

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
Republican Campaign Committee Of New Mexico

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

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

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report(Q1)  
 July 15 Quarterly Report(Q2)  
 October 15 Quarterly Report(Q3)  
 January 31 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12G)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post -Election** Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 09 01 2010 through 09 30 2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Bill Redmond

Signature of Treasurer Electronically Filed by Bill Redmond Date 04 05 2011

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

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

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

Write or Type Committee Name  
Republican Campaign Committee Of New Mexico

Report Covering the Period: From: 

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>X</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	X	Y	Y	Y	2	0	1	0		100184.75
X	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period .....	228688.42									
(c) Total Receipts (from Line 19) .....	201981.43	781558.63								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	430669.85	881743.38								
7. Total Disbursements (from Line 31) .....	150569.20	601642.73								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	280100.65	280100.65								
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	9

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	7095.00	146599.78
(ii) Unitemized .....	11221.58	136458.05
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	18316.58	283057.83
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	3300.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	18316.58	286357.83
12. Transfers From Affiliated/Other Party Committees .....	151321.00	285491.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	206.16
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	1.85	17.64
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	24172.00	176749.00
(b) Levin Funds (from Schedule H5) .....	8170.00	32737.00
(c) Total Transfer (add 18(a) and 18(b)).	32342.00	209486.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	201981.43	781558.63
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	169639.43	572072.63

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.....	4436.78	44407.43
(ii) Non-Federal Share.....	22641.64	177206.41
(b) Other Federal Operating Expenditures.....	16988.35	157271.82
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	44066.77	378885.66
22. Transfers to Affiliated/Other Party Committees.....	44043.50	71263.50
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	14000.00	24000.00
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 .....	1427.23	5765.23
(ii) "Levin" Share .....	8087.62	32669.62
(b) Federal Election Activity Paid Entirely With Federal Funds .....	38944.08	89058.72
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	48458.93	127493.57
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	150569.20	601642.73
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	119839.94	391766.70

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) .....	18316.58	286357.83
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	18316.58	286357.83
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	21425.13	201679.25
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	206.16
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	21425.13	201473.09

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 85  
(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Lou Gallegos

Mailing Address PO Box 15007

City State Zip Code  
Rio Rancho NM 87174-0007

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 ▼ 360.00

Date of Receipt  
MM / DD / YYYY  
09 / 22 / 2010

**Transaction ID:** SA11AI-10554-98936-c

Amount of Each Receipt this Period  
180.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Hans Steinhoff

Mailing Address PO Box 29

City State Zip Code  
Cloudcroft NM 88317-0029

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

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
MM / DD / YYYY  
09 / 23 / 2010

**Transaction ID:** SA11AI-11451-98988-c

Amount of Each Receipt this Period  
20.00

**C.**

Full Name (Last, First, Middle Initial)  
Mrs. Jessie (Sassy) Tinning

Mailing Address 1325 Cuba Avenue

City State Zip Code  
Alamogordo NM 88310-5727

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 ▼ 655.00

Date of Receipt  
MM / DD / YYYY  
09 / 02 / 2010

**Transaction ID:** SA11AI-1268-98629-c

Amount of Each Receipt this Period  
25.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **225.00**

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

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

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

FOR LINE NUMBER: PAGE 7 / 85  
(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)  
Mrs. Jessie (Sassy) Tinling  
Mailing Address 1325 Cuba Avenue  
City Alamogordo State NM Zip Code 88310-5727  
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 ▼ 655.00  
Date of Receipt 09 / 23 / 2010  
Transaction ID: SA11AI-1268-98973-c  
Amount of Each Receipt this Period 50.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Leilani Stevens  
Mailing Address 1710 N Lea Avenue  
City Roswell State NM Zip Code 88201-3337  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self-Employed Occupation Hairdresser  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 350.00  
Date of Receipt 09 / 08 / 2010  
Transaction ID: SA11AI-12716-98702-c  
Amount of Each Receipt this Period 150.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Susan Marts  
Mailing Address 7A Roy Crawford Lane  
City Santa Fe State NM Zip Code 87505-4576  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Santa Fe Recovery Center Occupation Therapist  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 380.00  
Date of Receipt 09 / 08 / 2010  
Transaction ID: SA11AI-12982-98697-c  
Amount of Each Receipt this Period 180.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 380.00  
**TOTAL** This Period (last page this line number only) ..... ▶

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

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

FOR LINE NUMBER: PAGE 8 / 85  
(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)  
Ms. Susan Marts

Mailing Address 7A Roy Crawford Lane

City State Zip Code  
Santa Fe NM 87505-4576

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

Name of Employer Occupation  
Santa Fe Recovery Center Therapist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 380.00

Date of Receipt  
MM / DD / YYYY  
09 / 22 / 2010

**Transaction ID:** SA11AI-12982-98941-c

Amount of Each Receipt this Period  
200.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Dolores Stevens

Mailing Address PO Box 1

City State Zip Code  
Hondo NM 88336-0001

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 ▼ 270.00

Date of Receipt  
MM / DD / YYYY  
09 / 08 / 2010

**Transaction ID:** SA11AI-16101-98703-c

Amount of Each Receipt this Period  
90.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Joe Wright

Mailing Address 393 Calle Colina

City State Zip Code  
Santa Fe NM 87501-1017

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 ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
09 / 23 / 2010

**Transaction ID:** SA11AI-17321-98997-c

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 340.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 85

(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Joe Wright

Mailing Address 393 Calle Colina

City State Zip Code  
Santa Fe NM 87501-1017

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

Name of Employer Occupation  
None Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 30 / 2010

Transaction ID: SA11AI-17321-99057-c

Amount of Each Receipt this Period  
50.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Jeffery Terranova

Mailing Address PO Box 1480

City State Zip Code  
Mesilla NM 88046-1480

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

Name of Employer Occupation  
F & A Dairy Products Inc President

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

Date of Receipt

M M / D D / Y Y Y Y  
09 / 08 / 2010

Transaction ID: SA11AI-19430-98717-c

Amount of Each Receipt this Period  
150.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Wayne Johnson

Mailing Address 2926 La Camila Road NE

City State Zip Code  
Albuquerque NM 87111-4510

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

Name of Employer Occupation  
Tucumcari Animal Hospital Senior Safety Coordinator

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 675.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 21 / 2010

Transaction ID: SA11AI-20533-98915-c

Amount of Each Receipt this Period  
15.00

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

215.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 85
	<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) Mr. William Manchester		Date of Receipt
	Mailing Address 3109 Palomas Circle		<input type="text" value="09"/> / <input type="text" value="08"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Farmington	NM	87401-4140
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer None		Occupation Retired	Transaction ID: SA11AI-2088-98696-c
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="230.00"/>	
		Amount of Each Receipt this Period	<input type="text" value="50.00"/>

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. William Manchester		Date of Receipt
	Mailing Address 3109 Palomas Circle		<input type="text" value="09"/> / <input type="text" value="23"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Farmington	NM	87401-4140
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer None		Occupation Retired	Transaction ID: SA11AI-2088-98985-c
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="230.00"/>	
		Amount of Each Receipt this Period	<input type="text" value="50.00"/>

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Kenneth Batson		Date of Receipt
	Mailing Address 518 E Abo Drive		<input type="text" value="09"/> / <input type="text" value="02"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Hobbs	NM	88240-3404
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Dixie Electric Co.		Occupation Manager	Transaction ID: SA11AI-20882-98630-c
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="370.00"/>	
		Amount of Each Receipt this Period	<input type="text" value="135.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="235.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 11 / 85  
(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)  
Mr. Charles 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 Self-Employed Occupation Attorney

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 590.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 02 / 2010

**Transaction ID:** SA11AI-20950-98645-c

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Bruce Larsen

Mailing Address 3229 Calle Celestial

City Santa Fe State NM Zip Code 87506-1213

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 ▼ 440.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 02 / 2010

**Transaction ID:** SA11AI-21134-98632-c

Amount of Each Receipt this Period  
200.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Richard Render

Mailing Address 1341 Oakhurst Road

City Clovis State NM Zip Code 88101-4426

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 ▼ 225.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 15 / 2010

**Transaction ID:** SA11AI-21567-98864-c

Amount of Each Receipt this Period  
25.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **275.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 85		
	<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

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Ms. Marilyn OBrien		Date of Receipt	
	Mailing Address 250 E Alameda Street Apt. 624		M M / D D / Y Y Y Y 09 / 09 / 2010	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI-2216-98750-c
	Santa Fe	NM	87501-6205	
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
C		200.00		
Name of Employer None		Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Ms. Tina Poper		Date of Receipt	
	Mailing Address 530 Applewood Road		M M / D D / Y Y Y Y 09 / 14 / 2010	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI-2273-98824-c
	Corrales	NM	87048-9114	
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
C		250.00		
Name of Employer Lee-Sure Pools		Occupation Office Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) Ms. Edith Schulz		Date of Receipt	
	Mailing Address 125 Smoke Rise Trail		M M / D D / Y Y Y Y 09 / 02 / 2010	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI-23013-98653-c
	Belen	NM	87002-9543	
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
C		25.00		
Name of Employer None		Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	475.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 85  
(check only one)

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

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

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

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Robert Hajek

Mailing Address PO Box 50787

City Albuquerque State NM Zip Code 87181-0787

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

Name of Employer PNM Occupation Engineer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 385.00

Date of Receipt 09 / 08 / 2010

Transaction ID: SA11AI-25500-98681-c

Amount of Each Receipt this Period 15.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Ronald Toya

Mailing Address 124 Camino De Amador NW

City Albuquerque State NM Zip Code 87107-6750

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

Name of Employer US Dept Interior Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt 09 / 02 / 2010

Transaction ID: SA11AI-2563-98654-c

Amount of Each Receipt this Period 180.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Larry Kennedy

Mailing Address 2438 La Veta Drive NE

City Albuquerque State NM Zip Code 87110-4026

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

Name of Employer Wall Engineering Occupation Structural Engineering

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 470.00

Date of Receipt 09 / 01 / 2010

Transaction ID: SA11AI-26850-98792-c

Amount of Each Receipt this Period 70.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **265.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 85  
(check only one)

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

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

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

**A.**

Full Name (Last, First, Middle Initial)  
Ms. Brigitte Russell

Mailing Address 10 Ellis Ranch Loop

City Santa Fe State NM Zip Code 87505-1472

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

Name of Employer Self-Employed Occupation Writer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 09 / 24 / 2010

Transaction ID: SA11AI-27852-99002-c

Amount of Each Receipt this Period 180.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Kim Hillard

Mailing Address 3214 June Street NE

City Albuquerque State NM Zip Code 87111-5027

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

Name of Employer Correa Enterprises Inc Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt 09 / 14 / 2010

Transaction ID: SA11AI-3062-98817-c

Amount of Each Receipt this Period 180.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr. George Cook

Mailing Address PO Box 7308

City Albuquerque State NM Zip Code 87194-7308

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

Name of Employer Te-Bird Inc Occupation Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 525.00

Date of Receipt 09 / 01 / 2010

Transaction ID: SA11AI-31172-98790-c

Amount of Each Receipt this Period 450.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **810.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 85
	<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) Mr. George Cook		Date of Receipt MM / DD / YYYY 09 / 01 / 2010		
	Mailing Address PO Box 7308		<b>Transaction ID:</b> SA11AI-31172-98799-c		
	City Albuquerque	State NM	Zip Code 87194-7308	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Te-Bird Inc.	Occupation Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 525.00			

