

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Friends of Michelle

ADDRESS (number and street)

P.O. Box 25422

Check if different than previously reported. (ACC)

Albuquerque

NM

87108

2. FEC IDENTIFICATION NUMBER ▼

C C00501254

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

NM

01

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)

Termination Report (TER)

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

- Primary (12P)
- General (12G)
- Runoff (12R)
- Convention (12C)
- Special (12S)

Election on / / in the State of

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

- General (30G)
- Runoff (30R)
- Special (30S)

Election on / / in the State of

5. Covering Period

/ /

through

/ /

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 Ms. Jeannine L. Daniels

Signature of Treasurer Ms. Jeannine L. Daniels

[Electronically Filed]

Date

/ /

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

Office Use Only

FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Friends of Michelle

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	23251.17	28086.18
(b) Total Contribution Refunds (from Line 20(d))	900.00	900.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	22351.17	27186.18
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	39412.31	97397.83
(b) Total Offsets to Operating Expenditures (from Line 14).....	30980.28	30980.28
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	8432.03	66417.55
8. Cash on Hand at Close of Reporting Period (from Line 27).....	9693.01	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	35250.89	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Friends of Michelle

Report Covering the Period: From: / / To: / /

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	3450.01	3650.02
(ii) Unitemized.....	301.16	436.16
(iii) TOTAL of contributions from individuals ▶	3751.17	4086.18
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	19500.00	24000.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	23251.17	28086.18
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....		
	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....		
	30980.28	30980.28
15. OTHER RECEIPTS (Dividends, Interest, etc.).....		
	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	54231.45	59066.46

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	39412.31	97397.83
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	20000.00	20000.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	20000.00	20000.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	900.00	900.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	900.00	900.00
21. OTHER DISBURSEMENTS	0.00	75.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	60312.31	118372.83

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	15773.87
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	54231.45
25. SUBTOTAL (add Line 23 and Line 24).....	70005.32
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	60312.31
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	9693.01

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 26
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Friends of Michelle

A. Full Name (Last, First, Middle Initial)
William Benson

Mailing Address 1038 Henryton Rd.

City Marriottsville State MD Zip Code 21104

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

Name of Employer Self Employed Occupation Public Policy Consultant

Receipt For: 2012
 Primary General
 Other (specify) Debt Primary

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 30 / 2012

Transaction ID : C9644533

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mickey Ibarra

Mailing Address 1140 Connecticut Ave NW Ste 1100

City Washington State DC Zip Code 20036-4007

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

Name of Employer Ibarra Strategy Group Occupation Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 30 / 2012

Transaction ID : C9640319

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Anthony K Tanner

Mailing Address PO Box 3038

City Gallup State NM Zip Code 87305

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

Name of Employer T & R Market Occupation Business Owner

Receipt For: 2012
 Primary General
 Other (specify) Debt Primary

Election Cycle-to-Date
1500.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 01 / 2012

Transaction ID : C9657672

Amount of Each Receipt this Period
1500.00

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

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 26
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Michelle

A. Full Name (Last, First, Middle Initial)
Bernard Toon

Mailing Address 420 7th St NW
Apt 607

City Washington State DC Zip Code 20004-2212

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

Name of Employer The First Group Occupation Principal

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 05 / 2012

Transaction ID : C9650803

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Parris P McBride-Martin

Mailing Address 102 San Salvador

City Santa Fe State NM Zip Code 87501

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

Name of Employer G. Martin Occupation Personal assistant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.02

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 11 / 2012

Transaction ID : C9675539A

Amount of Each Receipt this Period
200.01

* Earmarked Contribution: See Below

C. Full Name (Last, First, Middle Initial)
ActBlue Technical Services

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

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

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
201.17

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 11 / 2012

Transaction ID : C9675539AB

Amount of Each Receipt this Period
200.01

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

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

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

1200.01

3450.01

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 26
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Michelle

A. Full Name (Last, First, Middle Initial)
American Federation of Teachers

Mailing Address **555 NEW JERSEY AVENUE, NW**

City **WASHINGTON** State **DC** Zip Code **20001**

FEC ID number of contributing federal political committee. **C C00028860**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify) Debt Primary

