</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 1 / 2 0 0 6	
Mailing Address PO Box 1714		Transaction ID: 60818.C67463	
City Roswell	State NM	Amount of Each Receipt this Period 200.00	
Zip Code 88202-1714		Receipt	
FEC ID number of contributing federal political committee. C			
Name of Employer Self-Employed	Occupation Investments		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C. Glenn Harrison</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 6 / 2 0 0 6	
Mailing Address 1505 E 17th St		Transaction ID: 60818.C67689	
City Roswell	State NM	Amount of Each Receipt this Period 300.00	
Zip Code 88201-7562		Receipt	
FEC ID number of contributing federal political committee. C			
Name of Employer Select Milk Producers, Inc.	Occupation Supervisor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 96
	<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)  
Republican Campaign Committee of New Mexico

**A.** Full Name (Last, First, Middle Initial)  
Karen Hubbard

Mailing Address 3415 University Ave W

City State Zip Code  
Saint Paul MN 55114-1019

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

Name of Employer Occupation  
Hubbard Broadcasting, Inc Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  
MM / DD / YYYY  
08 / 16 / 2006

Transaction ID: 60818.C67690

Amount of Each Receipt this Period  
10000.00

Receipt

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

Mailing Address 108 Sandzen Dr

City State Zip Code  
Clovis NM 88101-2309

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

Name of Employer Occupation  
Access Bank Banker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
08 / 21 / 2006

Transaction ID: 60919.C67749

Amount of Each Receipt this Period  
100.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Ruth Jeffers-Calvert

Mailing Address PO Box 65

City State Zip Code  
Artesia NM 88211-0065

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

Name of Employer Occupation  
Self-Employed Successor Trustee

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
MM / DD / YYYY  
08 / 28 / 2006

Transaction ID: 60919.C67789

Amount of Each Receipt this Period  
75.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	10175.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 96
	<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)  
Republican Campaign Committee of New Mexico

**A.** Full Name (Last, First, Middle Initial)  
Ronald Jones

Mailing Address 2214 Dallas St

City San Angelo State TX Zip Code 76901-2447

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

Name of Employer Brininstool Ranch Occupation Rancher

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 16 / 2006

Transaction ID: 60818.C67691

Amount of Each Receipt this Period  
2000.00

Receipt

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

Mailing Address 700 17th St Ste 1700

City Denver State CO Zip Code 80202-3560

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

Name of Employer Intrepid Mining, LLC Occupation Managing Partner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 16 / 2006

Transaction ID: 60818.C67692

Amount of Each Receipt this Period  
10000.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Gay Kernan

Mailing Address 928 W Mesa Verde Dr

City Hobbs State NM Zip Code 88240-0955

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

Name of Employer Hobbs Municipal Schools Occupation Educator

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 07 / 2006

Transaction ID: 60818.C67543

Amount of Each Receipt this Period  
2000.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	14000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 21 / 96
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A.</b> Ray Kysar		Date of Receipt M M / D D / Y Y Y Y 08 / 16 / 2006	
Mailing Address 300 W Arrington St Ste 100		Transaction ID: 60818.C67685	
City Farmington	State NM	Zip Code 87401-8432	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer State of New Mexico	Occupation State Senator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Carroll Leavell		Date of Receipt M M / D D / Y Y Y Y 08 / 07 / 2006	
Mailing Address PO Box D		Transaction ID: 60818.C67547	
City Jal	State NM	Zip Code 88252-2503	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Self-Employed	Occupation Insurance Agency		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Robert Leonard		Date of Receipt M M / D D / Y Y Y Y 08 / 15 / 2006	
Mailing Address PO Box 400		Transaction ID: 60818.C67638	
City Roswell	State NM	Zip Code 88202-0400	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Self-Employed	Occupation Investments		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	2250.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty field)

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 96
	<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)  
Republican Campaign Committee of New Mexico

Full Name (Last, First, Middle Initial) <b>A. Don Maddox</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 4 / 2 0 0 6	
Mailing Address PO Box 2588		<b>Transaction ID: 60818.C67615</b>	
City Hobbs	State NM	Amount of Each Receipt this Period 1000.00	
Zip Code 88241-2588		Receipt	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer State of New Mexico	Occupation District Court Judge		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) <b>B. James Maddox</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 7 / 2 0 0 6	
Mailing Address 612 E Abo Dr		<b>Transaction ID: 60818.C67544</b>	
City Hobbs	State NM	Amount of Each Receipt this Period 1000.00	
Zip Code 88240-3406		Receipt	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Maddox Law Firm	Occupation Lawyer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) <b>C. Royce Maples</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 6 / 2 0 0 6	
Mailing Address 3406 E Poe St		<b>Transaction ID: 60818.C67686</b>	
City Roswell	State NM	Amount of Each Receipt this Period 300.00	
Zip Code 88203-9224		Receipt	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Waide Irrigation	Occupation Irrigator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	2300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 96
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. Timothy McComas</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 6 / 2 0 0 6
Mailing Address 2432 Clearview Dr		<b>Transaction ID: 60818.C67696</b>
City State Zip Code Las Cruces NM 88011-0812	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer Best Effort Made Occupation Best Effort Made	Aggregate Year-to-Date ▼ 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Allen McCulloch</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 6 / 2 0 0 6
Mailing Address PO Box 5102		<b>Transaction ID: 60818.C67695</b>
City State Zip Code Farmington NM 87499-5102	Amount of Each Receipt this Period 3000.00	
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer Adult & Pediatric Urology Occupation Physician	Aggregate Year-to-Date ▼ 4570.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Muriel McCulloch</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 6 / 2 0 0 6
Mailing Address 1917 Chilton Ct		<b>Transaction ID: 60818.C67693</b>
City State Zip Code Farmington NM 87401-3982	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer None Occupation Retired	Aggregate Year-to-Date ▼ 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 96
	<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)  
Republican Campaign Committee of New Mexico

Full Name (Last, First, Middle Initial) <b>A.</b> Ronald McCulloch		Date of Receipt M M / D D / Y Y Y Y 08 / 16 / 2006	
Mailing Address 2108 Palo Verde St		<b>Transaction ID:</b> 60818.C67694	
City Farmington	State NM	Zip Code 87401-3907	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Three Acres Consoling	Occupation Analyst		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Rance Miles		Date of Receipt M M / D D / Y Y Y Y 08 / 16 / 2006	
Mailing Address PO Box 713		<b>Transaction ID:</b> 60818.C67668	
City Artesia	State NM	Zip Code 88211-0713	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Select Milk Producers, Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Charles Moran		Date of Receipt M M / D D / Y Y Y Y 08 / 16 / 2006	
Mailing Address 1919 Villa Dr		<b>Transaction ID:</b> 60818.C67697	
City Artesia	State NM	Zip Code 88210-1644	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Petroleum Corp	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 435.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	6300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 96
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A.</b> E Neumann		Date of Receipt M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 0 6	
Mailing Address 1031 Northwoods Trl		Transaction ID: 60919.C67826	
City State Zip Code Mc Lean VA 22102-1320	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer USEC	Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Monty Newman		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 1 / 2 0 0 6	
Mailing Address PO Box 1122		Transaction ID: 60919.C67753	
City State Zip Code Hobbs NM 88241-1122	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Self-Employed	Occupation Real Estate Broker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Gregory Nibert		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 6 / 2 0 0 6	
Mailing Address 1900 W 27th St		Transaction ID: 60818.C67699	
City State Zip Code Roswell NM 88201-9737	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Best Effort Made	Occupation Best Effort Made		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 335.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	2300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 / 96
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. Scott Otteson</b>		Date of Receipt MM / DD / YYYY 08 / 16 / 2006
Mailing Address 8660 Foothills Dr		<b>Transaction ID: 60818.C67700</b>
City Farmington	State NM	Zip Code 87402-0982
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer Best Effort Made	Occupation Best Effort Made	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B. William Owen</b>		Date of Receipt MM / DD / YYYY 08 / 16 / 2006
Mailing Address 2009 Brazos St		<b>Transaction ID: 60818.C67708</b>
City Roswell	State NM	Zip Code 88201-3361
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 600.00
Name of Employer City of Roswell	Occupation Mayor	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) <b>C. Mary Pepler</b>		Date of Receipt MM / DD / YYYY 08 / 25 / 2006
Mailing Address PO Box 1535		<b>Transaction ID: 60919.C67778</b>
City Cedar Crest	State NM	Zip Code 87008-1535
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 100.00
Name of Employer Construction & Real Estate Bro	Occupation Real Estate Broker	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1700.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 27 / 96
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

<b>A.</b> Full Name (Last, First, Middle Initial) Barry Peters Mailing Address PO Box 2503 City Hobbs State NM Zip Code 88241-2503 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 6 / 2 0 0 6 <b>Transaction ID:</b> 60818.C67702 Amount of Each Receipt this Period 1000.00 Receipt
Name of Employer Self-Employed Occupation Oil & Gas Investment Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Charles Read Mailing Address PO Box 1518 City Roswell State NM Zip Code 88202-1518 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6 <b>Transaction ID:</b> 60818.C67612 Amount of Each Receipt this Period 5000.00 Receipt
Name of Employer Read & Stevens Corp Occupation Upper Management Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Paula Sandry Mailing Address 16 Lafayette Loop City Roswell State NM Zip Code 88201-5269 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 6 / 2 0 0 6 <b>Transaction ID:</b> 60818.C67707 Amount of Each Receipt this Period 300.00 Receipt
Name of Employer None Occupation Housewife Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>6300.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 / 96
	<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)  
Republican Campaign Committee of New Mexico

Full Name (Last, First, Middle Initial) <b>A. Paula Sandry</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 16 / 2006	
Mailing Address 16 Lafayette Loop		<b>Transaction ID: 60818.C67703</b>	
City State Zip Code Roswell NM 88201-5269		Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer None	Occupation Housewife		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

Full Name (Last, First, Middle Initial) <b>B. Philip Sewell</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 17 / 2006	
Mailing Address 9911 Ritchie Dr		<b>Transaction ID: 60818.C67712</b>	
City State Zip Code Ijamsville MD 21754-9640		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Best Effort Made	Occupation Best Effort Made		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) <b>C. Armand Smith</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 16 / 2006	
Mailing Address PO Box 159		<b>Transaction ID: 60818.C67698</b>	
City State Zip Code Clovis NM 88102-0159		Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Self-Employed	Occupation Self Employed		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1600.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 96
	<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)  
Republican Campaign Committee of New Mexico

**A.** Full Name (Last, First, Middle Initial)  
Shari Smith

Mailing Address PO Box 840

City State Zip Code  
Artesia NM 88211-0840

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

Name of Employer Occupation  
Yates Petroleum Corporation Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
875.00

Date of Receipt  
MM / DD / YYYY  
08 / 17 / 2006

**Transaction ID:** 60818.C67715

Amount of Each Receipt this Period  
875.00

Receipt

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

Mailing Address 9810 Osuna Rd NE

City State Zip Code  
Albuquerque NM 87111-2265

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

Name of Employer Occupation  
None Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
08 / 11 / 2006

**Transaction ID:** 60818.C67590

Amount of Each Receipt this Period  
100.00

Receipt

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

Mailing Address 9810 Osuna Rd NE

City State Zip Code  
Albuquerque NM 87111-2265

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

Name of Employer Occupation  
None Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
425.00

Date of Receipt  
MM / DD / YYYY  
08 / 30 / 2006

**Transaction ID:** 60919.C67811

Amount of Each Receipt this Period  
125.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 / 96
	<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)  
Republican Campaign Committee of New Mexico

**A.** Full Name (Last, First, Middle Initial)  
Ben Spencer

Mailing Address 6300 Riverside Plaza Ln NW Ste 200

City State Zip Code  
Albuquerque NM 87120-2617

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

Name of Employer Self-Employed Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
08 / 02 / 2006

Transaction ID: 60818.C67491

Amount of Each Receipt this Period  
5000.00

Receipt

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

Mailing Address 401 E Abo Dr

City State Zip Code  
Hobbs NM 88240-3401

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

Name of Employer Lea County State Bank Occupation Banker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
08 / 14 / 2006

Transaction ID: 60818.C67616

Amount of Each Receipt this Period  
1000.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Helen Stinnett

Mailing Address 520 W 1st St

City State Zip Code  
Portales NM 88130-5978

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

Name of Employer Best Effort Made Occupation Best Effort Made

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
08 / 16 / 2006

Transaction ID: 60818.C67704

Amount of Each Receipt this Period  
1000.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	7000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 / 96
	<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)  
Republican Campaign Committee of New Mexico

**A.** Full Name (Last, First, Middle Initial)  
Sarah Stockman

Mailing Address 1041 Matador Dr SE

City State Zip Code  
Albuquerque NM 87123-4222

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

Name of Employer None Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
08 / 23 / 2006