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. George Cook		Date of Receipt MM / DD / YYYY 09 / 01 / 2010		
	Mailing Address PO Box 7308		<b>Transaction ID:</b> SA11AI-31172-98800-c		
	City Albuquerque	State NM	Zip Code 87194-7308	Amount of Each Receipt this Period 25.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Te-Bird Inc.	Occupation Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 525.00			

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Mike Tellez		Date of Receipt MM / DD / YYYY 09 / 21 / 2010		
	Mailing Address 909 N Alameda Boulevard		<b>Transaction ID:</b> SA11AI-31639-98906-c		
	City Las Cruces	State NM	Zip Code 88005-2124	Amount of Each Receipt this Period 15.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Family Restaurant Group LLC	Occupation Restaurant Operator			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 235.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	90.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 85  
(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial)  
Mrs. Nancy Loisel

Mailing Address 4640 Monte Frio Drive NW

City State Zip Code  
Albuquerque NM 87120-1827

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

Name of Employer Occupation  
None Retired

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 515.00

Date of Receipt  
MM / DD / YYYY  
09 / 01 / 2010

**Transaction ID:** SA11AI-3171-98786-c

Amount of Each Receipt this Period  
300.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Jared Hamilton

Mailing Address 2155 Foxtail Pine Drive

City State Zip Code  
Las Cruces NM 88012-6088

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

Name of Employer Occupation  
Hamilton Consulting LLC Consultant

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 265.00

Date of Receipt  
MM / DD / YYYY  
09 / 22 / 2010

**Transaction ID:** SA11AI-34765-98951-c

Amount of Each Receipt this Period  
25.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Henry Mahe, Jr.

Mailing Address 913 Santa Ana Avenue SE

City State Zip Code  
Albuquerque NM 87123-4230

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

Name of Employer Occupation  
Foley & Lardner, LLC Communications Counselor

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 220.00

Date of Receipt  
MM / DD / YYYY  
09 / 01 / 2010

**Transaction ID:** SA11AI-35077-98788-c

Amount of Each Receipt this Period  
70.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 395.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 85  
(check only one)

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

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

**A.** Full Name (Last, First, Middle Initial)  
Mr. Jim Bohlander

Mailing Address 3 Painted Horse

City State Zip Code  
Santa Fe NM 87506-8298

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 ▼ 670.00

Date of Receipt  
MM / DD / YYYY  
09 / 23 / 2010

**Transaction ID:** SA11AI-39247-98980-c

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Laura Armstrong

Mailing Address PO Box 27

City State Zip Code  
Belen NM 87002-0027

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

Name of Employer Occupation  
Ambercare Healthcare CPA

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt  
MM / DD / YYYY  
09 / 02 / 2010

**Transaction ID:** SA11AI-39474-98631-c

Amount of Each Receipt this Period  
180.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Clyde Wheeler

Mailing Address 3209 Lazy Day Drive SW

City State Zip Code  
Albuquerque NM 87121-6701

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 ▼ 245.00

Date of Receipt  
MM / DD / YYYY  
09 / 16 / 2010

**Transaction ID:** SA11AI-39557-98913-c

Amount of Each Receipt this Period  
15.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **245.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 85
	<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) Mr. Randy Kamradt		Date of Receipt MM / DD / YYYY 09 / 08 / 2010		
	Mailing Address 608 W Plains Avenue		<b>Transaction ID:</b> SA11AI-39564-98688-c		
	City Clovis	State NM	Zip Code 88101-4232	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer DAVTEK Corp	Occupation Construction Manager			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 450.00			

<b>B.</b>	Full Name (Last, First, Middle Initial) Mrs. Marita Noon		Date of Receipt MM / DD / YYYY 09 / 15 / 2010		
	Mailing Address PO Box 52103		<b>Transaction ID:</b> SA11AI-39618-98865-c		
	City Albuquerque	State NM	Zip Code 87181-2103	Amount of Each Receipt this Period 15.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer CARE	Occupation Executive Director			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 235.00			

<b>C.</b>	Full Name (Last, First, Middle Initial) Ms. Lesley Akers		Date of Receipt MM / DD / YYYY 09 / 22 / 2010		
	Mailing Address 5300 Knight Road NE		<b>Transaction ID:</b> SA11AI-39653-98954-c		
	City Albuquerque	State NM	Zip Code 87109-3109	Amount of Each Receipt this Period 15.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Rio Grande Credit Union	Occupation Manager			
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) .....	▶	80.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 85
	<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) Mr. William Kurth		Date of Receipt MM / DD / YYYY 09 / 10 / 2010
	Mailing Address 1531 Camino Cerrito SE		<b>Transaction ID:</b> SA11AI-39785-98764-c
	City Albuquerque	State NM	Zip Code 87123-4400
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.00
	Name of Employer Self Employed	Occupation Real Estate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 885.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. David McArthur		Date of Receipt MM / DD / YYYY 09 / 08 / 2010
	Mailing Address 2609 Rincon Del Rio Court NW		<b>Transaction ID:</b> SA11AI-40096-98695-c
	City Albuquerque	State NM	Zip Code 87107-2981
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
	Name of Employer None	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Henry Townsend		Date of Receipt MM / DD / YYYY 09 / 02 / 2010
	Mailing Address PO Box 1422		<b>Transaction ID:</b> SA11AI-40203-98655-c
	City Ruidoso	State NM	Zip Code 88355-1422
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
	Name of Employer Self	Occupation Investments	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	365.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 85  
(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Johnny Luevano, Jr.

Mailing Address 1601 S Sunset Avenue  
Apt. 4-6

City Roswell State NM Zip Code 88203-2637

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

Name of Employer United States Marine Corps Occupation Marine Corps Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt 09 / 27 / 2010  
**Transaction ID:** SA11AI-40251-99028-c  
Amount of Each Receipt this Period 180.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Steven Hargis

Mailing Address PO Box 1407

City Hereford State TX Zip Code 79045-1407

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

Name of Employer Aramco Occupation Engineer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt 09 / 21 / 2010  
**Transaction ID:** SA11AI-40401-98909-c  
Amount of Each Receipt this Period 180.00

**C.**

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

Mailing Address 9100 Wimbledon Drive NE

City Albuquerque State NM Zip Code 87111-5884

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt 09 / 01 / 2010  
**Transaction ID:** SA11AI-40456-98795-c  
Amount of Each Receipt this Period 105.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 465.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 21 / 85
	(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

<b>A.</b>	Full Name (Last, First, Middle Initial) Mrs. Patricia Wood		Date of Receipt MM / DD / YYYY 09 / 01 / 2010
	Mailing Address 9100 Wimbledon Drive NE		<b>Transaction ID:</b> SA11AI-40456-98808-c
	City Albuquerque	State NM	Zip Code 87111-5884
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 215.00
	Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 320.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Mickey Barnett		Date of Receipt MM / DD / YYYY 09 / 01 / 2010
	Mailing Address 1616 Soplo Road SE		<b>Transaction ID:</b> SA11AI-7262-98789-c
	City Albuquerque	State NM	Zip Code 87123-4455
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 35.00
	Name of Employer Barnett Law Firm, PA	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 215.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Jack Stamm		Date of Receipt MM / DD / YYYY 09 / 08 / 2010
	Mailing Address PO Box 2512		<b>Transaction ID:</b> SA11AI-7609-98701-c
	City Santa Fe	State NM	Zip Code 87504-2512
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 180.00
	Name of Employer Self Employed	Occupation Real Estate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	430.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 / 85  
(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial)  
Charles Tipton

Mailing Address 3613 Espejo Street NE

City Albuquerque State NM Zip Code 87111-4762

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

Name of Employer Applied Technology Associates Occupation Scientist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

Date of Receipt 09 / 22 / 2010

Transaction ID: SA11AI-7630-98956-c

Amount of Each Receipt this Period 30.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Frank Leech

Mailing Address 1005 Wagon Train Drive SE

City Albuquerque State NM Zip Code 87123-4157

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 09 / 23 / 2010

Transaction ID: SA11AI-8262-98990-c

Amount of Each Receipt this Period 50.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Frank Leech

Mailing Address 1005 Wagon Train Drive SE

City Albuquerque State NM Zip Code 87123-4157

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 09 / 23 / 2010

Transaction ID: SA11AI-8262-98991-c

Amount of Each Receipt this Period 50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 130.00

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

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

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

FOR LINE NUMBER: PAGE 23 / 85  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

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

**A.** Full Name (Last, First, Middle Initial)  
Mr. John Ochterbeck

Mailing Address 724 Lee Drive

City Las Vegas State NM Zip Code 87701-4912

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

Name of Employer Farmway Feed & Equipment Co Occupation President/General Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 22 / 2010

**Transaction ID:** SA11AI-8325-98940-c

Amount of Each Receipt this Period 250.00

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

Mailing Address 3007 Diamond A Drive

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 ▼ 500.00

Date of Receipt 09 / 01 / 2010

**Transaction ID:** SA11AI-8457-98796-c

Amount of Each Receipt this Period 500.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Joan Herman

Mailing Address 3212 Rhode Island Drive NE

City Albuquerque State NM Zip Code 87110-2429

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 09 / 01 / 2010

**Transaction ID:** SA11AI-8526-98791-c

Amount of Each Receipt this Period 35.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 785.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 85  
(check only one)

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

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

**A.** Full Name (Last, First, Middle Initial)  
Mr. Holm Bursum, III

Mailing Address PO Box 1457

City Socorro State NM Zip Code 87801-1457

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

Name of Employer: First State Bank of Socorro Occupation: Banker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt: 09 / 22 / 2010

Transaction ID: SA11AI-8708-98950-c

Amount of Each Receipt this Period: 100.00

**B.** Full Name (Last, First, Middle Initial)  
Mrs. Josephine Mitchell

Mailing Address 1432 Stagecoach Road SE

City Albuquerque State NM Zip Code 87123-4433

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 ▼ 590.00

Date of Receipt: 09 / 01 / 2010

Transaction ID: SA11AI-8710-98781-c

Amount of Each Receipt this Period: 70.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Josephine Mitchell

Mailing Address 1432 Stagecoach Road SE

City Albuquerque State NM Zip Code 87123-4433

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 ▼ 590.00

Date of Receipt: 09 / 01 / 2010

Transaction ID: SA11AI-8710-98782-c

Amount of Each Receipt this Period: 20.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 190.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 25 / 85
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

**A.**

Full Name (Last, First, Middle Initial) Dr. James Koch		Date of Receipt MM / DD / YYYY 09 / 20 / 2010
Mailing Address 10600 Coronado Avenue NE		<b>Transaction ID:</b> SA11AI-9431-98896-c
City Albuquerque	State Zip Code NM 87122-3536	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self-Employed	Occupation Physician	Aggregate Year-to-Date ▼ 600.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

**B.**

Full Name (Last, First, Middle Initial) Mrs. Sherry Frese		Date of Receipt MM / DD / YYYY 09 / 08 / 2010
Mailing Address 3411 Corrales Road		<b>Transaction ID:</b> SA11AI-9644-98698-c
City Corrales	State Zip Code NM 87048-9137	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Self-Employed	Occupation Scientist	Aggregate Year-to-Date ▼ 1200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	700.00
<b>TOTAL</b> This Period (last page this line number only) .....	7095.00