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 31 / 2012

Transaction ID : C9670115

Amount of Each Receipt this Period

5000.00

B. Full Name (Last, First, Middle Initial)
HONEYWELL INTERNATIONAL POLITICAL ACTION COMMITTEE

Mailing Address **101 CONSTITUTION AVE. NW
SUITE 500 WEST**

City **WASHINGTON** State **DC** Zip Code **20001**

FEC ID number of contributing federal political committee. **C C00096156**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify) Debt Primary

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 24 / 2012

Transaction ID : C9662007

Amount of Each Receipt this Period

2000.00

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

Mailing Address **16011 NE 36TH WAY
BOX 97017**

City **REDMOND** State **WA** Zip Code **98073**

FEC ID number of contributing federal political committee. **C C00227546**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify) Debt Primary

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 20 / 2012

Transaction ID : C9662004

Amount of Each Receipt this Period

1000.00

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

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

8000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 26
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Michelle

Full Name (Last, First, Middle Initial)
NATIONAL CABLE AND TELECOMMUNICATIONS ASSOCIATION POLITICAL ACTION COMMITTEE (NCTA PAC)

A. Mailing Address 25 MASSACHUSETTS AVENUE, NW #100

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00010082

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify) Debt Primary

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 24 / 2012

Transaction ID : C9662005

Amount of Each Receipt this Period
 1000.00

Full Name (Last, First, Middle Initial)
NEA FUND FOR CHILDREN AND PUBLIC EDUCATION

B. Mailing Address 1201 16TH STREET NW STE 420

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00003251

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify) Debt Primary

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 18 / 2012

Transaction ID : C9662000

Amount of Each Receipt this Period
 5000.00

Full Name (Last, First, Middle Initial)
PFIZER INC PAC

C. Mailing Address 235 EAST 42ND STREET

City NEW YORK State NY Zip Code 10017

FEC ID number of contributing federal political committee. **C** C00016683

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify) Debt Primary

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 12 / 18 / 2012

Transaction ID : C9662006

Amount of Each Receipt this Period
 1000.00

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

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

7000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 26
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Michelle

A. Full Name (Last, First, Middle Initial)
SIERRA CLUB POLITICAL COMMITTEE

Mailing Address 85 SECOND STREET 2ND FLR.

City State Zip Code
SAN FRANCISCO CA 94105

FEC ID number of contributing federal political committee. **C** C00135368

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify) Debt Primary

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 18 / 2012

Transaction ID : C9662003

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
The Service Master Co. PAC

Mailing Address 860 RIDGE LAKE BOULEVARD

City State Zip Code
MEMPHIS TN 38120

FEC ID number of contributing federal political committee. **C** C00331363

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify) Debt Primary

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 17 / 2012

Transaction ID : C9662002

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
UNITED MINE WORKERS OF AMERICA - COAL MINERS POLITICAL ACTION COMMITTEE

Mailing Address 18354 QUANTICO GATEWAY DR
SUITE 200

City State Zip Code
TRIANGLE VA 22172

FEC ID number of contributing federal political committee. **C** C00013342

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify) Debt Primary

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 14 / 2012

Transaction ID : C9661999

Amount of Each Receipt this Period
1000.00

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

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

4500.00

19500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 26
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Michelle

A. Full Name (Last, First, Middle Initial)
The New Media Firm. Inc.

Mailing Address 1730 Rhode Island Ave, NW
Suite 410

City Washington State DC Zip Code 20036

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
30980.28

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2012

Transaction ID : C9644877

Amount of Each Receipt this Period
30980.28

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

30980.28

30980.28

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 26			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Michelle

Full Name (Last, First, Middle Initial) A. American Airline		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2012
Mailing Address PO Box 200025		Amount of Each Disbursement this Period 556.20 Transaction ID : D675333
City El Paso	State TX	
Zip Code 88520	Purpose of Disbursement Travel - Airline Ticket	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) B. American Airline		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2012
Mailing Address PO Box 200025		Amount of Each Disbursement this Period 556.20 Transaction ID : D675334
City El Paso	State TX	
Zip Code 88520	Purpose of Disbursement Travel - Airline Ticket	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) C. American Airline		Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2012
Mailing Address PO Box 200025		Amount of Each Disbursement this Period 502.40 Transaction ID : D675341
City El Paso	State TX	
Zip Code 88520	Purpose of Disbursement Travel - Airline Ticket	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	1614.80
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 26			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Michelle