Transaction ID: 60919.C67765

Amount of Each Receipt this Period  
100.00

Receipt

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

Mailing Address 225 New Frontier Dr SW

City State Zip Code  
Deming NM 88030-1012

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

Name of Employer Self-Employed Occupation Farmer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
MM / DD / YYYY  
08 / 11 / 2006

Transaction ID: 60818.C67606

Amount of Each Receipt this Period  
200.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Dwayne Taylor

Mailing Address PO Box 610

City State Zip Code  
Hobbs NM 88241-0610

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

Name of Employer Lucky Services, Inc Occupation Self Employed

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
08 / 14 / 2006

Transaction ID: 60818.C67614

Amount of Each Receipt this Period  
1000.00

Receipt

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 / 96
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A.** Full Name (Last, First, Middle Initial)  
James Terrell

Mailing Address PO Box 92043

City State Zip Code  
Austin TX 78709-2043

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

Name of Employer Terrell Public Affairs      Occupation Self Employed

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
08 / 16 / 2006

**Transaction ID:** 60818.C67705

Amount of Each Receipt this Period  
300.00

Receipt

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

Mailing Address 4129 Sunningdale Ave NE

City State Zip Code  
Albuquerque NM 87110-4950

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 ▼  
325.00

Date of Receipt  
MM / DD / YYYY  
08 / 30 / 2006

**Transaction ID:** 60919.C67808

Amount of Each Receipt this Period  
25.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Leon Thompson

Mailing Address 701 E Baja Dr

City State Zip Code  
Hobbs NM 88240-3419

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 ▼  
700.00

Date of Receipt  
MM / DD / YYYY  
08 / 09 / 2006

**Transaction ID:** 60818.C67583

Amount of Each Receipt this Period  
600.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	925.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 33 / 96
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

**A.** Full Name (Last, First, Middle Initial)  
Robert Van Namen

Mailing Address 6903 Rockledge Dr Ste 400

City State Zip Code  
Bethesda MD 20817-1872

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

Name of Employer Occupation  
USEC Executive

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
08 / 30 / 2006

Transaction ID: 60919.C67824

Amount of Each Receipt this Period  
300.00

Receipt

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

Mailing Address PO Box 2070

City State Zip Code  
Hobbs NM 88241-2070

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

Name of Employer Occupation  
Self-Employed Oil & Gas Operator

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
08 / 21 / 2006

Transaction ID: 60919.C67754

Amount of Each Receipt this Period  
1000.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Mark Veteto

Mailing Address PO Box 2070

City State Zip Code  
Hobbs NM 88241-2070

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

Name of Employer Occupation  
Self-Employed Oil & Gas Operator

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
08 / 21 / 2006

Transaction ID: 60919.C67755

Amount of Each Receipt this Period  
1000.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2300.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 96
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

<b>A.</b> Full Name (Last, First, Middle Initial) Cliff Waide		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 6 / 2 0 0 6
Mailing Address PO Box 516		<b>Transaction ID:</b> 60818.C67709
City State Zip Code Hagerman NM 88232-0516	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer Occupation Waide Irrigation Owner	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>B.</b> Full Name (Last, First, Middle Initial) Robert Wallach		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 7 / 2 0 0 6
Mailing Address PO Box 1289		<b>Transaction ID:</b> 60818.C67545
City State Zip Code Hobbs NM 88241-1289	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer Occupation Wallach Concrete Inc Owner	Aggregate Year-to-Date ▼ 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>C.</b> Full Name (Last, First, Middle Initial) John Welch		Date of Receipt M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 0 6
Mailing Address 1328 Skipwith Rd		<b>Transaction ID:</b> 60919.C67825
City State Zip Code Mc Lean VA 22101-1841	Amount of Each Receipt this Period 2700.00	
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer Occupation USEC CEO	Aggregate Year-to-Date ▼ 2700.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	4000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 / 96
	<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)  
Republican Campaign Committee of New Mexico

Full Name (Last, First, Middle Initial) <b>A. Doug Whitney</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 16 / 2006	
Mailing Address 3951 E Grand Plains Rd		<b>Transaction ID: 60818.C67710</b>	
City State Zip Code Roswell NM 88203-9007	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer Whitney Farms Ltd	Occupation Farmer	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Jeff Wilson</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 29 / 2006	
Mailing Address PO Box 1654		<b>Transaction ID: 60919.C67807</b>	
City State Zip Code Roswell NM 88202-1654	Amount of Each Receipt this Period 969.95		
FEC ID number of contributing federal political committee. C	In-Kind		
Name of Employer Self-Employed	Occupation Restaurant Owner	Aggregate Year-to-Date ▼ 969.95	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Food expense for event		

Full Name (Last, First, Middle Initial) <b>C. Benjamin Yale</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 16 / 2006	
Mailing Address 527 N Westminster St		<b>Transaction ID: 60818.C67706</b>	
City State Zip Code Waynesfield OH 45896-9449	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer Yale Law Office	Occupation Attorney	Aggregate Year-to-Date ▼ 5000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	6269.95
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 / 96
	<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)  
Republican Campaign Committee of New Mexico

**A.** Full Name (Last, First, Middle Initial)  
Darin Yates

Mailing Address PO Box 840

City State Zip Code  
Artesia NM 88211-0840

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

Name of Employer  
Yates Petroleum Corporation

Occupation  
Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
875.00

Date of Receipt  
MM / DD / YYYY  
08 / 17 / 2006

Transaction ID: 60818.C67717

Amount of Each Receipt this Period  
875.00

Receipt

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

Mailing Address 105 S 4th St

City State Zip Code  
Artesia NM 88210-2177

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

Name of Employer  
Yates Petroleum Corporation

Occupation  
Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
875.00

Date of Receipt  
MM / DD / YYYY  
08 / 17 / 2006

Transaction ID: 60818.C67718

Amount of Each Receipt this Period  
875.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Fred Yates

Mailing Address PO Box 2323

City State Zip Code  
Roswell NM 88202-2323

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

Name of Employer  
Yates Energy Corp

Occupation  
Oil & Gas Exec

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  
MM / DD / YYYY  
08 / 04 / 2006

Transaction ID: 60818.C67537

Amount of Each Receipt this Period  
600.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2350.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 / 96
	<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)  
Republican Campaign Committee of New Mexico

**A.** Full Name (Last, First, Middle Initial)  
George Yates

Mailing Address 3007 Diamond A Dr

City Roswell State NM Zip Code 88201-3418

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

Name of Employer Explorers Petroleum Corp Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	0	3	/	2	0	0	6

Transaction ID: 60818.C67493

Amount of Each Receipt this Period  
5000.00

Receipt

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

Mailing Address PO Box 900

City Artesia State NM Zip Code 88211-0900

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

Name of Employer Yates Petroleum Corporation Occupation Petroleum Engineer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3500.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	6	/	2	0	0	6

Transaction ID: 60818.C67649

Amount of Each Receipt this Period  
3500.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Peyton Yates

Mailing Address 105 S 4th St

City Artesia State NM Zip Code 88210-2177

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

Name of Employer Yates Petroleum Corporation Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1750.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	6	/	2	0	0	6

Transaction ID: 60818.C67651

Amount of Each Receipt this Period  
1750.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	10250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 38 / 96
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

<b>A.</b> Full Name (Last, First, Middle Initial) S Yates Mailing Address 105 S 4th St City Artesia State NM Zip Code 88210-2177 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y 08 / 16 / 2006 <b>Transaction ID:</b> 60818.C67650 Amount of Each Receipt this Period 1750.00 Receipt
Name of Employer Oil Operator Occupation Engineer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1750.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Scott Yates Mailing Address PO Box 840 City Artesia State NM Zip Code 88211-0840 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y 08 / 17 / 2006 <b>Transaction ID:</b> 60818.C67716 Amount of Each Receipt this Period 875.00 Receipt
Name of Employer Yates Petroleum Corporation Occupation 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) Pam Zimmerman Mailing Address PO Box 1025 City Lovington State NM Zip Code 88260-1025 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y 08 / 07 / 2006 <b>Transaction ID:</b> 60818.C67546 Amount of Each Receipt this Period 1000.00 Receipt
Name of Employer Lea County Occupation Treasurer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1110.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>3625.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>125425.95</b>

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 39 / 96	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

**A.** Full Name (Last, First, Middle Initial)  
Bass Brothers Enterprises, Inc. PAC

Mailing Address PO Box 10

City Roswell State NM Zip Code 88202-0010

FEC ID number of contributing federal political committee. **C** C00172635

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	2	1	/	2	0	0	6

Transaction ID: 60919.C67756

Amount of Each Receipt this Period  
2500.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	2500.00

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

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

FOR LINE NUMBER: PAGE 40 / 96  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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

**A.** Full Name (Last, First, Middle Initial)  
Republican National Committee

Mailing Address 310 1st St SE

City State Zip Code  
Washington DC 20003-1885

FEC ID number of contributing federal political committee. **C** C00003418

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 477438.46

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 10 / 2006

Transaction ID: 61025.C68642

Amount of Each Receipt this Period  
4038.46

Transfers From Affil./Aut-h.

**B.** Full Name (Last, First, Middle Initial)  
Republican National Committee

Mailing Address 310 1st St SE

City State Zip Code  
Washington DC 20003-1885

FEC ID number of contributing federal political committee. **C** C00003418

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 492038.46

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 18 / 2006

Transaction ID: 60919.C67722

Amount of Each Receipt this Period  
14600.00

Transfers From Affil./Aut-h.

**C.** Full Name (Last, First, Middle Initial)  
Republican National Committee

Mailing Address 310 1st St SE

City State Zip Code  
Washington DC 20003-1885

FEC ID number of contributing federal political committee. **C** C00003418

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 547038.46

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 25 / 2006

Transaction ID: 60919.C67775

Amount of Each Receipt this Period  
55000.00

Transfers From Affil./Aut-h.

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>73638.46</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>73638.46</b>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 / 96
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17	

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

A. Full Name (Last, First, Middle Initial) First Community Bank Mailing Address PO Box 3686 City State Zip Code Albuquerque NM 87190-3686 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 3 1 / 2 0 0 6 <b>Transaction ID:</b> 60919.C67859 Amount of Each Receipt this Period 268.52 Other Receipt
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 482.25		

B. Full Name (Last, First, Middle Initial) First Community Bank Mailing Address PO Box 3686 City State Zip Code Albuquerque NM 87190-3686 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 3 1 / 2 0 0 6 <b>Transaction ID:</b> 60919.C67858 Amount of Each Receipt this Period 329.02 Other Receipt
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 811.27		

C. Full Name (Last, First, Middle Initial) First Community Bank Mailing Address PO Box 3686 City State Zip Code Albuquerque NM 87190-3686 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 3 1 / 2 0 0 6 <b>Transaction ID:</b> 60919.C67860 Amount of Each Receipt this Period 473.29 Other Receipt
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1284.56		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1070.83</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>1070.83</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)

<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)  
Republican Campaign Committee of New Mexico

Full Name (Last, First, Middle Initial) <b>A. Albuquerque Marriott Pyramid</b>		<b>Transaction ID:</b> 60818.E10160 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6
Mailing Address 5151 San Francisco Rd NE		Amount of Each Disbursement this Period 500.00
City Albuquerque State NM Zip Code 87109-4641	ROOM RENTAL DEPOSIT	
Purpose of Disbursement ROOM RENTAL DEPOSIT		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) ▼	

Full Name (Last, First, Middle Initial) <b>B. Alliance Audio Visual</b>		<b>Transaction ID:</b> 60818.E10171 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 1 4 / 2 0 0 6
Mailing Address 3530 Pan American Fwy NE Ste A		Amount of Each Disbursement this Period 4991.06
City Albuquerque State NM Zip Code 87107-4793	ROSWELL EVENT	
Purpose of Disbursement ROSWELL EVENT		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) ▼	

Full Name (Last, First, Middle Initial) <b>C. Christopher Atencio</b>		<b>Transaction ID:</b> 60919.E10231 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6
Mailing Address 9200 Holm Bursun Dr NW		Amount of Each Disbursement this Period 239.99
City Albuquerque State NM Zip Code 87114-5311	REIMBURSEMENT:SEE BELOW CA-1	
Purpose of Disbursement REIMBURSEMENT:SEE BELOW CA-1		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>5731.05</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)

PAGE 43 / 96

<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)  
Republican Campaign Committee of New Mexico

Full Name (Last, First, Middle Initial) <b>A. Christopher Atencio</b>		<b>Transaction ID:</b> 60919.E10234 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6
Mailing Address 9200 Holm Bursun Dr NW		Amount of Each Disbursement this Period 32.84
City Albuquerque State NM Zip Code 87114-5311	[MEMO ITEM] MEMO: TAPE & GASOLINE CA-1	
Purpose of Disbursement TAPE & GASOLINE CA-1 Candidate Name		Category/Type
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) ▼

