

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** ▼ Example: If typing, type over the lines. 12FE4M5  
Friends of Michelle

ADDRESS (number and street) P.O. Box 25422  
 Check if different than previously reported. (ACC) Albuquerque NM 87108

2. **FEC IDENTIFICATION NUMBER** ▼ C C00501254 CITY ▲ STATE ▲ ZIP CODE ▲  
3. IS THIS REPORT  NEW (N) OR  AMENDED (A) STATE ▼ DISTRICT  
NM 01

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on M M / D D / Y Y Y Y in the State of    
(c) 30-Day **POST**-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on M M / D D / Y Y Y Y in the State of  

5. Covering Period M M / D D / Y Y Y Y through M M / D D / Y Y Y Y  
05 / 15 / 2014 through 06 / 30 / 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Type or Print Name of Treasurer Ms. Jeannine L. Daniels  
Signature of Treasurer Ms. Jeannine L. Daniels [Electronically Filed] Date M M / D D / Y Y Y Y  
10 / 10 / 2014

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

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**Friends of Michelle**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	187214.50	1366790.71
(b) Total Contribution Refunds (from Line 20(d)) .....	2300.00	8550.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	184914.50	1358240.71
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	56663.18	461621.60
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	33494.17
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	56663.18	428127.43
8. Cash on Hand at Close of Reporting Period (from Line 27).....	922790.83	
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	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Friends of Michelle

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	63871.00	682411.53
(ii) Unitemized.....	7864.50	50244.77
(iii) TOTAL of contributions from individuals ▶	71735.50	732656.30
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	115479.00	634134.41
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	187214.50	1366790.71
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....	0.00	33494.17
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	187214.50	1400284.88

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	56663.18	461621.60
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	51000.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	51000.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	2300.00	7550.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	1000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	2300.00	8550.00
21. OTHER DISBURSEMENTS .....	5500.00	25496.83
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	64463.18	546668.43

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	800039.51
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	187214.50
25. SUBTOTAL (add Line 23 and Line 24).....	987254.01
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	64463.18
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	922790.83

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

**A.** Full Name (Last, First, Middle Initial)  
**Laurette Alexander**

Mailing Address 2851 Trellis Dr NW

City Albuquerque State NM Zip Code 87107-2933

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

Name of Employer Self Occupation Photographer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
314.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 29 / 2014

**Transaction ID : C10375916**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Charlie L. Alfero**

Mailing Address 717 W 7th St

City Silver City State NM Zip Code 88061-4507

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

Name of Employer HMS-CHI Occupation Health Advocate

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 27 / 2014

**Transaction ID : C10373326**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Clara R. Apodaca**

Mailing Address 9419 Callaway Cir NE

City Albuquerque State NM Zip Code 87111-5858

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 06 / 2014

**Transaction ID : C10349561**

Amount of Each Receipt this Period  
100.00

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

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

600.00

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

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

FOR LINE NUMBER: PAGE 6 OF 111  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

**A.** Full Name (Last, First, Middle Initial)  
**Judith Arciniaco**

Mailing Address 8908 Ortega Ct NW

City Los Ranchos State NM Zip Code 87114-1747

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

Name of Employer Self-Employed Occupation Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 350.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 29 / 2014

**Transaction ID : C10375915**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

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

Mailing Address 2316 Hannett Ave NE

City Albuquerque State NM Zip Code 87106-3709

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

Name of Employer University of New Mexico Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 29 / 2014

**Transaction ID : C10375881**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 200.00

**C.** Full Name (Last, First, Middle Initial)  
**Matthew R. Baca**

Mailing Address 5125 Northern Trl NW

City Albuquerque State NM Zip Code 87120-2025

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

Name of Employer UNM Occupation Programs Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : C10376099**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

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

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

\_\_\_\_\_ 700.00

\_\_\_\_\_

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

Full Name (Last, First, Middle Initial) <b>A. Nancy A. Baca</b>		Date of Receipt MM / DD / YYYY 06 / 29 / 2014
Mailing Address 423 Tulane PI NE		<b>Transaction ID : C10375875</b>
City Albuquerque	State NM	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Self	Occupation Property Manager and Farmer	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 700.00	

Full Name (Last, First, Middle Initial) <b>B. Carl David Bedford</b>		Date of Receipt MM / DD / YYYY 06 / 04 / 2014
Mailing Address 376 Sandlewood Loop		<b>Transaction ID : C10344471</b>
City Avinger	State TX	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer None	Occupation Retired	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 350.00	

Full Name (Last, First, Middle Initial) <b>C. Sandra D. Bellino</b>		Date of Receipt MM / DD / YYYY 06 / 16 / 2014
Mailing Address 3270 S Monroe St		<b>Transaction ID : C10357737</b>
City Denver	State CO	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Merck	Occupation Government Relations	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	775.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