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

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

FOR LINE NUMBER: PAGE 26 / 85

(check only one)

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

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

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

**A.**

Full Name (Last, First, Middle Initial)  
Republican National Committee (tsfs)

Mailing Address 310 1st Street 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 ▼  
237491.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	7		2	0	1	0

Transaction ID: SA12-2878-99014-c

Amount of Each Receipt this Period

1321.00

In-Kind Transfer

**B.**

Full Name (Last, First, Middle Initial)  
Republican National Committee (tsfs)

Mailing Address 310 1st Street 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 ▼  
237491.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	9		2	0	1	0

Transaction ID: SA12-2878-99156-c

Amount of Each Receipt this Period

60000.00

**C.**

Full Name (Last, First, Middle Initial)  
Republican National Committee (tsfs)

Mailing Address 310 1st Street 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 ▼  
237491.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	3		2	0	1	0

Transaction ID: SA12-2878-99255-c

Amount of Each Receipt this Period

42000.00

Xfer Party Committee

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

103321.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 27 / 85	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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

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) National Republican Congressional Cmte		Date of Receipt	
Mailing Address 320 1st Street SE		M M / D D / Y Y Y Y 09 / 28 / 2010	
City	State	Zip Code	<b>Transaction ID:</b> SA12-9016-99155-c
Washington	DC	20003-1838	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
C		48000.00	
Name of Employer	Occupation		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	48000.00		
<input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	48000.00
<b>TOTAL</b> This Period (last page this line number only) .....	151321.00

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Office Depot</p> <p>Mailing Address 1405 N Renaissance Boulevard NE</p> <p>City Albuquerque State NM Zip Code 87107-7006</p> <p>Purpose of Disbursement Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-40410-96737-V</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> / <input type="text" value="22"/> / <input type="text" value="2010"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="181.80"/></p> <p><b>[MEMO ITEM]</b> Subitemization of Ash Wright ( 09/23/10 )</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Mr. Ash Wright</p> <p>Mailing Address 6001 San Mateo Boulevard NE Suite 1B</p> <p>City Albuquerque State NM Zip Code 87109-3447</p> <p>Purpose of Disbursement Reimbursement: Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-40310-98958-e</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> / <input type="text" value="23"/> / <input type="text" value="2010"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="181.80"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Ms. Ana Maria Salazar</p> <p>Mailing Address 2948 Missouri Avenue</p> <p>City Las Cruces State NM Zip Code 88011-4814</p> <p>Purpose of Disbursement Reimbursements: Less than \$200</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-40432-98662-e</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> / <input type="text" value="03"/> / <input type="text" value="2010"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="236.83"/></p>

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

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 29 / 85

<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) Joshua Weber</p> <p>Mailing Address 1241 Orchard Park Circle</p> <p>City Pflugerville State TX Zip Code 78660-2431</p> <p>Purpose of Disbursement Reimbursements: Under \$200</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-40308-98924-e <b>Date of Disbursement</b> 09 / 21 / 2010</p> <p>Amount of Each Disbursement this Period 88.87</p> <p>001 Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Scott Zacheus</p> <p>Mailing Address 406 E Arriba Drive</p> <p>City Hobbs State NM Zip Code 88240-3433</p> <p>Purpose of Disbursement Reimbursement: Mileage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-40377-98850-e <b>Date of Disbursement</b> 09 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 258.00</p> <p>001 Category/ Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Mr. Ash Wright</p> <p>Mailing Address 6001 San Mateo Boulevard NE Suite 1B</p> <p>City Albuquerque State NM Zip Code 87109-3447</p> <p>Purpose of Disbursement Reimbursements: Less than \$200</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-40310-98768-e <b>Date of Disbursement</b> 09 / 03 / 2010</p> <p>Amount of Each Disbursement this Period 752.65</p> <p>001 Category/ Type</p>

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

1099.52

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

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

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

FOR LINE NUMBER: (check only one)

<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></p> <p>Full Name (Last, First, Middle Initial) Walmart Supercenter</p> <p>Mailing Address 1550 S Valley Drive</p> <p>City Las Cruces State NM Zip Code 88005-3110</p> <p>Purpose of Disbursement Volunteer Food</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-37496-96726-V</p> <p>Date of Disbursement 08 / 28 / 2010</p> <p>Amount of Each Disbursement this Period 70.29</p> <p><b>[MEMO ITEM]</b> Subitemization of Linda Bartelsmeyer ( 09/14/10 )</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Walmart Supercenter</p> <p>Mailing Address 1550 S Valley Drive</p> <p>City Las Cruces State NM Zip Code 88005-3110</p> <p>Purpose of Disbursement Office supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-37496-96728-V</p> <p>Date of Disbursement 09 / 04 / 2010</p> <p>Amount of Each Disbursement this Period 41.30</p> <p><b>[MEMO ITEM]</b> Subitemization of Linda Bartelsmeyer ( 09/14/10 )</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Linda Bartelsmeyer</p> <p>Mailing Address 5983 Moon View Drive</p> <p>City Las Cruces State NM Zip Code 88012-7164</p> <p>Purpose of Disbursement Reimbursements: under \$200 and mileage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-40324-98851-e</p> <p>Date of Disbursement 09 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 411.54</p>

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

**411.54**

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

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

<b>A.</b> Full Name (Last, First, Middle Initial) Ms. Julia Ruetten <hr/> Mailing Address 6110 Academy Road NE Apt. 86 <hr/> City Albuquerque State NM Zip Code 87109-2800 <hr/> Purpose of Disbursement Reimbursement: Less than \$200 Candidate Name	Transaction ID: SB21B-40307-98660-e Date of Disbursement MM / DD / YYYY 09 / 03 / 2010
	Amount of Each Disbursement this Period 103.22
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Kial Vidic <hr/> Mailing Address 1230 Mahood Road <hr/> City West Sunbury State PA Zip Code 16061-2020 <hr/> Purpose of Disbursement Reimbursements: Mileage and less than \$200 Candidate Name	Transaction ID: SB21B-40334-98661-e Date of Disbursement MM / DD / YYYY 09 / 03 / 2010
	Amount of Each Disbursement this Period 424.82
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Julia Ruetten <hr/> Mailing Address 6110 Academy Road NE Apt. 86 <hr/> City Albuquerque State NM Zip Code 87109-2800 <hr/> Purpose of Disbursement Reimbursement: Office Supplies and Postage Candidate Name	Transaction ID: SB21B-40307-99054-e Date of Disbursement MM / DD / YYYY 09 / 29 / 2010
	Amount of Each Disbursement this Period 22.88
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:

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

550.92

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 32 / 85

<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) Scott Zacheus</p> <p>Mailing Address 406 E Arriba Drive</p> <p>City Hobbs State NM Zip Code 88240-3433</p> <p>Purpose of Disbursement Reimbursements: Under \$200</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-40377-98923-e <b>Date of Disbursement</b> 09 / 21 / 2010</p> <p>Amount of Each Disbursement this Period 245.56</p> <p>001 Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Comcast Cable</p> <p>Mailing Address PO Box 34744</p> <p>City Seattle State WA Zip Code 98124-1744</p> <p>Purpose of Disbursement Administrative/Salary/Overhead: Internet</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-40385-96725-V <b>Date of Disbursement</b> 09 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 248.31</p> <p>001 Category/ Type</p> <p><b>[MEMO ITEM]</b> Subitemization of Republican Party of Santa Fe County ( 09/10/10 )</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Ms. Ana Maria Salazar</p> <p>Mailing Address 2948 Missouri Avenue</p> <p>City Las Cruces State NM Zip Code 88011-4814</p> <p>Purpose of Disbursement Reimbursements: Under \$200</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-40432-98852-e <b>Date of Disbursement</b> 09 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 352.94</p> <p>001 Category/ Type</p>

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

598.50

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<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) 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 State Gross Receipts Tax - August</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-18771-99154-e <b>Date of Disbursement</b> 09 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 340.56</p> <p>001 Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Comcast Cable</p> <p>Mailing Address PO Box 34744</p> <p>City Seattle State WA Zip Code 98124-1744</p> <p>Purpose of Disbursement Administrative/Salary/Overhead: Internet</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-40385-98853-e <b>Date of Disbursement</b> 09 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 102.07</p> <p>001 Category/ Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) EFTPS</p> <p>Mailing Address Internal Revenue Serv Center</p> <p>City Ogden State UT Zip Code 84201-0001</p> <p>Purpose of Disbursement 941 Taxes-FEA Employees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-20457-98889-e <b>Date of Disbursement</b> 09 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 2606.14</p> <p>001 Category/ Type</p>

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

3048.77

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Wells Fargo Bank, NA</p> <p>Mailing Address 7412 Jefferson Street NE</p> <p>City Albuquerque State NM Zip Code 87109-4336</p> <p>Purpose of Disbursement bank fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-39724-99181-e</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="30"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="43.34"/></p> <p>Category/Type: <input type="text" value="001"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Direct Mail Systems, Inc.</p> <p>Mailing Address 12450 Automobile Boulevard</p> <p>City Clearwater State FL Zip Code 33762-4427</p> <p>Purpose of Disbursement Party Fundraising- NoFed Candidate</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-13349-98856-e</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="15"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2456.23"/></p> <p>Category/Type: <input type="text" value="003"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) EFTPS</p> <p>Mailing Address Internal Revenue Serv Center</p> <p>City Ogden State UT Zip Code 84201-0001</p> <p>Purpose of Disbursement 941 Taxes-non FEA employees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-20457-98890-e</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="15"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1452.99"/></p> <p>Category/Type: <input type="text" value="001"/></p>

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

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 35 / 85

<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.</b> Full Name (Last, First, Middle Initial) Fiesta Del Norte One, LLC <hr/> Mailing Address C/O NAI Horizon Real Estate Group 2944 North 44th St, Ste 200 <hr/> City Phoenix State AZ Zip Code 85018 <hr/> Purpose of Disbursement Administrative/Salary/Overhead: Rent Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-25551-99009-e Date of Disbursement MM / DD / YYYY 09 / 24 / 2010
	Amount of Each Disbursement this Period 2387.13
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Lobo Internet Services LTD <hr/> Mailing Address PO Box 1761 <hr/> City Moriarty State NM Zip Code 87035-1761 <hr/> Purpose of Disbursement Internet Services Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-36813-99008-e Date of Disbursement MM / DD / YYYY 09 / 24 / 2010
	Amount of Each Disbursement this Period 153.10
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Postmaster <hr/> Mailing Address 6255 San Antonio Drive NE <hr/> City Albuquerque State NM Zip Code 87109-9211 <hr/> Purpose of Disbursement Annual fee bulk mail PI #786 Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-7798-98667-e Date of Disbursement MM / DD / YYYY 09 / 07 / 2010
	Amount of Each Disbursement this Period 185.00
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