Full Name (Last, First, Middle Initial) A. American Airline		Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2012
Mailing Address PO Box 200025		Amount of Each Disbursement this Period 150.00 Transaction ID : D675344
City El Paso	State TX	
Zip Code 88520	Purpose of Disbursement Travel - Airline Ticket Change Fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Ben Michael's Cafe		Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2012
Mailing Address 2404 Pueblo Bonito Court NW		Amount of Each Disbursement this Period 747.24 Transaction ID : D673103
City Albuquerque	State NM	
Zip Code 87104	Purpose of Disbursement Food for Volunteer Appreciation Event	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Ben Michael's Cafe		Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2012
Mailing Address 2404 Pueblo Bonito Court NW		Amount of Each Disbursement this Period 173.16 Transaction ID : D673104
City Albuquerque	State NM	
Zip Code 87104	Purpose of Disbursement Volunteer Appreciation Event Entertainment	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1070.40
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 26			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Michelle

Full Name (Last, First, Middle Initial) A. CenturyLink		Date of Disbursement M M / D D / Y Y Y Y 11 / 27 / 2012
Mailing Address PO Box 29040		Amount of Each Disbursement this Period 231.38
City Phoenix	State AZ	
Zip Code 85038	Purpose of Disbursement Phone & Internet	Transaction ID : D664715
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. FedEx Office Print & Ship Center		Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2012
Mailing Address 2706 Central Ave, SE		Amount of Each Disbursement this Period 256.48
City Albuquerque	State NM	
Zip Code 87102	Purpose of Disbursement Printing	Transaction ID : D675345
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. First Data USA		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2012
Mailing Address 5565 Glenridge Connector NE, Suite		Amount of Each Disbursement this Period 718.12
City Atlanta	State GA	
Zip Code 30342	Purpose of Disbursement Online Credit Card Processing Fee	Transaction ID : D675335
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1205.98
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 26			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Michelle

Full Name (Last, First, Middle Initial) A. First Data USA		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2012
Mailing Address 5565 Glenridge Connector NE, Suite		Amount of Each Disbursement this Period 40.06
City Atlanta	State GA Zip Code 30342	
Purpose of Disbursement Online Credit Card Processing Fee		Transaction ID : D675336
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) B. Dominic Pius Gabello		Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2012
Mailing Address 1919 Ridgecrest Dr, SE #302		Amount of Each Disbursement this Period 4500.00
City Albuquerque	State NM Zip Code 87108	
Purpose of Disbursement Payroll		Transaction ID : D667649
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) c. Gilbert Gallegos		Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2012
Mailing Address 1005 Diamondback Dr, NE		Amount of Each Disbursement this Period 3500.00
City Albuquerque	State NM Zip Code 87113	
Purpose of Disbursement Payroll		Transaction ID : D667648
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	8040.06
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 26			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Michelle

Full Name (Last, First, Middle Initial) A. Johnny's Half Shell		Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2012
Mailing Address 400 North Capital St NW		Amount of Each Disbursement this Period 500.00
City Washington State DC Zip Code 20001	Purpose of Disbursement Event Fee Deposit	
Candidate Name	Category/Type	Transaction ID : D675343
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Noah Kaplan		Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2012
Mailing Address 1854 Grove St.		Amount of Each Disbursement this Period 2000.00
City Sarasota State FL Zip Code 34239	Purpose of Disbursement Payroll	
Candidate Name	Category/Type	Transaction ID : D667647
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. MGB Development, LLC		Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2012
Mailing Address PO Box 15748		Amount of Each Disbursement this Period 13000.00
City Washington State DC Zip Code 20003	Purpose of Disbursement Fundraising Consultant	
Candidate Name	Category/Type	Transaction ID : D667644
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	15500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 26			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Michelle