Full Name (Last, First, Middle Initial) <b>B. Office Max</b>		<b>Transaction ID:</b> 60919.E10233 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6
Mailing Address 3301 Menaul Blvd NE		Amount of Each Disbursement this Period 96.25
City Albuquerque State NM Zip Code 87107-1852	[MEMO ITEM] MEMO: OFFICE SUPPLIES CA-1	
Purpose of Disbursement OFFICE SUPPLIES CA-1 Candidate Name		Category/Type
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) ▼

Full Name (Last, First, Middle Initial) <b>C. Jacey Campbell</b>		<b>Transaction ID:</b> 60818.E10144 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 0 8 / 2 0 0 6
Mailing Address PO Box 91644		Amount of Each Disbursement this Period 15.94
City Albuquerque State NM Zip Code 87199-1644	REIMBURSEMENT:SEE BELOW JC-3	
Purpose of Disbursement REIMBURSEMENT:SEE BELOW JC-3 Candidate Name		Category/Type
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) ..... ▶	15.94
<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)  
Republican Campaign Committee of New Mexico

Full Name (Last, First, Middle Initial) <b>A. Jacey Campbell</b>		Transaction ID: 60818.E10143 Date of Disbursement MM / DD / YYYY 08 / 08 / 2006	
Mailing Address PO Box 91644		Amount of Each Disbursement this Period 15.94	
City Albuquerque State NM Zip Code 87199-1644	Purpose of Disbursement OFFICE SUPPLIES JC-3	Category/ Type	
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>[MEMO ITEM]</b> MEMO: OFFICE SUPPLIES JC-3	

Full Name (Last, First, Middle Initial) <b>B. Cattle Baron Restaurants, Inc.</b>		Transaction ID: 60818.E10216 Date of Disbursement MM / DD / YYYY 08 / 16 / 2006	
Mailing Address PO Box 1654		Amount of Each Disbursement this Period 1733.82	
City Roswell State NM Zip Code 88202-1654	Purpose of Disbursement CATERING ROSWELL EVENT	Category/ Type	
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) ▼	CATERING ROSWELL EVENT	

Full Name (Last, First, Middle Initial) <b>C. Philip Coppage</b>		Transaction ID: 60818.E10117 Date of Disbursement MM / DD / YYYY 08 / 01 / 2006	
Mailing Address 2829 Sabina St NE		Amount of Each Disbursement this Period 964.58	
City Albuquerque State NM Zip Code 87112-2088	Purpose of Disbursement REIMBURSEMENT:SEE BELOW PC-5	Category/ Type	
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) ▼	REIMBURSEMENT:SEE BELOW PC-5	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2698.40
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

# 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)  
Republican Campaign Committee of New Mexico

Full Name (Last, First, Middle Initial) <b>A. Philip Coppage</b>		Transaction ID: 60818.E10125 Date of Disbursement MM / DD / YYYY 08 / 01 / 2006	
Mailing Address 2829 Sabina St NE		Amount of Each Disbursement this Period 61.00	
City Albuquerque State NM Zip Code 87112-2088	Purpose of Disbursement BUS TICKET PC-5	Category/ Type	
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>[MEMO ITEM]</b> MEMO: BUS TICKET PC-5	

Full Name (Last, First, Middle Initial) <b>B. Embassy Suites</b>		Transaction ID: 60818.E10124 Date of Disbursement MM / DD / YYYY 08 / 01 / 2006	
Mailing Address 4444 Havana St		Amount of Each Disbursement this Period 250.38	
City Denver State CO Zip Code 80239-2926	Purpose of Disbursement HOTEL PC-5	Category/ Type	
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>[MEMO ITEM]</b> MEMO: HOTEL PC-5	

Full Name (Last, First, Middle Initial) <b>C. Hertz Car Rental</b>		Transaction ID: 60818.E10122 Date of Disbursement MM / DD / YYYY 08 / 01 / 2006	
Mailing Address PO Box 82776		Amount of Each Disbursement this Period 55.20	
City San Diego State CA Zip Code 92138-2776	Purpose of Disbursement TRAVEL EXPENSES PC-5	Category/ Type	
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>[MEMO ITEM]</b> MEMO: TRAVEL EXPENSES PC-5	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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)  
Republican Campaign Committee of New Mexico

Full Name (Last, First, Middle Initial) <b>A. Southwest Airlines</b>		<b>Transaction ID:</b> 60818.E10121 <b>Date of Disbursement</b> MM / DD / YYYY 08 / 01 / 2006
Mailing Address 2702 Love Field Drive		Amount of Each Disbursement this Period 454.40
City Dallas State TX Zip Code 75235-	Purpose of Disbursement 2 AIRLINE TICKETS PC-5 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>[MEMO ITEM]</b> MEMO: 2 AIRLINE TICKETS PC-5

Full Name (Last, First, Middle Initial) <b>B. Cricket</b>		<b>Transaction ID:</b> 60919.E10243 <b>Date of Disbursement</b> MM / DD / YYYY 08 / 18 / 2006
Mailing Address PO Box 660021		Amount of Each Disbursement this Period 494.89
City Dallas State TX Zip Code 75266-0021	Purpose of Disbursement CELL PHONES 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) ▼	CELL PHONES

Full Name (Last, First, Middle Initial) <b>C. Brent DePonte</b>		<b>Transaction ID:</b> 60919.C67770IK <b>Date of Disbursement</b> MM / DD / YYYY 08 / 15 / 2006
Mailing Address PO Box 9304		Amount of Each Disbursement this Period 1711.00
City Albuquerque State NM Zip Code 87119-9304	Purpose of Disbursement AIR CHARTER 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) ▼	IN KIND: AIR CHARTER

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2205.89
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**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)  
Republican Campaign Committee of New Mexico

Full Name (Last, First, Middle Initial) <b>A. Direct Mail Systems Inc.</b>		<b>Transaction ID:</b> 60818.E10223 <b>Date of Disbursement</b> MM / DD / YYYY 08 / 16 / 2006
Mailing Address 12450 Automobile Blvd		Amount of Each Disbursement this Period 759.00
City Clearwater State FL Zip Code 33762-4427	Amount of Each Disbursement this Period PARTY FUNDRAISING POSTAGE	
Purpose of Disbursement PARTY FUNDRAISING POSTAGE		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) ▼	

Full Name (Last, First, Middle Initial) <b>B. F/L Consulting</b>		<b>Transaction ID:</b> 60919.E10279 <b>Date of Disbursement</b> MM / DD / YYYY 08 / 29 / 2006
Mailing Address PO Box 67737		Amount of Each Disbursement this Period 14664.85
City Albuquerque State NM Zip Code 87193-7737	Amount of Each Disbursement this Period CONSULTING:POLITICAL NOFED CAND	
Purpose of Disbursement CONSULTING:POLITICAL NOFED CAND		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) ▼	

Full Name (Last, First, Middle Initial) <b>C. Fiesta Del Norte One, LLC</b>		<b>Transaction ID:</b> 60818.E10108 <b>Date of Disbursement</b> MM / DD / YYYY 08 / 01 / 2006
Mailing Address C/O NAI Horizon Real Estate Group 2944 North 44th St, Ste 200		Amount of Each Disbursement this Period 2350.00
City Phoenix State AZ Zip Code 85018-	Amount of Each Disbursement this Period RENT - AUGUST	
Purpose of Disbursement RENT - AUGUST		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) ..... ▶	17773.85
<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)  
Republican Campaign Committee of New Mexico

Full Name (Last, First, Middle Initial) <b>A. First Community Bank</b>		<b>Transaction ID:</b> 60919.E10340 <b>Date of Disbursement</b> MM / DD / YYYY 08 / 31 / 2006
Mailing Address PO Box 3686		Amount of Each Disbursement this Period 468.51
City Albuquerque State NM Zip Code 87190-3686	Purpose of Disbursement BANK FEES 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) ▼	BANK FEES

Full Name (Last, First, Middle Initial) <b>B. FLS Connect, LLC</b>		<b>Transaction ID:</b> 60818.E10106 <b>Date of Disbursement</b> MM / DD / YYYY 08 / 01 / 2006
Mailing Address 2401 W Behrend Dr Ste 7		Amount of Each Disbursement this Period 5810.40
City Phoenix State AZ Zip Code 85027-4143	Purpose of Disbursement PARTY FUNDRAISING 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) ▼	PARTY FUNDRAISING

Full Name (Last, First, Middle Initial) <b>C. FLS Connect, LLC</b>		<b>Transaction ID:</b> 60818.E10151 <b>Date of Disbursement</b> MM / DD / YYYY 08 / 08 / 2006
Mailing Address 2401 W Behrend Dr Ste 7		Amount of Each Disbursement this Period 170.40
City Phoenix State AZ Zip Code 85027-4143	Purpose of Disbursement PARTY FUNDRAISING 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) ▼	PARTY FUNDRAISING

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	6449.31
<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)  
Republican Campaign Committee of New Mexico

<p><b>A.</b> Full Name (Last, First, Middle Initial) Heidi Fuller</p> <p>Mailing Address 6138 Chesterbrook Rd</p> <p>City Mc Lean State VA Zip Code 22101-3215</p> <p>Purpose of Disbursement REIMBURSEMENT:SEE BELOW HF-2</p> <p>Candidate Name</p>		<p><b>Transaction ID:</b> 60919.E10249</p> <p>Date of Disbursement</p> <p><input type="text" value="08"/> / <input type="text" value="21"/> / <input type="text" value="2006"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1185.41"/></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>Category/Type</p> <p>REIMBURSEMENT:SEE BELOW HF-2</p>

<p><b>B.</b> Full Name (Last, First, Middle Initial) Delta Airlines</p> <p>Mailing Address PO Box 20706</p> <p>City Atlanta State GA Zip Code 30320-6001</p> <p>Purpose of Disbursement AIR FARE HF-2</p> <p>Candidate Name</p>		<p><b>Transaction ID:</b> 60919.E10253</p> <p>Date of Disbursement</p> <p><input type="text" value="08"/> / <input type="text" value="21"/> / <input type="text" value="2006"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="451.69"/></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>Category/Type</p> <p>[MEMO ITEM] MEMO: AIR FARE HF-2</p>

<p><b>C.</b> Full Name (Last, First, Middle Initial) Heidi Fuller</p> <p>Mailing Address 6138 Chesterbrook Rd</p> <p>City Mc Lean State VA Zip Code 22101-3215</p> <p>Purpose of Disbursement FOOD HF-2</p> <p>Candidate Name</p>		<p><b>Transaction ID:</b> 60919.E10250</p> <p>Date of Disbursement</p> <p><input type="text" value="08"/> / <input type="text" value="21"/> / <input type="text" value="2006"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="91.92"/></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>Category/Type</p> <p>[MEMO ITEM] MEMO: FOOD HF-2</p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="1185.41"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text"/></p>

# 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)  
Republican Campaign Committee of New Mexico

Full Name (Last, First, Middle Initial) <b>A. La Quinta Inn</b>		Transaction ID: 60919.E10252 Date of Disbursement MM / DD / YYYY 08 / 21 / 2006	
Mailing Address 200 E 19th St		Amount of Each Disbursement this Period 398.50	
City Roswell State NM Zip Code 88201-5101	Purpose of Disbursement LODGING HF-2	Category/ Type	
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>[MEMO ITEM]</b> MEMO: LODGING HF-2	

Full Name (Last, First, Middle Initial) <b>B. Office Max</b>		Transaction ID: 60919.E10254 Date of Disbursement MM / DD / YYYY 08 / 21 / 2006	
Mailing Address 3301 Menaul Blvd NE		Amount of Each Disbursement this Period 76.54	
City Albuquerque State NM Zip Code 87107-1852	Purpose of Disbursement SUPPLIES HF-2	Category/ Type	
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>[MEMO ITEM]</b> MEMO: SUPPLIES HF-2	

Full Name (Last, First, Middle Initial) <b>C. Garcias Tents &amp; Events, Inc.</b>		Transaction ID: 60818.E10165 Date of Disbursement MM / DD / YYYY 08 / 11 / 2006	
Mailing Address 303 Arvada Ave NW		Amount of Each Disbursement this Period 4297.93	
City Albuquerque State NM Zip Code 87102-1025	Purpose of Disbursement EQUIPMENT RENTAL	Category/ Type	
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) ▼	EQUIPMENT RENTAL	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4297.93
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