2725.23

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Ash Wright <hr/> Mailing Address 6001 San Mateo Boulevard NE Suite 1B <hr/> City Albuquerque State NM Zip Code 87109-3447 <hr/> Purpose of Disbursement Reimbursements: Mileage and Office supplies under \$200 Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-40310-98925-e Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2010
	Amount of Each Disbursement this Period 278.17
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Cable One <hr/> Mailing Address PO Box 78407 <hr/> City Phoenix State AZ Zip Code 85062-8407 <hr/> Purpose of Disbursement Administrative/Salary/Overhead: Internet Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-40389-99055-e Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2010
	Amount of Each Disbursement this Period 264.42
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Winning Edge Communications, Llc <hr/> Mailing Address PO Box 269 <hr/> City Alexandria State AL Zip Code 36250-0269 <hr/> Purpose of Disbursement Bulk Mail Permit and Application Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-40441-98664-e Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2010
	Amount of Each Disbursement this Period 370.00
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

912.59

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Taxation & Revenue Department  Mailing Address PO Box 25128  City Santa Fe State NM Zip Code 87504-5128  Purpose of Disbursement CRS - August 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) ▼	Transaction ID: SB21B-18771-99153-e Date of Disbursement 09 / 15 / 2010  Amount of Each Disbursement this Period 473.78  001 Category/ Type
<b>B.</b>	Full Name (Last, First, Middle Initial) Santa Fe County Clerk  Mailing Address 102 Grant Avenue  City Santa Fe State NM Zip Code 87501-2061  Purpose of Disbursement Voter Lists 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) ▼	Transaction ID: SB21B-340-99063-e Date of Disbursement 09 / 30 / 2010  Amount of Each Disbursement this Period 250.00  001 Category/ Type
<b>C.</b>	Full Name (Last, First, Middle Initial) Wells Fargo Bank, NA  Mailing Address 7412 Jefferson Street NE  City Albuquerque State NM Zip Code 87109-4336  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) ▼	Transaction ID: SB21B-39724-99180-e Date of Disbursement 09 / 30 / 2010  Amount of Each Disbursement this Period 214.68  001 Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	938.46
<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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Ms. Julia Ruetten</p> <p>Mailing Address 6110 Academy Road NE Apt. 86</p> <p>City Albuquerque State NM Zip Code 87109-2800</p> <p>Purpose of Disbursement Reimbursements: Office Supplies and volunteer food</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-40307-98922-e <b>Date of Disbursement</b> 09 / 21 / 2010</p> <p>Amount of Each Disbursement this Period 36.56</p> <p>001 Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) PNM</p> <p>Mailing Address PO Box 17970</p> <p>City Denver State CO Zip Code 80217-0970</p> <p>Purpose of Disbursement Administrative/Salary/Overhead: Electric</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-23373-98771-e <b>Date of Disbursement</b> 09 / 10 / 2010</p> <p>Amount of Each Disbursement this Period 423.71</p> <p>001 Category/ Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Ms. Ana Maria Salazar</p> <p>Mailing Address 2948 Missouri Avenue</p> <p>City Las Cruces State NM Zip Code 88011-4814</p> <p>Purpose of Disbursement Reimbursements: Mileage and under \$200</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B-40432-99010-e <b>Date of Disbursement</b> 09 / 24 / 2010</p> <p>Amount of Each Disbursement this Period 461.78</p> <p>001 Category/ Type</p>

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

922.05

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)

Alicia Pompa

Mailing Address 4913 Northridge Place NE

City State Zip Code  
Albuquerque NM 87111-2105

Purpose of Disbursement  
Reimbursements: Parking, Mileage, and Laptop

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB21B-40326-98921-e

Date of Disbursement

09 / 21 / 2010

Amount of Each Disbursement this Period

98.75

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

98.75

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

15677.52

**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

<b>A.</b>	Full Name (Last, First, Middle Initial) Republican Party of Sandoval County  Mailing Address PO Box 1064  City Bernalillo State NM Zip Code 87004-1064  Purpose of Disbursement Administrative/Salary/Overhead: Rent Candidate Name Republican Party of Sandoval County  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB22-2312-98657-e Date of Disbursement 09 / 03 / 2010  Amount of Each Disbursement this Period 600.00  Category/Type 001
<b>B.</b>	Full Name (Last, First, Middle Initial) Republican Party of Utah  Mailing Address 117 E South Temple  City Salt Lake City State UT Zip Code 84111-1127  Purpose of Disbursement Transfer to Party Candidate Name Republican Party of Utah  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB22-9666-99019-e Date of Disbursement 09 / 27 / 2010  Amount of Each Disbursement this Period 40000.00  Category/Type 001
<b>C.</b>	Full Name (Last, First, Middle Initial) Republican Party of Chaves County  Mailing Address PO Box 774  City Roswell State NM Zip Code 88202-0774  Purpose of Disbursement Administrative/Salary/Overhead: rent Candidate Name Republican Party of Chaves County  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB22-219-98658-e Date of Disbursement 09 / 03 / 2010  Amount of Each Disbursement this Period 600.00  Category/Type 001

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	41200.00
<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 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

<b>A.</b> Full Name (Last, First, Middle Initial) Republican Party of Santa Fe County <hr/> Mailing Address PO Box 31995 <hr/> City Santa Fe State NM Zip Code 87594-1995 <hr/> Purpose of Disbursement Reimbursement: Comcast Internet Candidate Name Republican Party of Santa Fe County <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB22-2313-98770-e <b>Date of Disbursement</b> MM / DD / YYYY 09 / 10 / 2010
	Amount of Each Disbursement this Period 248.31
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Republican Party of Lea County <hr/> Mailing Address PO Box 1934 <hr/> City Hobbs State NM Zip Code 88241-1934 <hr/> Purpose of Disbursement rent and utilities Candidate Name Republican Party of Lea County <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB22-16223-98659-e <b>Date of Disbursement</b> MM / DD / YYYY 09 / 03 / 2010
	Amount of Each Disbursement this Period 1274.19
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Republican National Committee (tsfs) <hr/> Mailing Address 310 1st Street SE <hr/> City Washington State DC Zip Code 20003-1885 <hr/> Purpose of Disbursement See Line 12 - In Kind Transfer Candidate Name Republican National Committee (tsfs) <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB22-2878-99015-e <b>Date of Disbursement</b> MM / DD / YYYY 09 / 27 / 2010
	Amount of Each Disbursement this Period 1321.00
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2843.50
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	44043.50

**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 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

<b>A.</b> Full Name (Last, First, Middle Initial) Mullins for Congress Mailing Address PO Box 256 City Farmington State NM Zip Code 87499-0256 Purpose of Disbursement Political Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23-40461-98835-e Date of Disbursement 09 / 14 / 2010	
	Amount of Each Disbursement this Period 5000.00	
	011 Category/ Type	
	Full Name (Last, First, Middle Initial) Jon Barela for Congress Mailing Address PO Box 92413 City Albuquerque State NM Zip Code 87199-2413 Purpose of Disbursement Political Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23-39561-98840-e Date of Disbursement 09 / 14 / 2010
Amount of Each Disbursement this Period 5000.00		
011 Category/ Type	Full Name (Last, First, Middle Initial) People for Pearce Mailing Address PO Box 2696 City Hobbs State NM Zip Code 88241-2696 Purpose of Disbursement Political Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23-34696-98849-e Date of Disbursement 09 / 14 / 2010
Amount of Each Disbursement this Period 4000.00		
011 Category/ Type		

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

# 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

<b>A.</b> Full Name (Last, First, Middle Initial) Cathy Alling <hr/> Mailing Address 5905 Prenda De Oro NW <hr/> City Albuquerque State NM Zip Code 87120-1337 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40443-98669-e Date of Disbursement M M / D D / Y Y Y Y 09 / 07 / 2010
	Amount of Each Disbursement this Period 55.00
	Category/ Type
	Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Scott Zacheus <hr/> Mailing Address 406 E Arriba Drive <hr/> City Hobbs State NM Zip Code 88240-3433 <hr/> Purpose of Disbursement FEA 100% Federal: Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40377-98888-e Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2010
	Amount of Each Disbursement this Period 1028.91
	Category/ Type
	Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) Alicia Pompa <hr/> Mailing Address 4913 Northridge Place NE <hr/> City Albuquerque State NM Zip Code 87111-2105 <hr/> Purpose of Disbursement FEA 100% Federal: Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40326-98885-e Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2010
	Amount of Each Disbursement this Period 998.65
	Category/ Type
	Category/ Type

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

2082.56

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

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

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

FOR LINE NUMBER:  
(check only one)

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<input 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) Ms. Pamela Navarette <hr/> Mailing Address 5320 San Mateo Boulevard NE Apt. F75 <hr/> City Albuquerque State NM Zip Code 87109-6319 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40464-98917-e Date of Disbursement MM / DD / YYYY 09 / 21 / 2010
	Amount of Each Disbursement this Period 68.75
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Shane Maier <hr/> Mailing Address 3348 N Hoisington Road <hr/> City Winnebago State IL Zip Code 61088-8638 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40450-98848-e Date of Disbursement MM / DD / YYYY 09 / 14 / 2010
	Amount of Each Disbursement this Period 57.75
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Cathy Alling <hr/> Mailing Address 5905 Prenda De Oro NW <hr/> City Albuquerque State NM Zip Code 87120-1337 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40443-98847-e Date of Disbursement MM / DD / YYYY 09 / 14 / 2010
	Amount of Each Disbursement this Period 110.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	236.50
<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 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

A.	Full Name (Last, First, Middle Initial) Alicia Pompa	Transaction ID: SB30b-40326-99083-e
	Mailing Address 4913 Northridge Place NE	Date of Disbursement MM / DD / YYYY 09 / 30 / 2010
	City Albuquerque State NM Zip Code 87111-2105	Amount of Each Disbursement this Period 998.64
	Purpose of Disbursement FEA 100% Federal: Salary FEA	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Robert Salazar	Transaction ID: SB30b-40333-99084-e
	Mailing Address PO Box 59	Date of Disbursement MM / DD / YYYY 09 / 30 / 2010
	City Youngsville State NM Zip Code 87064-0059	Amount of Each Disbursement this Period 1154.37
	Purpose of Disbursement FEA 100% Federal: Salary FEA	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Ms. Pamela Navarette	Transaction ID: SB30b-40464-99052-e
	Mailing Address 5320 San Mateo Boulevard NE Apt. F75	Date of Disbursement MM / DD / YYYY 09 / 29 / 2010
	City Albuquerque State NM Zip Code 87109-6319	Amount of Each Disbursement this Period 110.00
	Purpose of Disbursement FEA 100% Federal: Paid Volunteer	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) .....	▶	2263.01
<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 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) Ms. Kial Vidic <hr/> Mailing Address 1230 Mahood Road <hr/> City West Sunbury State PA Zip Code 16061-2020 <hr/> Purpose of Disbursement FEA 100% Federal: Salary FEA Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40334-99085-e Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2010
	Amount of Each Disbursement this Period 1149.51
	Category/ Type
	Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Robert Salazar <hr/> Mailing Address PO Box 59 <hr/> City Youngsville State NM Zip Code 87064-0059 <hr/> Purpose of Disbursement FEA 100% Federal: Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40333-98886-e Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2010
	Amount of Each Disbursement this Period 1154.38
	Category/ Type
	Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) RPNM Non-Federal Account <hr/> Mailing Address PO Box 94083 <hr/> City Albuquerque State NM Zip Code 87199-4083 <hr/> Purpose of Disbursement Tsf of Federal share to Nonfederal for FEA activity - see Winning Edge Communications disbursement 9/ Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-2892-99089-e Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2010
	Amount of Each Disbursement this Period 11364.00
	Category/ Type
	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	13667.89
<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) Linda Bartelsmeyer <hr/> Mailing Address 5983 Moon View Drive <hr/> City Las Cruces State NM Zip Code 88012-7164 <hr/> Purpose of Disbursement FEA 100% Federal: Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40324-98884-e Date of Disbursement MM / DD / YYYY 09 / 15 / 2010
	Amount of Each Disbursement this Period 1046.64
	Category/ Type
	Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Scott Zacheus <hr/> Mailing Address 406 E Arriba Drive <hr/> City Hobbs State NM Zip Code 88240-3433 <hr/> Purpose of Disbursement FEA 100% Federal: Salary FEA Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40377-99086-e Date of Disbursement MM / DD / YYYY 09 / 30 / 2010
	Amount of Each Disbursement this Period 1028.92
	Category/ Type
	Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Ana Maria Salazar <hr/> Mailing Address 2948 Missouri Avenue <hr/> City Las Cruces State NM Zip Code 88011-4814 <hr/> Purpose of Disbursement FEA 100% Federal: Political Consulting Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40432-98881-e Date of Disbursement MM / DD / YYYY 09 / 15 / 2010
	Amount of Each Disbursement this Period 2000.00
	Category/ Type
	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4075.56
<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