Full Name (Last, First, Middle Initial) A. NGP VAN Inc		Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2012
Mailing Address 1101 15th Street, NW Suite 500		Amount of Each Disbursement this Period 2100.00
City Washington	State DC	
Zip Code 20005	Purpose of Disbursement Database	Transaction ID : D667646
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2012
Mailing Address 5001 Cutler Ave NE		Amount of Each Disbursement this Period 72.41
City Albuquerque	State NM	
Zip Code 87110-4079	Purpose of Disbursement Office Supplies	Transaction ID : D675346
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2012
Mailing Address 5001 Cutler Ave NE		Amount of Each Disbursement this Period 153.78
City Albuquerque	State NM	
Zip Code 87110-4079	Purpose of Disbursement Office Supplies	Transaction ID : D675347
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2326.19
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 26			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Michelle

Full Name (Last, First, Middle Initial) A. Pennysmiths Paper		Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2012
Mailing Address 4022 Rio Grande Blvd. NW		Amount of Each Disbursement this Period 247.17
City Albuquerque	State NM	
Zip Code 87107	Purpose of Disbursement Paper and Envelopes	Transaction ID : D675342
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Peony Events, LLC		Date of Disbursement M M / D D / Y Y Y Y 11 / 27 / 2012
Mailing Address 7220 Loma del Norte NE		Amount of Each Disbursement this Period 1250.00
City Albuquerque	State NM	
Zip Code 87109	Purpose of Disbursement Event Planning Services	Transaction ID : D664713
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. The Payroll Company, Inc.		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2012
Mailing Address 10433 Montgomery Pkwy NE Ste 100		Amount of Each Disbursement this Period 1195.15
City Albuquerque	State NM	
Zip Code 87111-3831	Purpose of Disbursement Payroll Taxes	Transaction ID : D664872
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2692.32
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 26			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Michelle

Full Name (Last, First, Middle Initial) A. The Payroll Company, Inc.		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2012
Mailing Address 10433 Montgomery Pkwy NE Ste 100		Amount of Each Disbursement this Period 61.90
City Albuquerque	State NM	
Zip Code 87111-3831	Purpose of Disbursement Payroll Processing Fee	Transaction ID : D664873
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. United Airlines		Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2012
Mailing Address 77 West Wacker Drive		Amount of Each Disbursement this Period 780.80
City Chicago	State IL	
Zip Code 60601	Purpose of Disbursement Travel - Airline Ticket	Transaction ID : D675339
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. US Airways		Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2012
Mailing Address 4000 E. Sky Harbor Blvd.		Amount of Each Disbursement this Period 234.72
City Phoenix	State AZ	
Zip Code 85034	Purpose of Disbursement Travel - Airline Ticket	Transaction ID : D675340
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1077.42
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 26			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Michelle

Full Name (Last, First, Middle Initial) A. Utrecht & Phillips, PLLC		Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2012
Mailing Address 1900 M Street, NW Suite 500		Amount of Each Disbursement this Period 687.00
City Washington	State DC	
Zip Code 20036	Purpose of Disbursement Legal services	Transaction ID : D667645
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. The Payroll Company, Inc.		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2012
Mailing Address 10433 Montgomery Pkwy NE Ste 100		Amount of Each Disbursement this Period 4357.20
City Albuquerque	State NM	
Zip Code 87111-3831	Purpose of Disbursement Payroll, See Below	Transaction ID : D664791
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Dominic Pius Gabello		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2012
Mailing Address 1919 Ridgecrest Dr, SE #302		Amount of Each Disbursement this Period 1815.10
City Albuquerque	State NM	
Zip Code 87108	Purpose of Disbursement Payroll	Transaction ID : D664819
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5044.20
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 20 OF 26	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Michelle

Full Name (Last, First, Middle Initial) A. Gilbert Gallegos		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2012
Mailing Address 1005 Diamondback Dr, NE		Amount of Each Disbursement this Period 1750.00
City Albuquerque	State NM	
Zip Code 87113	Purpose of Disbursement Payroll	Transaction ID : D664832
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. Noah Kaplan		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2012
Mailing Address 1854 Grove St.		Amount of Each Disbursement this Period 792.10
City Sarasota	State FL	
Zip Code 34239	Purpose of Disbursement Payroll	Transaction ID : D664839
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) c. Leticia Mederos		Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2012
Mailing Address 17117 Trundle Rd.		Amount of Each Disbursement this Period 491.38
City Dickerson	State MD	
Zip Code 20842	Purpose of Disbursement Travel Reimbursement - See Below	Transaction ID : D673107
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	491.38
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 26		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
Friends of Michelle