# 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)  
Republican Campaign Committee of New Mexico

Full Name (Last, First, Middle Initial) <b>A. Hewlett-Packard Company</b>		<b>Transaction ID:</b> 60818.E10109 <b>Date of Disbursement</b> MM / DD / YYYY 08 / 01 / 2006
Mailing Address PO Box 101149		Amount of Each Disbursement this Period 1440.33
City Atlanta State GA Zip Code 30392-1149	Category/ Type  COMPUTERS	
Purpose of Disbursement COMPUTERS		
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) ▼	

Full Name (Last, First, Middle Initial) <b>B. La Quinta Inn</b>		<b>Transaction ID:</b> 60919.E10271 <b>Date of Disbursement</b> MM / DD / YYYY 08 / 25 / 2006
Mailing Address 200 E 19th St		Amount of Each Disbursement this Period 189.30
City Roswell State NM Zip Code 88201-5101	Category/ Type  [MEMO ITEM] MEMO: LODGING MK-4	
Purpose of Disbursement LODGING MK-4		
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) ▼	

Full Name (Last, First, Middle Initial) <b>C. Sara Lister</b>		<b>Transaction ID:</b> 60818.E10217 <b>Date of Disbursement</b> MM / DD / YYYY 08 / 16 / 2006
Mailing Address 6705 Mesa Mariposa PI NW		Amount of Each Disbursement this Period 375.84
City Albuquerque State NM Zip Code 87120-3357	Category/ Type  MILEAGE REIMBURSEMENT	
Purpose of Disbursement MILEAGE REIMBURSEMENT		
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) ..... ▶	1816.17
<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)  
Republican Campaign Committee of New Mexico

Full Name (Last, First, Middle Initial) <b>A. Lohman Atrium Suites</b>		<b>Transaction ID:</b> 60818.E10159 <b>Date of Disbursement</b> MM / DD / YYYY 08 / 10 / 2006
Mailing Address 1990 E Lohman Ave		Amount of Each Disbursement this Period 300.00
City Las Cruces      State NM      Zip Code 88001-3172	RENT (\$200) & DEPOSIT (\$1-00)	
Purpose of Disbursement RENT (\$200) & DEPOSIT (\$100)		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) ▼	

Full Name (Last, First, Middle Initial) <b>B. Nicole Marsters</b>		<b>Transaction ID:</b> 60818.E10118 <b>Date of Disbursement</b> MM / DD / YYYY 08 / 01 / 2006
Mailing Address 7303 Montgomery Blvd NE Apt D73		Amount of Each Disbursement this Period 21.99
City Albuquerque      State NM      Zip Code 87109-1518	REIMBURSEMENT:SEE BELOW NM-2	
Purpose of Disbursement REIMBURSEMENT:SEE BELOW NM-2		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) ▼	

Full Name (Last, First, Middle Initial) <b>C. McKinney &amp; Associates, CPAs LLC</b>		<b>Transaction ID:</b> 60818.E10136 <b>Date of Disbursement</b> MM / DD / YYYY 08 / 08 / 2006
Mailing Address 6341 Riverside Plaza Ln NW Ste 100		Amount of Each Disbursement this Period 1666.60
City Albuquerque      State NM      Zip Code 87120-2646	AUG. RENT & SECURITY DEP.	
Purpose of Disbursement AUG. RENT & SECURITY DEP.		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) ..... ▶	1988.59
<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)  
Republican Campaign Committee of New Mexico

Full Name (Last, First, Middle Initial) <b>A. McKinney &amp; Associates, CPAs LLC</b>		<b>Transaction ID:</b> 60919.E10277 <b>Date of Disbursement</b> MM / DD / YYYY 08 / 29 / 2006
Mailing Address 6341 Riverside Plaza Ln NW Ste 100		Amount of Each Disbursement this Period 1000.00
City Albuquerque State NM Zip Code 87120-2646	RENT - SEPT	
Purpose of Disbursement RENT - SEPT Candidate Name		Category/Type
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) ▼

Full Name (Last, First, Middle Initial) <b>B. Pitney Bowes Purchase Power</b>		<b>Transaction ID:</b> 60919.E10292 <b>Date of Disbursement</b> MM / DD / YYYY 08 / 30 / 2006
Mailing Address PO Box 856042		Amount of Each Disbursement this Period 195.00
City Louisville State KY Zip Code 40285-6042	POSTAGE FOR METER	
Purpose of Disbursement POSTAGE FOR METER Candidate Name		Category/Type
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) ▼

Full Name (Last, First, Middle Initial) <b>C. PNM</b>		<b>Transaction ID:</b> 60919.E10244 <b>Date of Disbursement</b> MM / DD / YYYY 08 / 18 / 2006
Mailing Address PO Box 349		Amount of Each Disbursement this Period 352.07
City Albuquerque State NM Zip Code 87103-0349	UTILITIES - GAS & ELEC. (VICTORY)	
Purpose of Disbursement UTILITIES - GAS & ELEC. (VICTORY) Candidate Name		Category/Type
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) ..... ▶	1547.07
<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)  
Republican Campaign Committee of New Mexico

Full Name (Last, First, Middle Initial) <b>A. Political Calling.Com</b>		<b>Transaction ID:</b> 60818.E10112 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 0 1 / 2 0 0 6
Mailing Address 712 5th St Ste E		Amount of Each Disbursement this Period 814.09
City Davis State CA Zip Code 95616-4174	ISSUE ADVOCACY NOFED CAND- IDATE	
Purpose of Disbursement ISSUE ADVOCACY NOFED CANDIDATE		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) ▼	

Full Name (Last, First, Middle Initial) <b>B. Qwest</b>		<b>Transaction ID:</b> 60818.E10120 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 0 1 / 2 0 0 6
Mailing Address PO Box 29060		Amount of Each Disbursement this Period 599.86
City Phoenix State AZ Zip Code 85038-9060	TELEPHONE - VICTORY OFFICE	
Purpose of Disbursement TELEPHONE - VICTORY OFFICE		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) ▼	

Full Name (Last, First, Middle Initial) <b>C. Qwest</b>		<b>Transaction ID:</b> 60919.E10266 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6
Mailing Address PO Box 29060		Amount of Each Disbursement this Period 407.90
City Phoenix State AZ Zip Code 85038-9060	TELEPHONE - VICTORY OFFICE WEST	
Purpose of Disbursement TELEPHONE - VICTORY OFFICE WEST		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) ..... ▶	1821.85
<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)  
Republican Campaign Committee of New Mexico

Full Name (Last, First, Middle Initial) <b>A. Qwest</b>		<b>Transaction ID:</b> 60919.E10274 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 2 8 / 2 0 0 6
Mailing Address PO Box 29060		Amount of Each Disbursement this Period 590.14
City Phoenix State AZ Zip Code 85038-9060	TELEPHONE - VICTORY OFFICE	
Purpose of Disbursement TELEPHONE - VICTORY OFFICE		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:		

Full Name (Last, First, Middle Initial) <b>B. The Sherwood Company, Inc.</b>		<b>Transaction ID:</b> 60818.E10110 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 0 1 / 2 0 0 6
Mailing Address 7615 Menaul Blvd NE		Amount of Each Disbursement this Period 366.58
City Albuquerque State NM Zip Code 87110-4647	PRINTING ROSWELL EVENT	
Purpose of Disbursement PRINTING ROSWELL EVENT		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:		

Full Name (Last, First, Middle Initial) <b>C. SmarTech Corp</b>		<b>Transaction ID:</b> 61025.E10691 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 1 0 / 2 0 0 6
Mailing Address PO Box 11181		Amount of Each Disbursement this Period 4038.46
City Chattanooga State TN Zip Code 37401-2181	PAID FOR BY TRANSFER FROM RNC	
Purpose of Disbursement PAID FOR BY TRANSFER FROM RNC		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>4995.18</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)  
Republican Campaign Committee of New Mexico

Full Name (Last, First, Middle Initial) <b>A. Matthew Stackpole</b>		Transaction ID: 60818.E10113 Date of Disbursement MM / DD / YYYY 08 / 01 / 2006
Mailing Address 2738 Madison St NE		Amount of Each Disbursement this Period 285.85
City Albuquerque State NM Zip Code 87110-3012	Purpose of Disbursement REIMBURSEMENT:SEE BELOW MS-7	
Candidate Name		Category/Type
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) ▼	REIMBURSEMENT:SEE BELOW MS-7

Full Name (Last, First, Middle Initial) <b>B. Office Max</b>		Transaction ID: 60818.E10116 Date of Disbursement MM / DD / YYYY 08 / 01 / 2006
Mailing Address 3301 Menaul Blvd NE		Amount of Each Disbursement this Period 61.86
City Albuquerque State NM Zip Code 87107-1852	Purpose of Disbursement OFFICE SUPPLIES MS-7	
Candidate Name		Category/Type
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] MEMO: OFFICE SUPPLIES MS-7

Full Name (Last, First, Middle Initial) <b>C. Postmaster</b>		Transaction ID: 60818.E10114 Date of Disbursement MM / DD / YYYY 08 / 01 / 2006
Mailing Address 1135 Broadway Blvd NE		Amount of Each Disbursement this Period 156.00
City Albuquerque State NM Zip Code 87101-9996	Purpose of Disbursement POSTAGE MS-7	
Candidate Name		Category/Type
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] MEMO: POSTAGE MS-7

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	285.85
<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)  
Republican Campaign Committee of New Mexico

Full Name (Last, First, Middle Initial) <b>A. Matthew Stackpole</b>		<b>Transaction ID:</b> 60818.E10115 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 0 1 / 2 0 0 6
Mailing Address 2738 Madison St NE		Amount of Each Disbursement this Period 67.99
City Albuquerque State NM Zip Code 87110-3012	[MEMO ITEM] MEMO: VOLUNTEER FOOD MS-7	
Purpose of Disbursement VOLUNTEER FOOD MS-7 Candidate Name		Category/Type
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) ▼

Full Name (Last, First, Middle Initial) <b>B. Matthew Stackpole</b>		<b>Transaction ID:</b> 60818.E10141 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 0 8 / 2 0 0 6
Mailing Address 2738 Madison St NE		Amount of Each Disbursement this Period 148.67
City Albuquerque State NM Zip Code 87110-3012	REIMBURSEMENT:SEE BELOW MS-8	
Purpose of Disbursement REIMBURSEMENT:SEE BELOW MS-8 Candidate Name		Category/Type
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) ▼

Full Name (Last, First, Middle Initial) <b>C. Matthew Stackpole</b>		<b>Transaction ID:</b> 60818.E10172 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 1 4 / 2 0 0 6
Mailing Address 2738 Madison St NE		Amount of Each Disbursement this Period 241.73
City Albuquerque State NM Zip Code 87110-3012	REIMBURSEMENT:SEE BELOW MS-9	
Purpose of Disbursement REIMBURSEMENT:SEE BELOW MS-9 Candidate Name		Category/Type
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>390.40</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)  
Republican Campaign Committee of New Mexico

<b>A. Postmaster</b> Full Name (Last, First, Middle Initial) Mailing Address 1135 Broadway Blvd NE City Albuquerque State NM Zip Code 87101-9996 Purpose of Disbursement POSTAGE MS-9 Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Transaction ID: 60818.E10177 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 4 / 2 0 0 6 Amount of Each Disbursement this Period 195.00 [MEMO ITEM] MEMO: POSTAGE MS-9
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<b>B. Matthew Stackpole</b> Full Name (Last, First, Middle Initial) Mailing Address 2738 Madison St NE City Albuquerque State NM Zip Code 87110-3012 Purpose of Disbursement VOLUNTEER FOOD & OFF. SUPPLIES MS-9 Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Transaction ID: 60818.E10176 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 4 / 2 0 0 6 Amount of Each Disbursement this Period 46.73 [MEMO ITEM] MEMO: VOLUNTEER FOOD & OF-F. SUPPLIES MS-9
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<b>C. Postmaster</b> Full Name (Last, First, Middle Initial) Mailing Address 1135 Broadway Blvd NE City Albuquerque State NM Zip Code 87101-9996 Purpose of Disbursement POSTAGE MS-10 Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Transaction ID: 60818.E10221 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 6 / 2 0 0 6 Amount of Each Disbursement this Period 273.00 [MEMO ITEM] MEMO: POSTAGE MS-10
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<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<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)  
Republican Campaign Committee of New Mexico

Full Name (Last, First, Middle Initial) <b>A. Matthew Stackpole</b>		<b>Transaction ID:</b> 60818.E10219 <b>Date of Disbursement</b> MM / DD / YYYY 08 / 16 / 2006
Mailing Address 2738 Madison St NE		Amount of Each Disbursement this Period 30.12
City Albuquerque State NM Zip Code 87110-3012	Purpose of Disbursement REIMBURSEMENT:SEE BELOW MS-11	
Candidate Name		Category/Type
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) ▼	REIMBURSEMENT:SEE BELOW MS-11