A.	Full Name (Last, First, Middle Initial) Ms. Julia Ruetten	Transaction ID: SB30b-40307-98882-e Date of Disbursement 09 / 15 / 2010
	Mailing Address 6110 Academy Road NE Apt. 86	Amount of Each Disbursement this Period 1620.18
	City Albuquerque State NM Zip Code 87109-2800	
	Purpose of Disbursement FEA 100% Federal: 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) ▼
B.	Full Name (Last, First, Middle Initial) Ms. Agnes Gaffney	Transaction ID: SB30b-40442-98920-e Date of Disbursement 09 / 21 / 2010
	Mailing Address 5905 Prenda De Oro NW	Amount of Each Disbursement this Period 110.00
	City Albuquerque State NM Zip Code 87120-1337	
	Purpose of Disbursement FEA 100% Federal: Paid Volunteer 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) ▼
C.	Full Name (Last, First, Middle Initial) Mrs. Marjorie Teague	Transaction ID: SB30b-7860-98855-e Date of Disbursement 09 / 15 / 2010
	Mailing Address 4910 Simon Drive NW	Amount of Each Disbursement this Period 2605.96
	City Albuquerque State NM Zip Code 87114-4329	
	Purpose of Disbursement FEA 100% Federal: Political Consulting 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) ▼

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

4336.14

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 49 / 85

<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.</b> Full Name (Last, First, Middle Initial) Ms. Ana Maria Salazar</p> <p>Mailing Address 2948 Missouri Avenue</p> <p>City Las Cruces State NM Zip Code 88011-4814</p> <p>Purpose of Disbursement FEA 100% Federal: Political Consulting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB30b-40432-99257-e <b>Date of Disbursement</b> 09 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 2000.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Catron County Clerk</p> <p>Mailing Address Catron County Courthouse, Box 197</p> <p>City Reserve State NM Zip Code 87830</p> <p>Purpose of Disbursement FEA 100% Federal: Voter Lists</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB30b-9946-98673-e <b>Date of Disbursement</b> 09 / 07 / 2010</p> <p>Amount of Each Disbursement this Period 210.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Linda Bartelsmeyer</p> <p>Mailing Address 5983 Moon View Drive</p> <p>City Las Cruces State NM Zip Code 88012-7164</p> <p>Purpose of Disbursement FEA 100% Federal: Salary FEA</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB30b-40324-99082-e <b>Date of Disbursement</b> 09 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 1046.63</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3256.63</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)

<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) Ms. Kial Vidic <hr/> Mailing Address 1230 Mahood Road <hr/> City West Sunbury State PA Zip Code 16061-2020 <hr/> Purpose of Disbursement FEA 100% Federal: Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB30b-40334-98887-e <b>Date of Disbursement</b> M M / D D / Y Y Y Y 09 / 15 / 2010
	Amount of Each Disbursement this Period 1149.51
	Category/ Type
	Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) EFTPS <hr/> Mailing Address Internal Revenue Serv Center <hr/> City Ogden State UT Zip Code 84201-0001 <hr/> Purpose of Disbursement 941 Taxes-FEA Employees Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB30b-20457-99079-e <b>Date of Disbursement</b> M M / D D / Y Y Y Y 09 / 30 / 2010
	Amount of Each Disbursement this Period 2606.16
	Category/ Type
	Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Julia Ruetten <hr/> Mailing Address 6110 Academy Road NE Apt. 86 <hr/> City Albuquerque State NM Zip Code 87109-2800 <hr/> Purpose of Disbursement FEA 100% Federal: Salary FEA Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB30b-40307-99080-e <b>Date of Disbursement</b> M M / D D / Y Y Y Y 09 / 30 / 2010
	Amount of Each Disbursement this Period 1620.18
	Category/ Type
	Category/ Type

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

5375.85

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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) Ms. Agnes Gaffney <hr/> Mailing Address 5905 Prenda De Oro NW <hr/> City Albuquerque State NM Zip Code 87120-1337 Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40442-99049-e Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2010
	Amount of Each Disbursement this Period 110.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Ms. Agnes Gaffney <hr/> Mailing Address 5905 Prenda De Oro NW <hr/> City Albuquerque State NM Zip Code 87120-1337 Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40442-98668-e Date of Disbursement M M / D D / Y Y Y Y 09 / 07 / 2010
	Amount of Each Disbursement this Period 66.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Shane Maier <hr/> Mailing Address 3348 N Hoisington Road <hr/> City Winnebago State IL Zip Code 61088-8638 Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40450-99051-e Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2010
	Amount of Each Disbursement this Period 110.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	286.00
<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)

PAGE 52 / 85

<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) Ms. Agnes Gaffney <hr/> Mailing Address 5905 Prenda De Oro NW <hr/> City Albuquerque State NM Zip Code 87120-1337 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40442-98846-e Date of Disbursement MM / DD / YYYY 09 / 14 / 2010
	Amount of Each Disbursement this Period 110.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Cathy Alling <hr/> Mailing Address 5905 Prenda De Oro NW <hr/> City Albuquerque State NM Zip Code 87120-1337 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40443-98919-e Date of Disbursement MM / DD / YYYY 09 / 21 / 2010
	Amount of Each Disbursement this Period 110.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Cathy Alling <hr/> Mailing Address 5905 Prenda De Oro NW <hr/> City Albuquerque State NM Zip Code 87120-1337 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40443-99050-e Date of Disbursement MM / DD / YYYY 09 / 29 / 2010
	Amount of Each Disbursement this Period 110.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	330.00
<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 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.</b> Full Name (Last, First, Middle Initial) Joshua Weber</p> <p>Mailing Address 1241 Orchard Park Circle</p> <p>City Pflugerville State TX Zip Code 78660-2431</p> <p>Purpose of Disbursement FEA 100% Federal: Salary FEA</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB30b-40308-99081-e <b>Date of Disbursement</b> 09 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 1461.97</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Mr. Shane Maier</p> <p>Mailing Address 3348 N Hoisington Road</p> <p>City Winnebago State IL Zip Code 61088-8638</p> <p>Purpose of Disbursement FEA 100% Federal: Paid Volunteer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB30b-40450-98918-e <b>Date of Disbursement</b> 09 / 21 / 2010</p> <p>Amount of Each Disbursement this Period 110.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Joshua Weber</p> <p>Mailing Address 1241 Orchard Park Circle</p> <p>City Pflugerville State TX Zip Code 78660-2431</p> <p>Purpose of Disbursement FEA 100% Federal: Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB30b-40308-98883-e <b>Date of Disbursement</b> 09 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 1461.97</p>

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

3033.94

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

38944.08

**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)
- \_\_\_\_\_ Senate-Only Election Year (21% Federal)
- X  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 H2 (FEC Form 3X) ALLOCATION RATIOS

PAGE 55 / 85

NAME OF COMMITTEE (In Full)

**Republican Campaign Committee Of New Mexico**

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

Methods of allocation :

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

ACTIVITY OR EVENT IDENTIFIER

**Taking Back the House**

ACTIVITY IS:

Fundraising       Direct Candidate Support

CHECK IF THE RATIO IS:

New       Revised       Same as Previously Reported

FEDERAL %

**30.00** %

NONFEDERAL %

**70.00** %

**Transaction ID:  
H2-A-26**

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

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

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
WF Allocation	M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 1 0	1750.00

**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	1750.00	Transaction ID: H3A-40441-82192
<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 WF Allocation	DATE OF RECEIPT M M / D D / Y Y Y Y 09 / 10 / 2010	TOTAL AMOUNT TRANSFERRED 610.00
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**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	610.00	Transaction ID: H3A-40429-82188
<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 WF Allocation	DATE OF RECEIPT M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 1 0	TOTAL AMOUNT TRANSFERRED 2915.00
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BREAKDOWN OF TRANSFER RECEIVED

<b>i) Total Administrative</b> .....	2915.00	Transaction ID: H3A-40434-82190
<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	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
WF Allocation	M M / D D / Y Y Y Y 0 9 / 2 4 / 2 0 1 0	1250.00

**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	1250.00	Transaction ID: H3A-40443-82193
<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 WF Allocation	DATE OF RECEIPT M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 1 0	TOTAL AMOUNT TRANSFERRED 5035.00
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BREAKDOWN OF TRANSFER RECEIVED

<b>i) Total Administrative</b> .....	5035.00	Transaction ID: H3A-40447-82194
<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 WF Allocation	DATE OF RECEIPT M M / D D / Y Y Y Y 0 9 / 0 1 / 2 0 1 0	TOTAL AMOUNT TRANSFERRED 6280.00
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**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	6280.00	Transaction ID: H3A-40420-82185
<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 WF Allocation	DATE OF RECEIPT M M / D D / Y Y Y Y 09 / 13 / 2010	TOTAL AMOUNT TRANSFERRED 6332.00
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**BREAKDOWN OF TRANSFER RECEIVED**

<b>i) Total Administrative</b> .....	6332.00	Transaction ID: H3A-40432-82189
<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) .....	24172.00
<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) .....	24172.00

A. Form/Schedule : **H3**

Transaction ID : **H3A-40432-82189**

Additional Notes With Regards to H3 Transfers

\_\_\_\_\_ 9/1/2010 transfer for \$6,280.00: Admin Tsf \_\_\_\_\_ -  
\_\_\_\_\_ 9/13/2010 transfer for \$6,332.00: Admin Tsf \_\_\_\_\_ -  
\_\_\_\_\_ 9/15/2010 transfer for \$2,915.00: Admin Tsf \_\_\_\_\_ -  
\_\_\_\_\_ 9/24/2010 transfer for \$1,250.00: Admin Tsf \_\_\_\_\_ -  
\_\_\_\_\_ 9/28/2010 transfer for \$1,235.00: Admin Tsf \_\_\_\_\_ -  
\_\_\_\_\_ 9/28/2010 transfer for \$3,800.00: Admin Tsf \_\_\_\_\_ -  
\_\_\_\_\_ 9/10/2010 transfer for \$610.00: Admin Tsf \_\_\_\_\_ -  
Admin Tsf \_\_\_\_\_ 9/22/2010 transfer for \$1,750.00: Admin Tsf \_\_\_\_\_