**A.** Full Name (Last, First, Middle Initial)  
**Lori McCamey Bencoe**

Mailing Address 6900 Bing PI NE

City Albuquerque State NM Zip Code 87111-1006

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

Name of Employer Bencoe & LaCour Law Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : C10376240**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 204 Solana Dr

City Santa Fe State NM Zip Code 87501-1675

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

Name of Employer Self Occupation Writer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
225.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 23 / 2014

**Transaction ID : C10335046**

Amount of Each Receipt this Period  
25.00

**C.** Full Name (Last, First, Middle Initial)  
**Robert Blancato**

Mailing Address 138 N Jackson St

City Arlington State VA Zip Code 22201-1244

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

Name of Employer Matz, Blancato and Assoc. Occupation Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 20 / 2014

**Transaction ID : C10331097**

Amount of Each Receipt this Period  
250.00

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

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

775.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

**A.** Full Name (Last, First, Middle Initial)  
**Roxane Linn Bly**

Mailing Address 6216 Prairie Sage Dr NW

City Albuquerque State NM Zip Code 87120-2563

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

Name of Employer **NAPPR** Occupation **Program Director**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **731.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 03 / 2014**

**Transaction ID : C10344378**

Amount of Each Receipt this Period  
**200.00**

**B.** Full Name (Last, First, Middle Initial)  
**David J. Borns**

Mailing Address 3615 Mackland Ave NE

City Albuquerque State NM Zip Code 87110-6121

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

Name of Employer **Sandia National Laboratories** Occupation **Geologist**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 30 / 2014**

**Transaction ID : C10376055**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**Curtis Boyd**

Mailing Address 369 Montezuma Ave

City Santa Fe State NM Zip Code 87501-2835

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

Name of Employer **Southwestern Women's Options** Occupation **Physician**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 27 / 2014**

**Transaction ID : C10374366**

Amount of Each Receipt this Period  
**1000.00**

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

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

**1450.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

**A.** Full Name (Last, First, Middle Initial)  
**Eizabeth L. Bremner**

Mailing Address 907 Allahna Way

City Santa Fe State NM Zip Code 87501-7068

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

Name of Employer None Occupation Philanthropist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 15 / 2014

**Transaction ID : C10327141**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 39 Fleetfoot

City Tijeras State NM Zip Code 87059-6305

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

Name of Employer James S Bromberg MD JD/Hildebrandt & B Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 19 / 2014

**Transaction ID : C10364296**

Amount of Each Receipt this Period  
 2600.00

**C.** Full Name (Last, First, Middle Initial)  
**David P Buchholtz**

Mailing Address 9921 Barrinson NE

City Albuquerque State NM Zip Code 87111-5895

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

Name of Employer Rodey Dickason Sloan Akin & Robb, PA Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 30 / 2014

**Transaction ID : C10340790**

Amount of Each Receipt this Period  
 600.00

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

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

3700.00

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

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

FOR LINE NUMBER: PAGE 11 OF 111  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

**A.** Full Name (Last, First, Middle Initial)  
**Caroline Buerkle**

Mailing Address 5801 Desert View Ct NE

City Rio Rancho State NM Zip Code 87144-2638

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

Name of Employer Self Occupation Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3100.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : C10376250**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Brian G. Burnett**

Mailing Address 12904 Sand Cherry PI NE

City Albuquerque State NM Zip Code 87111-7569

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

Name of Employer Bohannan Huston Occupation Engineer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 26 / 2014

**Transaction ID : C10336635**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Cecil D Bykerk**

Mailing Address 9643 Oak Cir

City Omaha State NE Zip Code 68124-2767

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

Name of Employer Self Occupation Actuary

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : C10376017**

Amount of Each Receipt this Period  
1600.00

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

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

2600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

**A.** Full Name (Last, First, Middle Initial)  
**Gabriel Candelaria**

Mailing Address 1604 Avenida Cristo Rey NW

City	State	Zip Code
Albuquerque	NM	87107-3453

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

Name of Employer	Occupation
New Mexico Oncology Hematology Consult	Medical Physicist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 07 / 2014

**Transaction ID : C10349582**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 4072 Dietz Farm Cir NW

City	State	Zip Code
Los Ranchos	NM	87107-3104

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

Name of Employer	Occupation
Self	Investment Advisor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 30 / 2014

**Transaction ID : C10340513**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 1634 Rancho Guadalupe Trl NW

City	State	Zip Code
Albuquerque	NM	87107-3370

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

Name of Employer	Occupation
Alvarado Management Ltd	CFO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : C10376239**