Full Name (Last, First, Middle Initial) <b>B. Matthew Stackpole</b>		<b>Transaction ID:</b> 60818.E10220 <b>Date of Disbursement</b> MM / DD / YYYY 08 / 16 / 2006
Mailing Address 2738 Madison St NE		Amount of Each Disbursement this Period 30.12
City Albuquerque State NM Zip Code 87110-3012	Purpose of Disbursement GASOLINE FOR MEETING IN SANTA FE	
Candidate Name		Category/Type
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] MEMO: GASOLINE FOR MEETING IN SANTA FE

Full Name (Last, First, Middle Initial) <b>C. Jeff Wilson</b>		<b>Transaction ID:</b> 60919.C67807IK <b>Date of Disbursement</b> MM / DD / YYYY 08 / 29 / 2006
Mailing Address PO Box 1654		Amount of Each Disbursement this Period 969.95
City Roswell State NM Zip Code 88202-1654	Purpose of Disbursement FOOD EXPENSE FOR EVENT	
Candidate Name		Category/Type
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) ▼	IN KIND: FOOD EXPENSE FOR EVENT

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>1000.07</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	<b>54202.96</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)

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<input type="checkbox"/> 21b	<input checked="" 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)  
Republican Campaign Committee of New Mexico

Full Name (Last, First, Middle Initial) <b>A. Republican Party of Sandoval County</b>		<b>Transaction ID:</b> 60919.E10260 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 3 / 2 0 0 6
Mailing Address PO Box 1064		Amount of Each Disbursement this Period 104.00
City Bernalillo State NM Zip Code 87004-1064	Purpose of Disbursement XFER PARTY COMMITTEE 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) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. Republican Party of Sandoval County</b>		<b>Transaction ID:</b> 60919.E10310 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 6
Mailing Address PO Box 1064		Amount of Each Disbursement this Period 296.00
City Bernalillo State NM Zip Code 87004-1064	Purpose of Disbursement XFER PARTY COMMITTEE 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) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	400.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	400.00

**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)

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

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

Full Name (Last, First, Middle Initial) <b>A. Huffman for Congress</b>		Transaction ID: 60919.E10314 Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2006	
Mailing Address 698 E Wetmore Rd Ste 424		Amount of Each Disbursement this Period 5000.00	
City Tucson State AZ Zip Code 85705-1753	Purpose of Disbursement CANDIDATE CONTRIBUTION Candidate Name JON STEVEN JR HUFFMAN Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 08		
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Category/ Type CANDIDATE CONTRIBUTION	

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

# 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)

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

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

Full Name (Last, First, Middle Initial) <b>A. Arena Communications, LLC</b>		<b>Transaction ID:</b> 60919.E10290 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 0 6
Mailing Address 1780 W Sequoia Vista Circle		Amount of Each Disbursement this Period 3147.75
City Salt Lake City      State UT      Zip Code 84104-		
Purpose of Disbursement VOLUNTEER EXEMPT MAIL HEATHERWILSON		VOLUNTEER EXEMPT MAIL HEATHERWILSON
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) ▼	

Full Name (Last, First, Middle Initial) <b>B. Bernalillo County Clerk</b>		<b>Transaction ID:</b> 60818.E10192 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 1 5 / 2 0 0 6
Mailing Address 1 Civic Plz NW Fl 6		Amount of Each Disbursement this Period 1379.22
City Albuquerque      State NM      Zip Code 87102-2109		
Purpose of Disbursement VOTER LIST		VOTER LIST
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) ▼	

Full Name (Last, First, Middle Initial) <b>C. Jacey Campbell</b>		<b>Transaction ID:</b> 60818.E10208 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 1 5 / 2 0 0 6
Mailing Address PO Box 91644		Amount of Each Disbursement this Period 960.80
City Albuquerque      State NM      Zip Code 87199-1644		
Purpose of Disbursement SALARY (W/RAISE)		SALARY (W/RAISE)
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) ..... ▶	5487.77
<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 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 checked="" type="checkbox"/> 30b

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

<b>A. Jacey Campbell</b> Full Name (Last, First, Middle Initial) Mailing Address PO Box 91644 City Albuquerque State NM Zip Code 87199-1644 Purpose of Disbursement SALARY 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>Transaction ID: 60919.E10304</b> Date of Disbursement 08 / 31 / 2006 Amount of Each Disbursement this Period 960.79 SALARY
--	--	--

<b>B. Philip Coppage</b> Full Name (Last, First, Middle Initial) Mailing Address 2829 Sabina St NE City Albuquerque State NM Zip Code 87112-2088 Purpose of Disbursement SALARY 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>Transaction ID: 60818.E10207</b> Date of Disbursement 08 / 15 / 2006 Amount of Each Disbursement this Period 1503.06 SALARY
---	--	---

<b>C. Philip Coppage</b> Full Name (Last, First, Middle Initial) Mailing Address 2829 Sabina St NE City Albuquerque State NM Zip Code 87112-2088 Purpose of Disbursement SALARY 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>Transaction ID: 60919.E10303</b> Date of Disbursement 08 / 31 / 2006 Amount of Each Disbursement this Period 1503.05 SALARY
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<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>3966.90</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 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 checked="" type="checkbox"/> 30b

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

<b>A. EFTPS</b> Full Name (Last, First, Middle Initial) Mailing Address PO Box 2527 City Santa Fe State NM Zip Code 87504-2527 Purpose of Disbursement 941 TAXES 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>Transaction ID:</b> 60818.E10189 <b>Date of Disbursement:</b> MM / DD / YYYY 08 / 15 / 2006 Amount of Each Disbursement this Period 154.14 941 TAXES
--	--	---

<b>B. EFTPS</b> Full Name (Last, First, Middle Initial) Mailing Address PO Box 2527 City Santa Fe State NM Zip Code 87504-2527 Purpose of Disbursement 941 TAXES 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>Transaction ID:</b> 60818.E10190 <b>Date of Disbursement:</b> MM / DD / YYYY 08 / 15 / 2006 Amount of Each Disbursement this Period 1992.86 941 TAXES
--	--	--

<b>C. EFTPS</b> Full Name (Last, First, Middle Initial) Mailing Address PO Box 2527 City Santa Fe State NM Zip Code 87504-2527 Purpose of Disbursement 941 TAXES 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>Transaction ID:</b> 60919.E10285 <b>Date of Disbursement:</b> MM / DD / YYYY 08 / 31 / 2006 Amount of Each Disbursement this Period 2422.63 941 TAXES
--	--	--

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>4569.63</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 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 checked="" type="checkbox"/> 30b

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

<b>A. EFTPS</b> Full Name (Last, First, Middle Initial) Mailing Address PO Box 2527 City Santa Fe State NM Zip Code 87504-2527 Purpose of Disbursement 941 TAXES 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>Transaction ID:</b> 60919.E10284 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 6 Amount of Each Disbursement this Period 154.13 941 TAXES
--	--	--

<b>B. FLS Connect, LLC</b> Full Name (Last, First, Middle Initial) Mailing Address 2401 W Behrend Dr Ste 7 City Phoenix State AZ Zip Code 85027-4143 Purpose of Disbursement PARTY FUNDRAISING 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>Transaction ID:</b> 60919.E10273 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 2 8 / 2 0 0 6 Amount of Each Disbursement this Period 1687.14 PARTY FUNDRAISING
--	--	---

<b>C. John Gainé</b> Full Name (Last, First, Middle Initial) Mailing Address 5800 Eubank Blvd NE Apt 2335 City Albuquerque State NM Zip Code 87111-6147 Purpose of Disbursement SALARY 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>Transaction ID:</b> 60919.E10307 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 6 Amount of Each Disbursement this Period 1196.80 SALARY
--	--	--

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3038.07
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# 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 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 checked="" type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial) <b>A. Tiara Grant</b>		<b>Transaction ID:</b> 60818.E10209 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 1 5 / 2 0 0 6	
Mailing Address 5305 Cimarron Rd NW		Amount of Each Disbursement this Period 988.81	
City Albuquerque State NM Zip Code 87120-2342	SALARY		
Purpose of Disbursement SALARY Candidate Name			Category/Type
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) ▼

Full Name (Last, First, Middle Initial) <b>B. Tiara Grant</b>		<b>Transaction ID:</b> 60919.E10305 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 6	
Mailing Address 5305 Cimarron Rd NW		Amount of Each Disbursement this Period 988.82	
City Albuquerque State NM Zip Code 87120-2342	SALARY		
Purpose of Disbursement SALARY Candidate Name			Category/Type
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) ▼

Full Name (Last, First, Middle Initial) <b>C. J Hughes</b>		<b>Transaction ID:</b> 60818.E10215 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 1 6 / 2 0 0 6	
Mailing Address 3509 Alaska PI NE		Amount of Each Disbursement this Period 128.00	
City Albuquerque State NM Zip Code 87111-5201	VOTER REGISTRATION TABLE		
Purpose of Disbursement VOTER REGISTRATION TABLE Candidate Name			Category/Type
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>2105.63</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 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 checked="" type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial) <b>A. Ink Impressions, Inc.</b>		<b>Transaction ID:</b> 60919.E10308 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 0 6
Mailing Address 7000 Zenith Ct NE		Amount of Each Disbursement this Period 931.39
City Rio Rancho State NM Zip Code 87144-6467	PRINTING	
Purpose of Disbursement PRINTING		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) ▼	

Full Name (Last, First, Middle Initial) <b>B. Lincoln Consulting Group, Inc.</b>		<b>Transaction ID:</b> 60919.E10230 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6
Mailing Address 80 E Rio Salado Pkwy Ste 814		Amount of Each Disbursement this Period 25000.00
City Tempe State AZ Zip Code 85281-9103	VOTER REGIS. TABLE DOOR-T-O-DOOR	
Purpose of Disbursement VOTER REGIS. TABLE DOOR-TO-DOOR		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) ▼	

Full Name (Last, First, Middle Initial) <b>C. Lincoln Consulting Group, Inc.</b>		<b>Transaction ID:</b> 60919.E10275 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 2 8 / 2 0 0 6
Mailing Address 80 E Rio Salado Pkwy Ste 814		Amount of Each Disbursement this Period 25000.00
City Tempe State AZ Zip Code 85281-9103	VOTER REGIS. TABLE DOOR-T-O-DOOR	
Purpose of Disbursement VOTER REGIS. TABLE DOOR-TO-DOOR		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) ..... ▶	50931.39
<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 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 checked="" type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial) <b>A. Deborah Lundy</b>		<b>Transaction ID:</b> 60818.E10195 <b>Date of Disbursement</b> MM / DD / YYYY 08 / 15 / 2006
Mailing Address 1415 Trail Wind Rd NE		Amount of Each Disbursement this Period 130.76
City Albuquerque State NM Zip Code 87113-2089	Purpose of Disbursement REIMBURSEMENT:SEE BELOW DL-2	
Candidate Name		Category/Type
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) ▼	REIMBURSEMENT:SEE BELOW DL-2

Full Name (Last, First, Middle Initial) <b>B. Las Cruces Sun News</b>		<b>Transaction ID:</b> 60818.E10196 <b>Date of Disbursement</b> MM / DD / YYYY 08 / 15 / 2006
Mailing Address 256 W Las Cruces Ave		Amount of Each Disbursement this Period 130.76
City Las Cruces State NM Zip Code 88005-1804	Purpose of Disbursement NEWSPAPER AD DL-2	
Candidate Name		Category/Type
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] MEMO: NEWSPAPER AD DL-2

Full Name (Last, First, Middle Initial) <b>C. Nicole Marsters</b>		<b>Transaction ID:</b> 60818.E10210 <b>Date of Disbursement</b> MM / DD / YYYY 08 / 15 / 2006
Mailing Address 7303 Montgomery Blvd NE Apt D73		Amount of Each Disbursement this Period 988.82
City Albuquerque State NM Zip Code 87109-1518	Purpose of Disbursement SALARY (W/RAISE)	
Candidate Name		Category/Type
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) ▼	SALARY (W/RAISE)

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1119.58
<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 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 checked="" type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial) <b>A. Nicole Marsters</b>		Transaction ID: 60919.E10306 Date of Disbursement 08 / 31 / 2006
Mailing Address 7303 Montgomery Blvd NE Apt D73		Amount of Each Disbursement this Period 988.82
City Albuquerque State NM Zip Code 87109-1518	SALARY	
Purpose of Disbursement SALARY		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) ▼	

Full Name (Last, First, Middle Initial) <b>B. Lyn Ott</b>		Transaction ID: 60818.E10166 Date of Disbursement 08 / 14 / 2006
Mailing Address 3509 Alaska PI NE		Amount of Each Disbursement this Period 145.69
City Albuquerque State NM Zip Code 87111-5201	REIMBURSEMENT:SEE BELOW LO-3	
Purpose of Disbursement REIMBURSEMENT:SEE BELOW LO-3		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) ▼	