**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> Miss Tiffany Kardeen			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 11804 Palo Duro Avenue NE			Allocated Activity or Event Year-To-Date 174978.33		
City Albuquerque	State NM	Zip Code 87111-4145	Date <input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Salary Not FEA			Transaction ID: H4-34571-99075-e		
Activity or Event Identifier: ADMINISTRATION B 411 - 1200			Category/Type		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
176.97		1002.80		1179.77

<b>B. 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 371874			Allocated Activity or Event Year-To-Date 174978.33		
City Pittsburgh	State PA	Zip Code 15250-7874	Date <input type="text" value="09"/> / <input type="text" value="10"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Postage Meter			Transaction ID: H4-18829-98773-e		
Activity or Event Identifier: ADMINISTRATION B 411 - 1200			Category/Type		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
60.00		340.00		400.00

<b>C. Full Name (Last, First, Middle Initial)</b> Mrs. Marjorie Teague			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 4910 Simon Drive NW			Allocated Activity or Event Year-To-Date 174978.33		
City Albuquerque	State NM	Zip Code 87114-4329	Date <input type="text" value="09"/> / <input type="text" value="01"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Contractor - Administration			Transaction ID: H4-7860-98623-e		
Activity or Event Identifier: ADMINISTRATION B 411 - 1200			Category/Type		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
785.40		4450.60		5236.00

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1022.37		5793.40		6815.77

**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 17970			Allocated Activity or Event Year-To-Date 174978.33		
City Denver	State CO	Zip Code 80217-0970	Date <input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Utilities-Electric			Transaction ID: H4-23373-98870-e		
Activity or Event Identifier: ADMINISTRATION B 411 - 1200					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
49.20		278.83		328.03

<b>B. Full Name (Last, First, Middle Initial)</b> Mrs. Marjorie Teague			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 4910 Simon Drive NW			Allocated Activity or Event Year-To-Date 174978.33		
City Albuquerque	State NM	Zip Code 87114-4329	Date <input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Reimbursement: Office Supplies			Transaction ID: H4-7860-98868-e		
Activity or Event Identifier: ADMINISTRATION B 411 - 1200					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.01		39.70		46.71

<b>C. Full Name (Last, First, Middle Initial)</b> Qwest Business Services			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 52187			Allocated Activity or Event Year-To-Date 174978.33		
City Phoenix	State AZ	Zip Code 85072-2187	Date <input type="text" value="09"/> / <input type="text" value="13"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Phone Service			Transaction ID: H4-39854-98775-e		
Activity or Event Identifier: ADMINISTRATION B 411 - 1200					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
197.81		1120.92		1318.73

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
254.02		1439.45		1693.47

**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> New Mexico Gas Company			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 173341			Allocated Activity or Event Year-To-Date 174978.33		
City	State	Zip Code	Category/ Type		
Denver	CO	80217-3341			
Purpose of Disbursement: Utilities-Gas			Date <input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2010"/>		
Activity or Event Identifier: ADMINISTRATION B 411 - 1200			Transaction ID: H4-39214-98869-e		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.75		15.61		18.36

<b>B. Full Name (Last, First, Middle Initial)</b> Mountain States Mutual Casualty Co.			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 93254			Allocated Activity or Event Year-To-Date 174978.33		
City	State	Zip Code	Category/ Type		
Albuquerque	NM	87199-3254			
Purpose of Disbursement: Insurance: Workers Comp, Business Auto,			Date <input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2010"/>		
Activity or Event Identifier: ADMINISTRATION B 411 - 1200			Transaction ID: H4-34706-98871-e		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
139.60		791.05		930.65

<b>C. Full Name (Last, First, Middle Initial)</b> McMillan New Mexico Heritage Foundation			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 Street NW   Suite 1000			Allocated Activity or Event Year-To-Date 174978.33		
City	State	Zip Code	Category/ Type		
Albuquerque	NM	87102-2186			
Purpose of Disbursement: Rent - September			Date <input type="text" value="09"/> / <input type="text" value="01"/> / <input type="text" value="2010"/>		
Activity or Event Identifier: ADMINISTRATION B 411 - 1200			Transaction ID: H4-22986-98622-e		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
322.50		1827.50		2150.00

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
464.85		2634.16		3099.01

**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> Mr. Robert Perea			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" 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 618 Coal Avenue SW Unit A			Allocated Activity or Event Year-To-Date 2500.00		
City Albuquerque	State NM	Zip Code 87102-3896	Date MM / DD / YYYY 09 / 22 / 2010		
Purpose of Disbursement: Reimbursement: Event Space Rental			Transaction ID: H4-26318-98944-e		
Activity or Event Identifier: Taking Back the House					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
750.00		1750.00		2500.00

<b>B. Full Name (Last, First, Middle Initial)</b> Costco			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 1420 N Renaissance Boulevard NE			Allocated Activity or Event Year-To-Date 174978.33		
City Albuquerque	State NM	Zip Code 87107-7008	Date MM / DD / YYYY 09 / 09 / 2010		
Purpose of Disbursement: Office Supplies			Transaction ID: H4-39089-96730-V		
Activity or Event Identifier: ADMINISTRATION B 411 - 1200 <b>[MEMO ITEM]</b> Subitemization of Marjorie Teague					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.99		22.63		26.62

<b>C. Full Name (Last, First, Middle Initial)</b> Verizon Wireless			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 660108			Allocated Activity or Event Year-To-Date 174978.33		
City Dallas	State TX	Zip Code 75266-0108	Date MM / DD / YYYY 09 / 13 / 2010		
Purpose of Disbursement: Cell Phones			Transaction ID: H4-6914-98776-e		
Activity or Event Identifier: ADMINISTRATION B 411 - 1200					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
31.12		176.35		207.47

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
781.12		1926.35		2707.47

**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> Marlin Business Bank			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 13604			Allocated Activity or Event Year-To-Date 174978.33		
City Philadelphia	State PA	Zip Code 19101-3604	Date <input type="text" value="09"/> / <input type="text" value="10"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Xerox Lease			Transaction ID: H4-39721-98774-e		
Activity or Event Identifier: ADMINISTRATION B 411 - 1200					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
47.15		267.17		314.32

<b>B. Full Name (Last, First, Middle Initial)</b> Ms. Heather Hall			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 142 Big Horn Ridge Court NE			Allocated Activity or Event Year-To-Date 174978.33		
City Albuquerque	State NM	Zip Code 87122-1902	Date <input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Salary-Not FEA			Transaction ID: H4-40332-98880-e		
Activity or Event Identifier: ADMINISTRATION B 411 - 1200					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
109.03		617.86		726.89

<b>C. Full Name (Last, First, Middle Initial)</b> Ms. Heather Hall			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 142 Big Horn Ridge Court NE			Allocated Activity or Event Year-To-Date 174978.33		
City Albuquerque	State NM	Zip Code 87122-1902	Date <input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Salary Not FEA			Transaction ID: H4-40332-99077-e		
Activity or Event Identifier: ADMINISTRATION B 411 - 1200					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
109.03		617.85		726.88

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
265.21		1502.88		1768.09

**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> 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 Internal Revenue Serv Center			Allocated Activity or Event Year-To-Date 174978.33		
City Ogden	State UT	Zip Code 84201-0001	Date <input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: 941 Taxes-non FEA employees			Transaction ID: H4-20457-99078-e		
Activity or Event Identifier: ADMINISTRATION B 411 - 1200					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
217.95		1235.04		1452.99

<b>B. Full Name (Last, First, Middle Initial)</b> Xerox Corporation			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 7405			Allocated Activity or Event Year-To-Date 174978.33		
City Pasadena	State CA	Zip Code 91109-7405	Date <input type="text" value="09"/> / <input type="text" value="24"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Copy Supplies/Service			Transaction ID: H4-7801-98999-e		
Activity or Event Identifier: ADMINISTRATION B 411 - 1200					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
68.49		388.08		456.57

<b>C. Full Name (Last, First, Middle Initial)</b> Mrs. Janel Causey			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 13116 Bear Dancer Trail NE			Allocated Activity or Event Year-To-Date 174978.33		
City Albuquerque	State NM	Zip Code 87112-3725	Date <input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Salary-Not FEA			Transaction ID: H4-39238-98877-e		
Activity or Event Identifier: ADMINISTRATION B 411 - 1200					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
219.30		1242.67		1461.97

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
505.74		2865.79		3371.53

**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> Agave Del Sol			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" 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 7500 Montgomery Boulevard NE			Allocated Activity or Event Year-To-Date 2500.00		
City Albuquerque	State NM	Zip Code 87109-1678	Date <input type="text" value="09"/> / <input type="text" value="22"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Event Space Rental			Transaction ID: H4-40466-96736-V		
Activity or Event Identifier: Taking Back the House [MEMO ITEM] Subitemization of Robert Perea			FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 750.00 + 1750.00 = 2500.00		

<b>B. 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 371874			Allocated Activity or Event Year-To-Date 174978.33		
City Pittsburgh	State PA	Zip Code 15250-7874	Date <input type="text" value="09"/> / <input type="text" value="24"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Postage for Meter			Transaction ID: H4-18829-99000-e		
Activity or Event Identifier: ADMINISTRATION B 411 - 1200			FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 97.66 + 553.42 = 651.08		

<b>C. Full Name (Last, First, Middle Initial)</b> Howard & Koval, PC			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 30850			Allocated Activity or Event Year-To-Date 174978.33		
City Albuquerque	State NM	Zip Code 87190-0850	Date <input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Accounting Services			Transaction ID: H4-20380-98867-e		
Activity or Event Identifier: ADMINISTRATION B 411 - 1200			FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT 200.63 + 1136.87 = 1337.50		

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
298.29		1690.29		1988.58

**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)**  
Office Depot  
**Mailing Address**  
1405 N Renaissance Boulevard NE  
**City State Zip Code**  
Albuquerque NM 87107-7006  
**Purpose of Disbursement:**  
Office Supplies  
**Activity or Event Identifier:**  
ADMINISTRATION B 411 - 1200  
**[MEMO ITEM]** Subitemization of Marjorie Teague

**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**  
174978.33  
**Date** 09 / 09 / 2010  
**Transaction ID:** H4-40410-96731-V

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.01		17.08		20.09

**B. Full Name (Last, First, Middle Initial)**  
Mrs. Pam Wolfe  
**Mailing Address**  
PO Box 15129  
**City State Zip Code**  
Las Cruces NM 88004-5129  
**Purpose of Disbursement:**  
Salary Not FEA  
**Activity or Event Identifier:**  
ADMINISTRATION B 411 - 1200

**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**  
174978.33  
**Date** 09 / 30 / 2010  
**Transaction ID:** H4-2665-99076-e

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
165.32		936.84		1102.16

**C. Full Name (Last, First, Middle Initial)**  
LexisNexis  
**Mailing Address**  
PO Box 894166  
**City State Zip Code**  
Los Angeles CA 90189-4166  
**Purpose of Disbursement:**  
Online Subscription  
**Activity or Event Identifier:**  
ADMINISTRATION B 411 - 1200

**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**  
174978.33  
**Date** 09 / 15 / 2010  
**Transaction ID:** H4-24366-98873-e