Amount of Each Receipt this Period  
250.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

Full Name (Last, First, Middle Initial) <b>R. Martin Chavez</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2014
Mailing Address 400 W 12th St Apt TH6		<b>Transaction ID : C10328201</b>
City New York	State NY	
Zip Code 10014-1861		Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Goldman Sachs	Occupation Banker	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) <b>Frank Ted Cloak Jr</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 28 / 2014
Mailing Address 1613 Fruit Ave NW		<b>Transaction ID : C10338726</b>
City Albuquerque	State NM	
Zip Code 87104-1231		Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 235.00
Name of Employer None	Occupation Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 235.00	

Full Name (Last, First, Middle Initial) <b>Frank Ted Cloak Jr</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 12 / 2014
Mailing Address 1613 Fruit Ave NW		<b>Transaction ID : C10334846</b>
City Albuquerque	State NM	
Zip Code 87104-1231		Amount of Each Receipt this Period 10.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 235.00
Name of Employer None	Occupation Retired	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 235.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1030.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

**A.** Full Name (Last, First, Middle Initial)  
**Frank Ted Cloak Jr**

Mailing Address 1613 Fruit Ave NW

City Albuquerque State NM Zip Code 87104-1231

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **235.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 28 / 2014**

**Transaction ID : C10374521**

Amount of Each Receipt this Period  
**20.00**

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

Mailing Address 8320 Loma Del Norte Rd NE

City Albuquerque State NM Zip Code 87109-4902

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

Name of Employer Self-employed Occupation Real estate

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 07 / 2014**

**Transaction ID : C10349558**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**Michelle A. Coons**

Mailing Address 4010 Avenida Las Campanas NW

City Los Ranchos State NM Zip Code 87107-3230

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

Name of Employer First National Rio Grande Bank Occupation Banker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 30 / 2014**

**Transaction ID : C10376222**

Amount of Each Receipt this Period  
**250.00**

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

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

**770.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

**A.** Full Name (Last, First, Middle Initial)  
**Caren E. Cowan**

Mailing Address **3417 Avenida Charada**

City **Albuquerque** State **NM** Zip Code **87107-2601**

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

Name of Employer **NM Cattle Growers/NM Stockman** Occupation **Exec Dir / Publisher**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 15 / 2014**

**Transaction ID : C10328202**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**MICHAEL A. CREWS**

Mailing Address **6501 Caballero Pkwy NW**

City **Los Ranchos** State **NM** Zip Code **87107-5603**

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

Name of Employer **RETIRED** Occupation **PHYSICIAN**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **575.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 16 / 2014**

**Transaction ID : C10328327**

Amount of Each Receipt this Period  
**25.00**

**C.** Full Name (Last, First, Middle Initial)  
**Frances Crockett**

Mailing Address **118 Wellesley Dr SE**

City **Albuquerque** State **NM** Zip Code **87106-1444**

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

Name of Employer **Law Office of Frances Crockett** Occupation **Attorney**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 19 / 2014**

**Transaction ID : C10330174**

Amount of Each Receipt this Period  
**250.00**

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

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

**375.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

**A.** Full Name (Last, First, Middle Initial)  
**C. Barry Crutchfield**

Mailing Address **PO Box 58**

City **Lovington** State **NM** Zip Code **88260-0058**

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

Name of Employer **Templeman & Crutchfield** Occupation **Attorney**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 02 / 2014**

**Transaction ID : C10343000**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address **6005 Wildflower Trl NE**

City **Albuquerque** State **NM** Zip Code **87111-8100**

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

Name of Employer **Self** Occupation **Banker**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 30 / 2014**

**Transaction ID : C10376059**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**Tom Daulton**

Mailing Address **5721 Stonegate Rd**

City **Dallas** State **TX** Zip Code **75209-3525**

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

Name of Employer **Self** Occupation **Private Equity Investments**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**750.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 30 / 2014**

**Transaction ID : C10376056**

Amount of Each Receipt this Period  
**250.00**

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

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

**1000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

**A.** Full Name (Last, First, Middle Initial)  
**Maria Estela De Rios**

Mailing Address 10067 Los Cansados Rd NW

City Albuquerque State NM Zip Code 87114-1919

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

Name of Employer Orion International Occupation President & CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **650.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 06 / 2014