Full Name (Last, First, Middle Initial) A. American Airline		Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2012
Mailing Address PO Box 200025		Amount of Each Disbursement this Period 491.38
City El Paso	State TX	
Zip Code 88520	Purpose of Disbursement Airline Ticket	Transaction ID : D673112
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	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) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	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:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	39062.75

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 22 OF 26	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Michelle

Full Name (Last, First, Middle Initial) A. Hon. Michelle Lujan Grisham		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2012
Mailing Address 1001 Los Arboles Ave, NW		Amount of Each Disbursement this Period 11000.00 Transaction ID : D675331
City Albuquerque	State NM Zip Code 87107	
Purpose of Disbursement Repayment of Loan		Category/ Type
Candidate Name Michelle Lujan Grisham		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NM	District: 01	

Full Name (Last, First, Middle Initial) B. Hon. Michelle Lujan Grisham		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2012
Mailing Address 1001 Los Arboles Ave, NW		Amount of Each Disbursement this Period 9000.00 Transaction ID : D675332
City Albuquerque	State NM Zip Code 87107	
Purpose of Disbursement Repayment of Loan		Category/ Type
Candidate Name Michelle Lujan Grisham		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NM	District: 01	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement		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:	

SUBTOTAL of Disbursements This Page (optional).....	20000.00
TOTAL This Period (last page this line number only).....	20000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 26			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Friends of Michelle

Full Name (Last, First, Middle Initial) A. Ed R. Haskin Jr.		Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2012
Mailing Address 11115 San Francisco Rd NE		Amount of Each Disbursement this Period 900.00
City Albuquerque	State NM	
Zip Code 87122-3426	Purpose of Disbursement Refund Excess Contribution	Transaction ID : D667612
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	900.00
TOTAL This Period (last page this line number only).....	900.00

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Friends of Michelle

Transaction ID : L994

LOAN SOURCE Full Name (Last, First, Middle Initial)
Hon. Michelle Lujan Grisham PERS FUNDS

[PERSONAL FUNDS]

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
1001 Los Arboles Ave, NW

City State ZIP Code
Albuquerque NM 87107

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
20000.00 20000.00 0.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 12 / D 31 / Y 2011 M M / D D / Y 12/31/2014 none % (apr) Yes No

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

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)..... 0.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER: (check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
Friends of Michelle

Transaction ID : L1033

LOAN SOURCE Full Name (Last, First, Middle Initial)
Hon. Michelle Lujan Grisham PERS FUNDS

[PERSONAL FUNDS]

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
1001 Los Arboles Ave, NW

City State ZIP Code
Albuquerque NM 87107

Original Amount of Loan 60000.00	Cumulative Payment To Date 29000.00	Balance Outstanding at Close of This Period 31000.00
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TERMS

Date Incurred: M 05 / D 24 / Y 2012
Date Due: M / D / Y 12/31/2014
Interest Rate: 0.00 % (apr)
Secured: Yes No

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

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....	▶	[] 31000.00
TOTALS This Period (last page in this line only).....	▶	[] 31000.00

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

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 26 OF 26
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

Friends of Michelle

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Hon. Michelle Lujan Grisham

Mailing Address 1001 Los Arboles Ave, NW

City State Zip Code
 Albuquerque NM 87107

Nature of Debt (Purpose):
 Meals, travel, campaign expenses

Outstanding Balance Beginning This Period	Transaction ID : D629012	
<input type="text" value="4250.89"/>	Amount Incurred This Period	Payment This Period
	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
	Outstanding Balance at Close of This Period	<input type="text" value="4250.89"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="4250.89"/>
2) TOTALS This Period (last page this line number only)	<input type="text" value="4250.89"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text" value="31000.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="35250.89"/>