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
55.35		313.64		368.99

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
220.67		1250.48		1471.15

**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> Miss Tiffany Kardeen			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 11804 Palo Duro Avenue NE			Allocated Activity or Event Year-To-Date 174978.33		
City                      State                      Zip Code Albuquerque              NM                      87111-4145	Category/ Type		Date                      M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 1 0		
Purpose of Disbursement: Salary-Not FEA			Transaction ID: H4-34571-98878-e		
Activity or Event Identifier: ADMINISTRATION B 411 - 1200					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
176.97		1002.80		1179.77

<b>B. Full Name (Last, First, Middle Initial)</b> Mrs. Janel Causey			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 13116 Bear Dancer Trail NE			Allocated Activity or Event Year-To-Date 174978.33		
City                      State                      Zip Code Albuquerque              NM                      87112-3725	Category/ Type		Date                      M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 1 0		
Purpose of Disbursement: Salary Not FEA			Transaction ID: H4-39238-99074-e		
Activity or Event Identifier: ADMINISTRATION B 411 - 1200					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
219.30		1242.67		1461.97

<b>C. Full Name (Last, First, Middle Initial)</b> Mrs. Pam Wolfe			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 15129			Allocated Activity or Event Year-To-Date 174978.33		
City                      State                      Zip Code Las Cruces              NM                      88004-5129	Category/ Type		Date                      M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 1 0		
Purpose of Disbursement: Salary-Not FEA			Transaction ID: H4-2665-98879-e		
Activity or Event Identifier: ADMINISTRATION B 411 - 1200					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
165.32		936.83		1102.15

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
561.59		3182.30		3743.89

**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> Marlin Business Bank			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 13604			Allocated Activity or Event Year-To-Date 174978.33		
City Philadelphia	State PA	Zip Code 19101-3604	Date MM / DD / YYYY 09 / 24 / 2010		
Purpose of Disbursement: Xerox Lease			Transaction ID: H4-39721-99001-e		
Activity or Event Identifier: ADMINISTRATION B 411 - 1200					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
54.22		307.25		361.47

<b>B. Full Name (Last, First, Middle Initial)</b> Midway Office Supply Center, 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 5900 Midway Park Boulevard NE			Allocated Activity or Event Year-To-Date 174978.33		
City Albuquerque	State NM	Zip Code 87109-5805	Date MM / DD / YYYY 09 / 15 / 2010		
Purpose of Disbursement: Office Supplies			Transaction ID: H4-20381-98872-e		
Activity or Event Identifier: ADMINISTRATION B 411 - 1200					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.70		49.29		57.99

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

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
62.92		356.54		419.46

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
4436.78		22641.64		27078.42

**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 WF Allocation Tsfs	DATE OF RECEIPT <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>9</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		0	3		2	0	1	0	TOTAL AMOUNT TRANSFERRED <table border="1"> <tr> <td>440.00</td> </tr> </table> Transaction ID: H540422-82186	440.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		0	3		2	0	1	0														
440.00																							

BREAKDOWN OF THIS TRANSFER

		VOTER REGISTRATION		
i) <b>Voter Registration</b>	Total Amount Transferred for Voter Registration.....	<table border="1"><tr><td>440.00</td></tr></table>	440.00	
440.00				
		VOTER ID		
ii) <b>Voter ID</b>	Total Amount Transferred for Voter ID.....	<table border="1"><tr><td>0.00</td></tr></table>	0.00	
0.00				
		GOTV		
iii) <b>GOTV</b>	Total Amount Transferred for GOTV.....	<table border="1"><tr><td>0.00</td></tr></table>	0.00	
0.00				
		GENERIC CAMPAIGN ACTIVITY		
iv) <b>Generic Campaign Activity</b>	Total Amount Transferred for Generic Campaign Activity.....	<table border="1"><tr><td>0.00</td></tr></table>	0.00	
0.00				

NAME OF ACCOUNT WF Allocation Tsfs	DATE OF RECEIPT <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>9</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	9		2	0	1	0	TOTAL AMOUNT TRANSFERRED <table border="1"> <tr> <td>4165.00</td> </tr> </table> Transaction ID: H540448-82196	4165.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		2	9		2	0	1	0														
4165.00																							

BREAKDOWN OF THIS TRANSFER

		VOTER REGISTRATION		
i) <b>Voter Registration</b>	Total Amount Transferred for Voter Registration.....	<table border="1"><tr><td>0.00</td></tr></table>	0.00	
0.00				
		VOTER ID		
ii) <b>Voter ID</b>	Total Amount Transferred for Voter ID.....	<table border="1"><tr><td>0.00</td></tr></table>	0.00	
0.00				
		GOTV		
iii) <b>GOTV</b>	Total Amount Transferred for GOTV.....	<table border="1"><tr><td>4165.00</td></tr></table>	4165.00	
4165.00				
		GENERIC CAMPAIGN ACTIVITY		
iv) <b>Generic Campaign Activity</b>	Total Amount Transferred for Generic Campaign Activity.....	<table border="1"><tr><td>0.00</td></tr></table>	0.00	
0.00				

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

<b>TOTAL</b> This Period (Voter Registration).....	<table border="1"><tr><td></td></tr></table>	
<b>TOTAL</b> This Period (Voter ID).....	<table border="1"><tr><td></td></tr></table>	
<b>TOTAL</b> This Period (GOTV).....	<table border="1"><tr><td></td></tr></table>	
<b>TOTAL</b> This Period (Generic Campaign Activity).....	<table border="1"><tr><td></td></tr></table>	
<b>TOTAL</b> This Period (Total Amount of Transfers Received).....	<table border="1"><tr><td></td></tr></table>	

**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 WF Allocation Tsfs	DATE OF RECEIPT M M / D D / Y Y Y Y 09 / 09 / 2010	TOTAL AMOUNT TRANSFERRED 870.00 Transaction ID: H540428-82187
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BREAKDOWN OF THIS TRANSFER

i) <b>Voter Registration</b>		VOTER REGISTRATION
Total Amount Transferred for Voter Registration.....	0.00	
ii) <b>Voter ID</b>		VOTER ID
Total Amount Transferred for Voter ID.....	0.00	
iii) <b>GOTV</b>		GOTV
Total Amount Transferred for GOTV.....	0.00	
iv) <b>Generic Campaign Activity</b>		GENERIC CAMPAIGN ACTIVITY
Total Amount Transferred for Generic Campaign Activity.....	0.00	

NAME OF ACCOUNT WF Allocation Tsfs	DATE OF RECEIPT M M / D D / Y Y Y Y 09 / 21 / 2010	TOTAL AMOUNT TRANSFERRED 1725.00 Transaction ID: H540440-82191
---------------------------------------	--	--

BREAKDOWN OF THIS TRANSFER

i) <b>Voter Registration</b>		VOTER REGISTRATION
Total Amount Transferred for Voter Registration.....	1725.00	
ii) <b>Voter ID</b>		VOTER ID
Total Amount Transferred for Voter ID.....	0.00	
iii) <b>GOTV</b>		GOTV
Total Amount Transferred for GOTV.....	0.00	
iv) <b>Generic Campaign Activity</b>		GENERIC CAMPAIGN ACTIVITY
Total Amount Transferred for Generic Campaign Activity.....	0.00	

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

TOTAL This Period (Voter Registration).....	
TOTAL This Period (Voter ID).....	
TOTAL This Period (GOTV).....	
TOTAL This Period (Generic Campaign Activity).....	
TOTAL This Period (Total Amount of Transfers Received).....	

**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

WF Allocation Tsfs

DATE OF RECEIPT

MM / DD / YYYY  
 09 / 30 / 2010

TOTAL AMOUNT TRANSFERRED

970.00

Transaction ID: H540449-82198

BREAKDOWN OF THIS TRANSFER

i) **Voter Registration**

Total Amount Transferred for Voter Registration.....

VOTER REGISTRATION

970.00

ii) **Voter ID**

Total Amount Transferred for Voter ID.....

VOTER ID

0.00

iii) **GOTV**

Total Amount Transferred for GOTV.....

GOTV

0.00

iv) **Generic Campaign Activity**

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

GENERIC CAMPAIGN ACTIVITY

0.00

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED (Last Page Only)

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

3135.00

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

0.00

TOTAL This Period (GOTV).....

4165.00

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

0.00

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

8170.00

**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

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

Mr. Mitch Meyers

Type of Allocated Activity or Event:

Voter Registration  GOTV  
 Voter ID  Generic Campaign

Mailing Address  
1713 Gabaldon Drive NW

Allocated Activity or Event Year-To-Date

18533.00

City State Zip Code  
Albuquerque NM 87104-2770

Purpose of Disbursement  
Voter Registration Table

Category/  
Type

Date <sup>M</sup> <sup>M</sup> / <sup>D</sup> <sup>D</sup> / <sup>Y</sup> <sup>Y</sup> <sup>Y</sup> <sup>Y</sup>  
09 / 09 / 2010

FEDERAL SHARE + LEVIN SHARE = TOTAL AMOUNT  
153.45 + 869.55 = 1023.00

Transaction ID: H6-25022-98759-e

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

Mr. Mitch Meyers

Type of Allocated Activity or Event:

Voter Registration  GOTV  
 Voter ID  Generic Campaign

Mailing Address  
1713 Gabaldon Drive NW

Allocated Activity or Event Year-To-Date

18533.00

City State Zip Code  
Albuquerque NM 87104-2770

Purpose of Disbursement  
Voter Registration Table

Category/  
Type

Date <sup>M</sup> <sup>M</sup> / <sup>D</sup> <sup>D</sup> / <sup>Y</sup> <sup>Y</sup> <sup>Y</sup> <sup>Y</sup>  
09 / 30 / 2010

FEDERAL SHARE + LEVIN SHARE = TOTAL AMOUNT  
156.75 + 888.25 = 1045.00

Transaction ID: H6-25022-99060-e

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

Four Corners FRW

Type of Allocated Activity or Event:

Voter Registration  GOTV  
 Voter ID  Generic Campaign

Mailing Address  
PO Box 5462

Allocated Activity or Event Year-To-Date

18533.00

City State Zip Code  
Farmington NM 87499-5462

Purpose of Disbursement  
Voter Registration Table

Category/  
Type

Date <sup>M</sup> <sup>M</sup> / <sup>D</sup> <sup>D</sup> / <sup>Y</sup> <sup>Y</sup> <sup>Y</sup> <sup>Y</sup>  
09 / 21 / 2010

FEDERAL SHARE + LEVIN SHARE = TOTAL AMOUNT  
40.80 + 231.20 = 272.00

Transaction ID: H6-39888-98901-e

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

FEDERAL SHARE + LEVIN SHARE = TOTAL AMOUNT  
351.00 + 1989.00 = 2340.00

**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

<b>A. Full Name (Last ,First, Middle Initial) / Full Organization Name</b> Mr. Mitch Meyers			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 1713 Gabaldon Drive NW			Allocated Activity or Event Year-To-Date 18533.00	
City Albuquerque	State NM	Zip Code 87104-2770	Date <input type="text" value="09"/> / <input type="text" value="03"/> / <input type="text" value="2010"/>	
Purpose of Disbursement Voter Registration Table			Category/ Type	
FEDERAL SHARE 77.55		+ LEVIN SHARE 439.45	= TOTAL AMOUNT 517.00	
Transaction ID: H6-25022-98665-e				

