

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 36
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<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)
A. Mrs. Patricia Morlen

Mailing Address 1 Via Sole Drive

City Algodones State NM Zip Code 87001-8078

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

Name of Employer Retired Occupation Teacher

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **290**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
02 / 09 / 2012

Transaction ID : **SA11AI39435104329c**

Amount of Each Receipt this Period
180

Full Name (Last, First, Middle Initial)
B. Mrs. Patricia Morlen

Mailing Address 1 Via Sole Drive

City Algodones State NM Zip Code 87001-8078

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

Name of Employer Retired Occupation Teacher

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **290**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
02 / 27 / 2012

Transaction ID : **SA11AI39435104805c**

Amount of Each Receipt this Period
110

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

Mailing Address 2001 Hallum Street

City Clovis State NM Zip Code 88101-8685

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

Name of Employer Williams Insurance Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
02 / 22 / 2012

Transaction ID : **SA11AI39660104727c**

Amount of Each Receipt this Period
250

SUBTOTAL of Receipts This Page (optional).....▶	540.00
TOTAL This Period (last page this line number only).....▶	