Full Name (Last, First, Middle Initial) <b>C. Lyn Ott</b>		Transaction ID: 60818.E10178 Date of Disbursement 08 / 14 / 2006
Mailing Address 3509 Alaska PI NE		Amount of Each Disbursement this Period 56.04
City Albuquerque State NM Zip Code 87111-5201	[MEMO ITEM] MEMO: TRAVEL EXPENSES LO-3	
Purpose of Disbursement TRAVEL EXPENSES LO-3		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) ..... ▶	1134.51
<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 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 checked="" type="checkbox"/> 30b

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

<b>A.</b> Full Name (Last, First, Middle Initial) Lyn Ott		<b>Transaction ID:</b> 60818.E10205 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 1 5 / 2 0 0 6
Mailing Address 3509 Alaska PI NE		Amount of Each Disbursement this Period 644.01
City Albuquerque State NM Zip Code 87111-5201	Category/ Type	
Purpose of Disbursement SALARY		
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) ▼	SALARY

<b>B.</b> Full Name (Last, First, Middle Initial) Lyn Ott		<b>Transaction ID:</b> 60919.E10301 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 6
Mailing Address 3509 Alaska PI NE		Amount of Each Disbursement this Period 644.02
City Albuquerque State NM Zip Code 87111-5201	Category/ Type	
Purpose of Disbursement SALARY		
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) ▼	SALARY

<b>C.</b> Full Name (Last, First, Middle Initial) Rocco Petrocelli		<b>Transaction ID:</b> 60818.E10126 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 0 1 / 2 0 0 6
Mailing Address 1301 Boatright Dr NE		Amount of Each Disbursement this Period 320.00
City Albuquerque State NM Zip Code 87112-5001	Category/ Type	
Purpose of Disbursement VOTER REGISTRATION TABLE		
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) ▼	VOTER REGISTRATION TABLE

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1608.03
<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 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 checked="" type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial) <b>A. Rocco Petrocelli</b>		<b>Transaction ID:</b> 60818.E10152 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 0 9 / 2 0 0 6
Mailing Address 1301 Boatright Dr NE		Amount of Each Disbursement this Period 280.00
City Albuquerque State NM Zip Code 87112-5001	VOTER REGISTRATION TABLE	
Purpose of Disbursement VOTER REGISTRATION TABLE		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) ▼	

Full Name (Last, First, Middle Initial) <b>B. Rocco Petrocelli</b>		<b>Transaction ID:</b> 60818.E10198 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 1 5 / 2 0 0 6
Mailing Address 1301 Boatright Dr NE		Amount of Each Disbursement this Period 272.00
City Albuquerque State NM Zip Code 87112-5001	VOTER REGISTRATION TABLE	
Purpose of Disbursement VOTER REGISTRATION TABLE		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) ▼	

Full Name (Last, First, Middle Initial) <b>C. Rocco Petrocelli</b>		<b>Transaction ID:</b> 60919.E10257 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 2 2 / 2 0 0 6
Mailing Address 1301 Boatright Dr NE		Amount of Each Disbursement this Period 104.00
City Albuquerque State NM Zip Code 87112-5001	VOTER REGISTRATION TABLE	
Purpose of Disbursement VOTER REGISTRATION TABLE		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) ..... ▶	656.00
<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 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 checked="" type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial) <b>A. Rocco Petrocelli</b>		<b>Transaction ID:</b> 60919.E10276 <b>Date of Disbursement</b> MM / DD / YYYY 08 / 29 / 2006
Mailing Address 1301 Boatright Dr NE		Amount of Each Disbursement this Period 200.00
City Albuquerque State NM Zip Code 87112-5001	VOTER REGISTRATION TABLE	
Purpose of Disbursement VOTER REGISTRATION TABLE Candidate Name		Category/Type
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) ▼

Full Name (Last, First, Middle Initial) <b>B. Sandoval County Clerk</b>		<b>Transaction ID:</b> 60919.E10256 <b>Date of Disbursement</b> MM / DD / YYYY 08 / 22 / 2006
Mailing Address PO Box 40		Amount of Each Disbursement this Period 75.00
City Bernalillo State NM Zip Code 87004-0040	VOTER LIST	
Purpose of Disbursement VOTER LIST Candidate Name		Category/Type
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) ▼

Full Name (Last, First, Middle Initial) <b>C. Mary Ann Spiller</b>		<b>Transaction ID:</b> 60919.E10262 <b>Date of Disbursement</b> MM / DD / YYYY 08 / 23 / 2006
Mailing Address 2813 Trevino Dr SE		Amount of Each Disbursement this Period 208.00
City Rio Rancho State NM Zip Code 87124-2244	VOTER REGISTRATION TABLE	
Purpose of Disbursement VOTER REGISTRATION TABLE Candidate Name		Category/Type
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>483.00</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 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 checked="" type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial) <b>A. Mary Ann Spiller</b>		<b>Transaction ID:</b> 60919.E10313 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 6
Mailing Address 2813 Trevino Dr SE		Amount of Each Disbursement this Period 256.00
City Rio Rancho State NM Zip Code 87124-2244	VOTER REGISTRATION TABLE	
Purpose of Disbursement VOTER REGISTRATION TABLE Candidate Name		Category/Type
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) ▼

Full Name (Last, First, Middle Initial) <b>B. Matthew Stackpole</b>		<b>Transaction ID:</b> 60818.E10206 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 1 5 / 2 0 0 6
Mailing Address 2738 Madison St NE		Amount of Each Disbursement this Period 1037.68
City Albuquerque State NM Zip Code 87110-3012	SALARY (W/RAISE)	
Purpose of Disbursement SALARY (W/RAISE) Candidate Name		Category/Type
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) ▼

Full Name (Last, First, Middle Initial) <b>C. Matthew Stackpole</b>		<b>Transaction ID:</b> 60818.E10218 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 1 6 / 2 0 0 6
Mailing Address 2738 Madison St NE		Amount of Each Disbursement this Period 424.30
City Albuquerque State NM Zip Code 87110-3012	REIMBURSEMENT:SEE BELOW MS-10	
Purpose of Disbursement REIMBURSEMENT:SEE BELOW MS-10 Candidate Name		Category/Type
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) ..... ▶	1717.98
<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 74 / 96

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

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

<p><b>A. Office Max</b></p> <p>Full Name (Last, First, Middle Initial) Office Max</p> <p>Mailing Address 3301 Menaul Blvd NE</p> <p>City Albuquerque State NM Zip Code 87107-1852</p> <p>Purpose of Disbursement OFFICE SUPPLIES MS-10</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>Transaction ID: 60818.E10222</p> <p>Date of Disbursement</p> <p><input type="text" value="08"/> <input type="text" value="16"/> / <input type="text" value="20"/> <input type="text" value="06"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="151.30"/></p> <p><b>[MEMO ITEM]</b> MEMO: OFFICE SUPPLIES MS-10</p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p><b>B. Matthew Stackpole</b></p> <p>Full Name (Last, First, Middle Initial) Matthew Stackpole</p> <p>Mailing Address 2738 Madison St NE</p> <p>City Albuquerque State NM Zip Code 87110-3012</p> <p>Purpose of Disbursement SALARY</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 60919.E10302</p> <p>Date of Disbursement</p> <p><input type="text" value="08"/> <input type="text" value="31"/> / <input type="text" value="20"/> <input type="text" value="06"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1037.69"/></p> <p>SALARY</p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p><b>C. Taxation &amp; Revenue Department</b></p> <p>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 - JULY 2006</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>Transaction ID: 60919.E10268</p> <p>Date of Disbursement</p> <p><input type="text" value="08"/> <input type="text" value="08"/> / <input type="text" value="20"/> <input type="text" value="06"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="18.46"/></p> <p>CRS - JULY 2006</p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="1056.15"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text"/></p>

**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 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 checked="" type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)  
**A.** Taxation & Revenue Department

Mailing Address PO Box 25128

City State Zip Code  
Santa Fe NM 87504-5128

Purpose of Disbursement  
CRS - JULY 2006  
Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Transaction ID: 60818.E10191  
Date of Disbursement

<sup>M</sup>	<sup>M</sup>	/	<sup>D</sup>	<sup>D</sup>	/	<sup>Y</sup>	<sup>Y</sup>	<sup>Y</sup>	<sup>Y</sup>
0	8		1	4		2	0	0	6

Amount of Each Disbursement this Period

423.30
--------

CRS - JULY 2006

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

423.30

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

78297.94

**METHOD OF ALLOCATION FOR:**

- **SHARED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS**
- **SHARED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES** (State, District and Local Party Committees Only)
- **ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE)**(Seperate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)

Republican Campaign Committee of New Mexico

USE ONLY ONE SECTION, A or B

**A. State and Local Party Committees**

**Fixed Percentage (select one)**

- \_\_\_\_\_ Presidential-Only Election Year (28% Federal)
- \_\_\_\_\_ Presidential and Senate Election Year (36% Federal)
- X  Senate-Only Election Year (21% Federal)
- \_\_\_\_\_ Non-Presidential and Non-Senate Election Year (15% Federal)

**B. Separate Segregated Funds and Nonconnected Committees**

**Flat Minimum Federal Percentage**

If the committee will allocate using the flat minimum percentage of 50% federal funds, check

**or**

If the committee is spending more than 50% federal funds, indicate ratio below

Federal.....  %

Nonfederal.....  %

This ratio applies to (check all that apply):

- Administrative
- Generic Voter Drive
- Public Communications Referencing Party Only

**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 RPNM Allocation Transfers PO Box 940-83	DATE OF RECEIPT M M / D D / Y Y Y Y 0 8 / 1 0 / 2 0 0 6	TOTAL AMOUNT TRANSFERRED 1022.00
--	---	-------------------------------------

BREAKDOWN OF TRANSFER RECEIVED		
<b>i) Total Administrative</b> .....		1022.00 Transaction ID: H360818.C67617
<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) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising .....		
<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) .....	
<b>TOTAL</b> This Period (Generic Voter Drive) .....	
<b>TOTAL</b> This Period (Exempt Activities) .....	
<b>TOTAL</b> This Period (Direct Fundraising) .....	
<b>TOTAL</b> This Period (Direct Candidate Support) .....	
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	
<b>TOTAL</b> This Period (Total Amount Transferred) .....	

**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 RPNM Allocation Transfers PO Box 940-83	DATE OF RECEIPT M M / D D / Y Y Y Y 0 8 / 1 4 / 2 0 0 6	TOTAL AMOUNT TRANSFERRED 4930.00
--	---	-------------------------------------

BREAKDOWN OF TRANSFER RECEIVED		
<b>i) Total Administrative</b> .....		4930.00 Transaction ID: H360818.C67640
<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) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising .....		
<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) .....	
<b>TOTAL</b> This Period (Generic Voter Drive) .....	
<b>TOTAL</b> This Period (Exempt Activities) .....	
<b>TOTAL</b> This Period (Direct Fundraising) .....	
<b>TOTAL</b> This Period (Direct Candidate Support) .....	
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	
<b>TOTAL</b> This Period (Total Amount Transferred) .....	

**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 RPNM Allocation Transfers PO Box 940-83	DATE OF RECEIPT M M / D D / Y Y Y Y 0 8 / 2 1 / 2 0 0 6	TOTAL AMOUNT TRANSFERRED 1983.00
--	---	-------------------------------------

BREAKDOWN OF TRANSFER RECEIVED		
<b>i) Total Administrative</b> .....		1983.00 Transaction ID: H360919.C67758
<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) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising .....		
<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) .....	
<b>TOTAL</b> This Period (Generic Voter Drive) .....	
<b>TOTAL</b> This Period (Exempt Activities) .....	
<b>TOTAL</b> This Period (Direct Fundraising) .....	
<b>TOTAL</b> This Period (Direct Candidate Support) .....	
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	
<b>TOTAL</b> This Period (Total Amount Transferred) .....	