<b>B. Full Name (Last ,First, Middle Initial) / Full Organization Name</b> FLS Connect, LLC			Type of Allocated Activity or Event: <input type="checkbox"/> Voter Registration <input checked="" type="checkbox"/> GOTV <input type="checkbox"/> Voter ID <input type="checkbox"/> Generic Campaign	
Mailing Address 7300 Hudson Boulevard N Suite 270			Allocated Activity or Event Year-To-Date 4901.85	
City Saint Paul	State MN	Zip Code 55128-7143	Date <input type="text" value="09"/> / <input type="text" value="29"/> / <input type="text" value="2010"/>	
Purpose of Disbursement Auto-dial for State Candidate			Category/ Type	
FEDERAL SHARE 735.28		+ LEVIN SHARE 4166.57	= TOTAL AMOUNT 4901.85	
Transaction ID: H6-12697-99042-e				

<b>C. Full Name (Last ,First, Middle Initial) / Full Organization Name</b> Dona Ana County FRW			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 15 Happy Trails Drive			Allocated Activity or Event Year-To-Date 18533.00	
City Las Cruces	State NM	Zip Code 88005-3973	Date <input type="text" value="09"/> / <input type="text" value="21"/> / <input type="text" value="2010"/>	
Purpose of Disbursement Voter Registration Table			Category/ Type	
FEDERAL SHARE 6.00		+ LEVIN SHARE 34.00	= TOTAL AMOUNT 40.00	
Transaction ID: H6-30466-98900-e				

<b>SUBTOTAL of Shared Federal and Levin Activity This Page</b>				
FEDERAL SHARE 818.83		+ LEVIN SHARE 4640.02	= TOTAL AMOUNT 5458.85	
<b>TOTAL This Period (last page for each line only)(Federal share to 30(a)(i) and Levin share to 30(a)(ii))</b>				
FEDERAL SHARE		LEVIN SHARE	TOTAL AMOUNT	
<b>TOTAL This Period for the Levin Share</b>				

**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

Mr. Mitch Meyers

Type of Allocated Activity or Event:

Voter Registration  GOTV  
 Voter ID  Generic Campaign

Mailing Address  
1713 Gabaldon Drive NW

Allocated Activity or Event Year-To-Date

18533.00

City State Zip Code  
Albuquerque NM 87104-2770

Purpose of Disbursement  
Voter Registration Table

Category/  
Type

Date  /  /

FEDERAL SHARE

257.40

LEVIN SHARE

1458.60

TOTAL AMOUNT

1716.00

Transaction ID: H6-25022-98902-e

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

FEDERAL SHARE

257.40

+

LEVIN SHARE

1458.60

=

TOTAL AMOUNT

1716.00

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

FEDERAL SHARE

1427.23

LEVIN SHARE

8087.62

TOTAL AMOUNT

9514.85

**TOTAL** This Period for the Levin Share

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

**AGGREGATION PAGE: LEVIN FUNDS**

Transaction ID: Levin-1

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

	COLUMN A TOTAL THIS PERIOD	COLUMN B YEAR-TO-DATE
1. RECEIPTS FROM PERSONS		
a. Itemized..... (Use Schedule L-A)	70000.00	85000.00
b. Unitemized.....	0.00	0.00
c. Total.....	70000.00	85000.00
2. OTHER RECEIPTS.....	0.00	23750.00
3. TOTAL RECEIPTS..... (Add Lines 1c and 2)	70000.00	108750.00
4. TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT (Use Schedule L-B)		
a. Voter Registration.....	3135.00	14572.00
b. Voter ID.....	0.00	13130.00
c. GOTV.....	4165.00	4165.00
d. Generic Campaign.....	0.00	0.00
e. Total.....	7300.00	31867.00
5. OTHER DISBURSEMENTS.....	65266.00	65266.00
6. TOTAL DISBURSEMENTS..... (Add Lines 4e and 5)	72566.00	97133.00
7. BEGINNING CASH ON HAND..... (for Column B, use cash as of January 1st)	14183.00	0.00
8. RECEIPTS..... (from Line 3)	70000.00	108750.00
9. SUBTOTAL..... (Add Lines 7 and 8)	84183.00	108750.00
10. DISBURSEMENTS..... (From Line 6)	72566.00	97133.00
11. ENDING CASH ON HAND..... (Subtract Line 10 From Line 9)	11617.00	11617.00

**SCHEDULE L-A (FEC Form 3X)  
ITEMIZED RECEIPTS OF LEVIN FUNDS**

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

FOR LINE NUMBER:  1a  2  
(check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Peabody Investments Corp.</p> <p>Mailing Address 701 Market Street</p> <p>City Saint Louis State MO Zip Code 63101-1830</p> <p>Name of Employer or Principal Place of Business</p> <p>Occupation</p>	<p><b>Transaction ID:</b> SASL1A-25521-99213-c <b>Date of Receipt</b> M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 1 0</p> <p>Amount of Each Receipt this Period 10000.00</p> <p>Aggregate Year-to-Date 10000.00</p> <p><b>Account: 1</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) HEYCO Energy Group, Inc.</p> <p>Mailing Address PO Box 1933</p> <p>City Roswell State NM Zip Code 88202-1933</p> <p>Name of Employer or Principal Place of Business</p> <p>Occupation</p>	<p><b>Transaction ID:</b> SASL1A-19346-99216-c <b>Date of Receipt</b> M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 1 0</p> <p>Amount of Each Receipt this Period 10000.00</p> <p>Aggregate Year-to-Date 10000.00</p> <p><b>Account: 1</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Pfizer, Inc.</p> <p>Mailing Address 6465 Grnwood Plz Boulevard Suite 500</p> <p>City Greenwood Vlg State CO Zip Code 80111-4965</p> <p>Name of Employer or Principal Place of Business</p> <p>Occupation</p>	<p><b>Transaction ID:</b> SASL1A-9697-99024-c <b>Date of Receipt</b> M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 1 0</p> <p>Amount of Each Receipt this Period 10000.00</p> <p>Aggregate Year-to-Date 10000.00</p> <p><b>Account: 1</b></p>
<p><b>D.</b> Full Name (Last, First, Middle Initial) ABO Petroleum Corporation</p> <p>Mailing Address PO Box 900</p> <p>City Artesia State NM Zip Code 88211-0900</p> <p>Name of Employer or Principal Place of Business</p> <p>Occupation</p>	<p><b>Transaction ID:</b> SASL1A-40098-99220-c <b>Date of Receipt</b> M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 1 0</p> <p>Amount of Each Receipt this Period 10000.00</p> <p>Aggregate Year-to-Date 10000.00</p> <p><b>Account: 1</b></p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional) .....</p>	<p>40000.00</p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	

**SCHEDULE L-A (FEC Form 3X)  
ITEMIZED RECEIPTS OF LEVIN FUNDS**

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

FOR LINE NUMBER:  
(check only one)  1a  2

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

Full Name (Last, First, Middle Initial) <b>A. Mack Energy Co.</b>			Transaction ID: SASL1A-20001-99212-c Date of Receipt M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 1 0
Mailing Address PO Box 960			Amount of Each Receipt this Period 10000.00
City Artesia	State NM	Zip Code 88211-0960	Aggregate Year-to-Date 10000.00
Name of Employer or Principal Place of Business			<b>Account: 1</b>
Occupation			
Full Name (Last, First, Middle Initial) <b>B. United Healthcare Services</b>			Transaction ID: SASL1A-40485-99041-c Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 1 0
Mailing Address PO Box 1459			Amount of Each Receipt this Period 10000.00
City Minneapolis	State MN	Zip Code 55440-1459	Aggregate Year-to-Date 10000.00
Name of Employer or Principal Place of Business			<b>Account: 1</b>
Occupation			
Full Name (Last, First, Middle Initial) <b>C. Select Milk Producers, Inc.</b>			Transaction ID: SASL1A-11956-99217-c Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 1 0
Mailing Address 320 W Hermosa Drive			Amount of Each Receipt this Period 10000.00
City Artesia	State NM	Zip Code 88210-2818	Aggregate Year-to-Date 10000.00
Name of Employer or Principal Place of Business			<b>Account: 1</b>
Occupation			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>30000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>70000.00</b>

**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)

4a     4c     5  
 4b     4d

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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) / Full Organization Name Republican Campaign Committee Of New Mexico</p> <p>Mailing Address PO Box 94083</p>	<p><b>Transaction ID:</b> SBSL4A-82191 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 1 / 2 0 1 0</p>
<p>City State Zip Code Albuquerque NM 87199-4083</p> <p>Purpose of Disbursement Admin Tsf</p>	<p>Amount of Each Disbursement this Period 1725.00</p> <p><b>Account: 1</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) / Full Organization Name Republican Campaign Committee Of New Mexico</p> <p>Mailing Address PO Box 94083</p>	<p><b>Transaction ID:</b> SBSL4A-82198 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 1 0</p>
<p>City State Zip Code Albuquerque NM 87199-4083</p> <p>Purpose of Disbursement Admin Tsf</p>	<p>Amount of Each Disbursement this Period 970.00</p> <p><b>Account: 1</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) / Full Organization Name Republican Campaign Committee Of New Mexico</p> <p>Mailing Address PO Box 94083</p>	<p><b>Transaction ID:</b> SBSL4A-82186 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 3 / 2 0 1 0</p>
<p>City State Zip Code Albuquerque NM 87199-4083</p> <p>Purpose of Disbursement Admin Tsf</p>	<p>Amount of Each Disbursement this Period 440.00</p> <p><b>Account: 1</b></p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><b>3135.00</b></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><b>3135.00</b></p>

**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)

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4a  4c  5  
 4b  4d

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NAME OF COMMITTEE (In Full)

Republican Campaign Committee Of New Mexico

A.

Full Name (Last, First, Middle Initial) / Full Organization Name

Republican Campaign Committee Of New Mexico

Mailing Address PO Box 94083

City State Zip Code  
Albuquerque NM 87199-4083

Purpose of Disbursement  
Admin Tsf

Transaction ID: SBSL4C-82197  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

Account: 1

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

**4165.00**

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

**4165.00**

**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)

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4a  4b  4c  5

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

A.	Full Name (Last, First, Middle Initial) / Full Organization Name Republican Campaign Committee Of New Mexico	Transaction ID: SBSL5-82187002 Date of Disbursement
	Mailing Address PO Box 94083	<input type="text" value="09"/> <input type="text" value="09"/> / <input type="text" value="2010"/>
	City State Zip Code Albuquerque NM 87199-4083	Amount of Each Disbursement this Period <input type="text" value="870.00"/>
	Purpose of Disbursement Admin Tsf	Account: 1
B.	Full Name (Last, First, Middle Initial) / Full Organization Name RPNM Non-Federal Account	Transaction ID: SBSL5-2892-99208-e Date of Disbursement
	Mailing Address PO Box 94083	<input type="text" value="09"/> <input type="text" value="30"/> / <input type="text" value="2010"/>
	City State Zip Code Albuquerque NM 87199-4083	Amount of Each Disbursement this Period <input type="text" value="64396.00"/>
	Purpose of Disbursement	Account: 1

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="65266.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="65266.00"/>