**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 RPNM Allocation Transfers PO Box 940-83	DATE OF RECEIPT M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 0 6	TOTAL AMOUNT TRANSFERRED 6422.00
--	---	-------------------------------------

BREAKDOWN OF TRANSFER RECEIVED		
<b>i) Total Administrative</b> .....		6422.00 Transaction ID: H360919.C67809
<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) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising .....		
<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) .....	14357.00
<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) .....	0.00
<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) .....	14357.00

**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)**  
McMillan New Mexico Heritage Foundatio

Mailing Address  
500 4th St NW Ste 1000

City State Zip Code  
Albuquerque NM 87102-2186

Purpose of Disbursement:  
Rent - Aug

Activity or Event Identifier:  
ADMINISTRATION B 311

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  
139511.31

Date 08 / 01 / 2006  
Transaction ID: H460818.E10128

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
546.00		2054.00		2600.00

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

Mailing Address  
4500 Osuna Rd NE Ste 200

City State Zip Code  
Albuquerque NM 87109-4471

Purpose of Disbursement:  
Printing booklets

Activity or Event Identifier:  
ADMINISTRATION B 311

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  
139638.90

Date 08 / 02 / 2006  
Transaction ID: H460818.E10129

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
26.79		100.80		127.59

**C. Full Name (Last, First, Middle Initial)**  
Huckaby, Davis & Associates, Inc.

Mailing Address  
228 S Washington St Ste 115

City State Zip Code  
Alexandria VA 22314-5404

Purpose of Disbursement:  
Political Consulting

Activity or Event Identifier:  
ADMINISTRATION B 311

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  
139954.09

Date 08 / 08 / 2006  
Transaction ID: H460818.E10145

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
66.19		249.00		315.19

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
638.98		2403.80		3042.78

**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

**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)**  
HSBC Business Solutions  
**Mailing Address**  
PO Box 5219  
**City** Carol Stream **State** IL **Zip Code** 60197-5219  
**Purpose of Disbursement:**  
Office supplies  
**Activity or Event Identifier:**  
ADMINISTRATION B 311

**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**  
140997.72  
**Date** 08 / 08 / 2006  
**Transaction ID:** H460818.E10146

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.91		29.74		37.65

**B. Full Name (Last, First, Middle Initial)**  
Ms. Stephanie Carroll  
**Mailing Address**  
7627 Jackrabbit St NE  
**City** Albuquerque **State** NM **Zip Code** 87113-2088  
**Purpose of Disbursement:**  
Computer Consulting  
**Activity or Event Identifier:**  
ADMINISTRATION B 311

**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**  
141116.47  
**Date** 08 / 08 / 2006  
**Transaction ID:** H460818.E10147

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
24.94		93.81		118.75

**C. Full Name (Last, First, Middle Initial)**  
Postmaster  
**Mailing Address**  
1135 Broadway Blvd NE  
**City** Albuquerque **State** NM **Zip Code** 87101-9996  
**Purpose of Disbursement:**  
Permit for bulk mail (PI #786)  
**Activity or Event Identifier:**  
ADMINISTRATION B 311

**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**  
140114.09  
**Date** 08 / 08 / 2006  
**Transaction ID:** H460818.E10148

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
33.60		126.40		160.00

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
66.45		249.95		316.40

**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

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

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

<b>A. Full Name (Last, First, Middle Initial)</b> Howard & Koval, PC			<b>Type of Allocated Activity:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 30850			Allocated Activity or Event Year-To-Date 140960.07	
City	State	Zip Code	Category/ Type	
Albuquerque	NM	87190-0850		
Purpose of Disbursement: Accounting Services			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 08 / 08 / 2006	
Activity or Event Identifier: ADMINISTRATION B 311			Transaction ID: H460818.E10149	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
112.22		422.16		534.38

<b>B. Full Name (Last, First, Middle Initial)</b> LexisNexis			<b>Type of Allocated Activity:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 894166			Allocated Activity or Event Year-To-Date 141326.47	
City	State	Zip Code	Category/ Type	
Los Angeles	CA	90189-4166		
Purpose of Disbursement: On-line Subscription			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 08 / 10 / 2006	
Activity or Event Identifier: ADMINISTRATION B 311			Transaction ID: H460818.E10158	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
44.10		165.90		210.00

<b>C. Full Name (Last, First, Middle Initial)</b> Marta Kramer			<b>Type of Allocated Activity:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 800			Allocated Activity or Event Year-To-Date 142629.02	
City	State	Zip Code	Category/ Type	
Cedar Crest	NM	87008-0800		
Purpose of Disbursement: REIMBURSEMENT:SEE BELOW MK-3			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 08 / 14 / 2006	
Activity or Event Identifier: ADMINISTRATION B 311			Transaction ID: H460818.E10167	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
273.54		1029.01		1302.55

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
429.86		1617.07		2046.93

**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

# 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)**  
Republican National Committee

Mailing Address  
310 1st St SE

City	State	Zip Code
Washington	DC	20003-1885

Purpose of Disbursement:  
Meals MK-3

Activity or Event Identifier:  
ADMINISTRATION B 311  
**[MEMO ITEM]**Meals MK-3

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  
50.00

Date  /  /   
**Transaction ID:** H460818.E10182

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.50		39.50		50.00

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

Mailing Address  
PO Box 800

City	State	Zip Code
Cedar Crest	NM	87008-0800

Purpose of Disbursement:  
Food & taxis MK-3

Activity or Event Identifier:  
ADMINISTRATION B 311  
**[MEMO ITEM]**Food & taxis MK-3

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  
58.30

Date  /  /   
**Transaction ID:** H460818.E10181

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.24		46.06		58.30

**C. Full Name (Last, First, Middle Initial)**  
Delta Airlines

Mailing Address  
PO Box 20706

City	State	Zip Code
Atlanta	GA	30320-6001

Purpose of Disbursement:  
Air fare MK-3

Activity or Event Identifier:  
ADMINISTRATION B 311  
**[MEMO ITEM]**Air fare MK-3

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  
561.65

Date  /  /   
**Transaction ID:** H460818.E10180

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
117.95		443.70		561.65

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**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

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

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

<b>A. Full Name (Last, First, Middle Initial)</b> Crowne Plaza Minneapolis			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 5401 Green Valley Dr			Allocated Activity or Event Year-To-Date 632.60																						
City	State	Zip Code	Date <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>8</td><td>/</td><td>1</td><td>4</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table> Transaction ID: H460818.E10183			M	M	/	D	D	/	Y	Y	Y	Y	0	8	/	1	4	/	2	0	0	6
M	M	/				D	D	/	Y	Y	Y	Y													
0	8	/	1	4	/	2	0	0	6																
Minneapolis	MN	55437-1002																							
Purpose of Disbursement: Hotel MK-3			Category/ Type																						
Activity or Event Identifier: ADMINISTRATION B 311 [MEMO ITEM] Hotel MK-3																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
132.85		499.75		632.60

<b>B. Full Name (Last, First, Middle Initial)</b> EFTPS			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address PO Box 2527			Allocated Activity or Event Year-To-Date 145840.97																						
City	State	Zip Code	Date <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>8</td><td>/</td><td>1</td><td>5</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table> Transaction ID: H460818.E10187			M	M	/	D	D	/	Y	Y	Y	Y	0	8	/	1	5	/	2	0	0	6
M	M	/				D	D	/	Y	Y	Y	Y													
0	8	/	1	5	/	2	0	0	6																
Santa Fe	NM	87504-2527																							
Purpose of Disbursement: 941 taxes			Category/ Type																						
Activity or Event Identifier: ADMINISTRATION B 311																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
260.24		979.01		1239.25

<b>C. Full Name (Last, First, Middle Initial)</b> Mr. Armando Gonzalez			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 4414 Gibbs Rd SW			Allocated Activity or Event Year-To-Date 144601.72																						
City	State	Zip Code	Date <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>8</td><td>/</td><td>1</td><td>5</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table> Transaction ID: H460818.E10193			M	M	/	D	D	/	Y	Y	Y	Y	0	8	/	1	5	/	2	0	0	6
M	M	/				D	D	/	Y	Y	Y	Y													
0	8	/	1	5	/	2	0	0	6																
Albuquerque	NM	87105-6407																							
Purpose of Disbursement: Office cleaning			Category/ Type																						
Activity or Event Identifier: ADMINISTRATION B 311																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
21.00		79.00		100.00

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
281.24		1058.01		1339.25

**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

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

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

<b>A. Full Name (Last, First, Middle Initial)</b> Penny Rose			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 6529 Esther Ave NE			Allocated Activity or Event Year-To-Date 146674.30																						
City Albuquerque	State NM	Zip Code 87109-3655	Date <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>8</td><td>/</td><td>1</td><td>5</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	8	/	1	5	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y																
0	8	/	1	5	/	2	0	0	6																
Purpose of Disbursement: Party Fundraising consultant			Category/Type																						
Activity or Event Identifier: ADMINISTRATION B 311			Transaction ID: H460818.E10197																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
175.00		658.33		833.33

<b>B. Full Name (Last, First, Middle Initial)</b> Marta Kramer			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address PO Box 800			Allocated Activity or Event Year-To-Date 144501.72																						
City Cedar Crest	State NM	Zip Code 87008-0800	Date <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>8</td><td>/</td><td>1</td><td>5</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	8	/	1	5	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y																
0	8	/	1	5	/	2	0	0	6																
Purpose of Disbursement: Salary			Category/Type																						
Activity or Event Identifier: ADMINISTRATION B 311			Transaction ID: H460818.E10199																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
393.27		1479.43		1872.70

<b>C. Full Name (Last, First, Middle Initial)</b> Jonah Cohen			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 6805 Prairie Rd NE Apt 522			Allocated Activity or Event Year-To-Date 147981.68																						
City Albuquerque	State NM	Zip Code 87109-1953	Date <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>8</td><td>/</td><td>1</td><td>5</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	8	/	1	5	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y																
0	8	/	1	5	/	2	0	0	6																
Purpose of Disbursement: Salary			Category/Type																						
Activity or Event Identifier: ADMINISTRATION B 311			Transaction ID: H460818.E10200																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
274.55		1032.83		1307.38

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
842.82		3170.59		4013.41

**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

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

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

<b>A. Full Name (Last, First, Middle Initial)</b> PNM			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 349			Allocated Activity or Event Year-To-Date 149224.66		
City Albuquerque	State NM	Zip Code 87103-0349	Date <input type="text" value="08"/> / <input type="text" value="18"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Utilities - Gas & Elec.			Transaction ID: H460919.E10238		
Activity or Event Identifier: ADMINISTRATION B 311					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
9.08		34.15		43.23

<b>B. Full Name (Last, First, Middle Initial)</b> Computer Corner			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 4410 Menaul Blvd NE			Allocated Activity or Event Year-To-Date 149368.93		
City Albuquerque	State NM	Zip Code 87110-2952	Date <input type="text" value="08"/> / <input type="text" value="18"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Computer service			Transaction ID: H460919.E10239		
Activity or Event Identifier: ADMINISTRATION B 311					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
30.30		113.97		144.27

<b>C. Full Name (Last, First, Middle Initial)</b> Southwest Technology Associates, Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 740 San Mateo Blvd NE Ste A3			Allocated Activity or Event Year-To-Date 149181.43		
City Albuquerque	State NM	Zip Code 87108-1457	Date <input type="text" value="08"/> / <input type="text" value="18"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Computer Consulting			Transaction ID: H460919.E10240		
Activity or Event Identifier: ADMINISTRATION B 311					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
85.94		323.28		409.22

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
125.32		471.40		596.72

**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

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

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

<b>A. Full Name (Last, First, Middle Initial)</b> Dish Network			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address Dept 0063			Allocated Activity or Event Year-To-Date 148023.66		
City Palatine	State IL	Zip Code 60055-0001	Date <input type="text" value="08"/> / <input type="text" value="18"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Equipment Rental			Transaction ID: H460919.E10241		
Activity or Event Identifier: ADMINISTRATION B 311					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.82		33.16		41.98

<b>B. Full Name (Last, First, Middle Initial)</b> Xspedius Communications			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 8115 Innovation Way			Allocated Activity or Event Year-To-Date 148772.21		
City Chicago	State IL	Zip Code 60682-0081	Date <input type="text" value="08"/> / <input type="text" value="18"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Telephone			Transaction ID: H460919.E10242		
Activity or Event Identifier: ADMINISTRATION B 311					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
157.20		591.35		748.55

<b>C. Full Name (Last, First, Middle Initial)</b> Word Productions LLC			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 10405 Delicado PI NE			Allocated Activity or Event Year-To-Date 150152.06		
City Albuquerque	State NM	Zip Code 87111-1708	Date <input type="text" value="08"/> / <input type="text" value="21"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Printing			Transaction ID: H460919.E10248		
Activity or Event Identifier: ADMINISTRATION B 311					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
164.46		618.67		783.13

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
330.48		1243.18		1573.66

**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

**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)**  
Taxation & Revenue Department

Mailing Address  
PO Box 25128

City Santa Fe	State NM	Zip Code 87504-5128	006
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Purpose of Disbursement:  
CRS - July 2006

Activity or Event Identifier:  
ADMINISTRATION B 311

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  
140425.69

Date  M  M /  D  D /  Y  Y  Y  Y  
08 / 08 / 2006

Transaction ID: H460919.E10269

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
65.44		246.16		311.60

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

Mailing Address  
PO Box 2527

City Santa Fe	State NM	Zip Code 87504-2527	
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Purpose of Disbursement:  
941 taxes

Activity or Event Identifier:  
ADMINISTRATION B 311

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  
156974.99

Date  M  M /  D  D /  Y  Y  Y  Y  
08 / 31 / 2006

Transaction ID: H460919.E10282

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
260.24		979.02		1239.26

**C. Full Name (Last, First, Middle Initial)**  
Mr. Armando Gonzalez

Mailing Address  
4414 Gibbs Rd SW

City Albuquerque	State NM	Zip Code 87105-6407	
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Purpose of Disbursement:  
Office cleaning

Activity or Event Identifier:  
ADMINISTRATION B 311

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  
155735.73

Date  M  M /  D  D /  Y  Y  Y  Y  
08 / 31 / 2006

Transaction ID: H460919.E10288

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
21.00		79.00		100.00

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
346.68		1304.18		1650.86

**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

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

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

<b>A. Full Name (Last, First, Middle Initial)</b> Pitney Bowes Purchase Power			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 856042			Allocated Activity or Event Year-To-Date 151163.04		
City Louisville	State KY	Zip Code 40285-6042	Date <input type="text" value="08"/> / <input type="text" value="30"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Postage for meter			Transaction ID: H460919.E10293		
Activity or Event Identifier: ADMINISTRATION B 311			Category/ Type		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
212.31		798.67		1010.98

<b>B. Full Name (Last, First, Middle Initial)</b> Marta Kramer			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 800			Allocated Activity or Event Year-To-Date 155635.73		
City Cedar Crest	State NM	Zip Code 87008-0800	Date <input type="text" value="08"/> / <input type="text" value="31"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Salary			Transaction ID: H460919.E10295		
Activity or Event Identifier: ADMINISTRATION B 311			Category/ Type		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
393.26		1479.43		1872.69

<b>C. Full Name (Last, First, Middle Initial)</b> Jonah Cohen			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 6805 Prairie Rd NE Apt 522			Allocated Activity or Event Year-To-Date 159115.70		
City Albuquerque	State NM	Zip Code 87109-1953	Date <input type="text" value="08"/> / <input type="text" value="31"/> / <input type="text" value="2006"/>		
Purpose of Disbursement: Salary			Transaction ID: H460919.E10296		
Activity or Event Identifier: ADMINISTRATION B 311			Category/ Type		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
274.55		1032.83		1307.38

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
880.12		3310.93		4191.05

**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

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

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

<b>A. Full Name (Last, First, Middle Initial)</b> Penny Rose			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 6529 Esther Ave NE			Allocated Activity or Event Year-To-Date 157808.32		
City Albuquerque	State NM	Zip Code 87109-3655	Date M M / D D / Y Y Y Y 08 / 31 / 2006		
Purpose of Disbursement: Party Fundraising consultant			Transaction ID: H460919.E10309		
Activity or Event Identifier: ADMINISTRATION B 311					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
175.00		658.33		833.33

<b>B. Full Name (Last, First, Middle Initial)</b> McMillan New Mexico Heritage Foundatio			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 500 4th St NW Ste 1000			Allocated Activity or Event Year-To-Date 153763.04		
City Albuquerque	State NM	Zip Code 87102-2186	Date M M / D D / Y Y Y Y 08 / 30 / 2006		
Purpose of Disbursement: Rent - Sept			Transaction ID: H460919.E10350		
Activity or Event Identifier: ADMINISTRATION B 311					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
546.00		2054.00		2600.00

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
721.00		2712.33		3433.33

**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
4662.95		17541.44		22204.39

**SCHEDULE H5 (FEC Form 3X)  
 TRANSFERS OF LEVIN FUNDS FOR  
 SHARED FEDERAL ELECTION ACTIVITY**

(To be used by State, District and Local Party Committees Only)

NAME OF COMMITTEE (In Full)

Republican Campaign Committee of New Mexico

NAME OF ACCOUNT

RPNM Allocation Transfers PO Box 94-083

DATE OF RECEIPT

M M / D D / Y Y Y Y  
 0 8 / 1 0 / 2 0 0 6

TOTAL AMOUNT TRANSFERRED

292.00

Transaction ID: 60818.C67618H519

BREAKDOWN OF THIS TRANSFER

**i) Voter Registration**

Total Amount Transferred for Voter Registration.....

VOTER REGISTRATION

292.00

**ii) Voter ID**

Total Amount Transferred for Voter ID.....

VOTER ID

.00

**iii) GOTV**

Total Amount Transferred for GOTV.....

GOTV

.00

**iv) Generic Campaign Activity**

Total Amount Transferred for Generic Campaign Activity.....

GENERIC CAMPAIGN ACTIVITY

.00

NAME OF ACCOUNT

RPNM Allocation Transfers PO Box 94-083

DATE OF RECEIPT

M M / D D / Y Y Y Y  
 0 8 / 2 1 / 2 0 0 6

TOTAL AMOUNT TRANSFERRED

291.00

Transaction ID: 60919.C67759H520

BREAKDOWN OF THIS TRANSFER

**i) Voter Registration**

Total Amount Transferred for Voter Registration.....

VOTER REGISTRATION

291.00

**ii) Voter ID**

Total Amount Transferred for Voter ID.....

VOTER ID

.00

**iii) GOTV**

Total Amount Transferred for GOTV.....

GOTV

.00

**iv) Generic Campaign Activity**

Total Amount Transferred for Generic Campaign Activity.....

GENERIC CAMPAIGN ACTIVITY

.00

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED (Last Page Only)**

TOTAL This Period (Voter Registration).....

583.00

TOTAL This Period (Voter ID).....

0.00

TOTAL This Period (GOTV).....

0.00

TOTAL This Period (Generic Campaign Activity).....

0.00

TOTAL This Period (Total Amount of Transfers Received).....

583.00

**SCHEDULE H6 (FEC Form 3X)  
DISBURSEMENTS OF FEDERAL AND LEVIN FUNDS  
FOR SHARED FEDERAL ELECTION ACTIVITY**  
(To be used by State, District and Local Party Committees Only)

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

<b>A. Full Name (Last ,First, Middle Initial) / Full Organization Name</b> Mary Ann Spiller			Type of Allocated Activity or Event: <input checked="" type="checkbox"/> Voter Registration <input type="checkbox"/> GOTV <input type="checkbox"/> Voter ID <input type="checkbox"/> Generic Campaign	
Mailing Address 2813 Trevino Dr SE			Allocated Activity or Event Year-To-Date 11220.00	
City Rio Rancho	State NM	Zip Code 871242244	Date <input type="text" value="08"/> / <input type="text" value="02"/> / <input type="text" value="2006"/>	
Purpose of Disbursement VOTER REGISTRATION TABLE			Category/ Type	

FEDERAL SHARE	+	LEVIN SHARE	=	TOTAL AMOUNT
57.12		214.88		272.00

Transaction ID: 60818.E10130H620

<b>B. Full Name (Last ,First, Middle Initial) / Full Organization Name</b> Mary Ann Spiller			Type of Allocated Activity or Event: <input checked="" type="checkbox"/> Voter Registration <input type="checkbox"/> GOTV <input type="checkbox"/> Voter ID <input type="checkbox"/> Generic Campaign	
Mailing Address 2813 Trevino Dr SE			Allocated Activity or Event Year-To-Date 11316.00	
City Rio Rancho	State NM	Zip Code 871242244	Date <input type="text" value="08"/> / <input type="text" value="10"/> / <input type="text" value="2006"/>	
Purpose of Disbursement VOTER REGISTRATION TABLE			Category/ Type	

FEDERAL SHARE	+	LEVIN SHARE	=	TOTAL AMOUNT
20.16		75.84		96.00

Transaction ID: 60818.E10157H619

**SUBTOTAL** of Shared Federal and Levin Activity This Page

FEDERAL SHARE	+	LEVIN SHARE	=	TOTAL AMOUNT
77.28		290.72		368.00

**TOTAL** This Period (last page for each line only)(Federal share to 30(a)(i) and Levin share to 30(a)(ii))

FEDERAL SHARE		LEVIN SHARE		TOTAL AMOUNT

**TOTAL** This Period for the Levin Share

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**SCHEDULE H6 (FEC Form 3X)  
DISBURSEMENTS OF FEDERAL AND LEVIN FUNDS  
FOR SHARED FEDERAL ELECTION ACTIVITY**

(To be used by State, District and Local Party Committees Only)

NAME OF COMMITTEE (In Full)

Republican Campaign Committee of New Mexico

**A. Full Name (Last ,First, Middle Initial) / Full Organization Name**

Rio Arriba County Clerk

Type of Allocated Activity or Event:

Voter Registration  GOTV  
 Voter ID  Generic Campaign

Mailing Address  
PO Box 158

Allocated Activity or Event Year-To-Date

11391.00

City State Zip Code  
Tierra Amarilla NM 875750158

Purpose of Disbursement  
VOTER LIST

Category/  
Type

Date  /  /

FEDERAL SHARE + LEVIN SHARE = TOTAL AMOUNT

15.75

59.25

75.00

Transaction ID: 60818.E10224H62

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

Mary Ann Spiller

Type of Allocated Activity or Event:

Voter Registration  GOTV  
 Voter ID  Generic Campaign

Mailing Address  
2813 Trevino Dr SE

Allocated Activity or Event Year-To-Date

11607.00

City State Zip Code  
Rio Rancho NM 871242244

Purpose of Disbursement  
VOTER REGISTRATION TABLE

Category/  
Type

Date  /  /

FEDERAL SHARE + LEVIN SHARE = TOTAL AMOUNT

45.36

170.64

216.00

Transaction ID: 60818.E10225H623

**SUBTOTAL** of Shared Federal and Levin Activity This Page

FEDERAL SHARE + LEVIN SHARE = TOTAL AMOUNT

61.11

229.89

291.00

**TOTAL** This Period (last page for each line only)(Federal share to 30(a)(i) and Levin share to 30(a)(ii))

FEDERAL SHARE

TOTAL AMOUNT

LEVIN SHARE

**TOTAL** This Period for the Levin Share

**SCHEDULE H6 (FEC Form 3X)  
DISBURSEMENTS OF FEDERAL AND LEVIN FUNDS  
FOR SHARED FEDERAL ELECTION ACTIVITY**

(To be used by State, District and Local Party Committees Only)

NAME OF COMMITTEE (In Full) Republican Campaign Committee of New Mexico
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<b>A. Full Name (Last, First, Middle Initial) / Full Organization Name</b> Luna County Clerk			Type of Allocated Activity or Event: <input checked="" type="checkbox"/> Voter Registration <input type="checkbox"/> GOTV <input type="checkbox"/> Voter ID <input type="checkbox"/> Generic Campaign	
Mailing Address PO Box 1838			Allocated Activity or Event Year-To-Date 11684.67	
City Deming	State NM	Zip Code 880311838	Date <input type="text" value="08"/> / <input type="text" value="17"/> / <input type="text" value="2006"/>	
Purpose of Disbursement VOTER LIST			Category/ Type	

FEDERAL SHARE	+	LEVIN SHARE	=	TOTAL AMOUNT
16.31		61.36		77.67

Transaction ID: 60818.E10227H63

<b>SUBTOTAL</b> of Shared Federal and Levin Activity This Page				
FEDERAL SHARE	+	LEVIN SHARE	=	TOTAL AMOUNT
16.31		61.36		77.67
<b>TOTAL</b> This Period (last page for each line only)(Federal share to 30(a)(i) and Levin share to 30(a)(ii))				
FEDERAL SHARE		LEVIN SHARE		TOTAL AMOUNT
154.70		581.97		736.67
<b>TOTAL</b> This Period for the Levin Share				

Form/Schedule: **F3XA**

Transaction ID: **C00020818**

The committee maintains a separate Levin account which was established solely for the receipt of Levin funds for Federal Election Activity according to 11 CFR 300.30. The phrase Voter registration table in the purpose field on H6 and 30b is generic in nature and does not support any federal candidate or any other Federal Election Activity. The individuals who maintain these tables are not employees of the committee and therefore not subject to 11 CFR 300.33(c)(2). The committee does not use any national party transfers to fund Federal Election Activity. The party utilizes a strict accounting method to ensure that national party transfers are being used only for permissible administrative and overhead expenses. This accounting method also guarantees that all Federal Election Activity is being funded by contributions raised under the limitations and prohibitions of the Federal Election Campaign Act, as amended. The employees reported on H4 do not spend more than 25% of their time on federal election activity and therefore are not subject to 11 CFR 300.33(c)(2). The payments to individuals for office cleaning and computer consulting reported on H4 are not employees of the committee and therefore are not subject to 11 CFR 300.33(c)(2). The petty cash disbursements account is used for cash expenditures which do not exceed \$100.00 to any person or purchase transaction. No disbursements are made for candidates.