**Transaction ID : C10351579**

Amount of Each Receipt this Period  
**150.00**

**B.** Full Name (Last, First, Middle Initial)  
**Sandra K. Deitch**

Mailing Address 1298 Este Ln

City Santa Fe State NM Zip Code 87501-7015

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

Name of Employer Self Occupation Arts

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 04 / 2014

**Transaction ID : C10345908**

Amount of Each Receipt this Period  
**100.00**

**C.** Full Name (Last, First, Middle Initial)  
**Diane D. Denish**

Mailing Address 2604 Morrow Rd NE

City Albuquerque State NM Zip Code 87106-2523

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

Name of Employer Self Occupation Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1750.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 29 / 2014

**Transaction ID : C10375892**

Amount of Each Receipt this Period  
**250.00**

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

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

**500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

**A.** Full Name (Last, First, Middle Initial)  
**Constance Hope Diamond**

Mailing Address 9308 Palm Bch NE

City Albuquerque State NM Zip Code 87111-6440

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

Name of Employer The Jeff Diamond Law Firm Occupation Paralegal/Case Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **860.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 02 / 2014

**Transaction ID : C10343014**

Amount of Each Receipt this Period  
 10.00

**B.** Full Name (Last, First, Middle Initial)  
**Constance Hope Diamond**

Mailing Address 9308 Palm Bch NE

City Albuquerque State NM Zip Code 87111-6440

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

Name of Employer The Jeff Diamond Law Firm Occupation Paralegal/Case Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **860.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 03 / 2014

**Transaction ID : C10344967**

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
**Constance Hope Diamond**

Mailing Address 9308 Palm Bch NE

City Albuquerque State NM Zip Code 87111-6440

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

Name of Employer The Jeff Diamond Law Firm Occupation Paralegal/Case Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **860.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 09 / 2014

**Transaction ID : C10351084**

Amount of Each Receipt this Period  
 350.00

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

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

**860.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

**A.** Full Name (Last, First, Middle Initial)  
**Ernest Dole**

Mailing Address 3920 Julene St NE

City Albuquerque State NM Zip Code 87111-3843

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

Name of Employer UNMH Occupation Clinical Pharmacist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **650.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 30 / 2014**

**Transaction ID : C10376220**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address 590 Monte Alto

City Santa Fe State NM Zip Code 87501-6172

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

Name of Employer Self Occupation Entrepreneur

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 29 / 2014**

**Transaction ID : C10339189**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**Ethan Michael Epstein Esq.**

Mailing Address PO Box 6638

City Albuquerque State NM Zip Code 87197-6638

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

Name of Employer Epstein & Company LLC Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 03 / 2014**

**Transaction ID : C10344972**

Amount of Each Receipt this Period  
**250.00**

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

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

**1000.00**

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

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

FOR LINE NUMBER: PAGE 20 OF 111  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

**A.** Full Name (Last, First, Middle Initial)  
**Paul Evans**

Mailing Address 3119 Florida St NE

City Albuquerque State NM Zip Code 87110-2616

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

Name of Employer Bernalillo County Occupation Television Producer/Director

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 255.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : C10376265**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 100.00

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

Mailing Address 1901 Roma Ave NE

City Albuquerque State NM Zip Code 87106

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : C10378930**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

**C.** Full Name (Last, First, Middle Initial)  
**Michelle L. Giger**

Mailing Address 4808 College Heights Drive NW

City Albuquerque State NM Zip Code 87120-2435

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

Name of Employer Center for Civic Values Occupation Nonprofit CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 1540.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 27 / 2014

**Transaction ID : C10336680**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 65.00

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

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

\_\_\_\_\_ 415.00

\_\_\_\_\_

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

**A.** Full Name (Last, First, Middle Initial)  
**Michelle L. Giger**

Mailing Address 4808 College Heights Drive NW

City Albuquerque State NM Zip Code 87120-2435

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

Name of Employer Center for Civic Values Occupation Nonprofit CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1540.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 27 / 2014

**Transaction ID : C10373428**

Amount of Each Receipt this Period  
65.00

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

Mailing Address 1224 Rockrose Rd NE

City Albuquerque State NM Zip Code 87122-1115

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

Name of Employer None Occupation Retired Professor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 28 / 2014

**Transaction ID : C10375256**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**J. Katherine Girard**

Mailing Address 5105 Royene Ave NE

City Albuquerque State NM Zip Code 87110-5841

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

Name of Employer Wray & Girard, PC Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : C10372470**

Amount of Each Receipt this Period  
500.00

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

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

815.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

Full Name (Last, First, Middle Initial) <b>Vicki Gottlieb</b>		Date of Receipt MM / DD / YYYY 05 / 15 / 2014
Mailing Address 91 Juniper Rd		<b>Transaction ID : C10328146</b>
City Placitas	State NM	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer None	Occupation Retired	Election Cycle-to-Date 500.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>Eileen Grevey-Hillson</b>		Date of Receipt MM / DD / YYYY 06 / 27 / 2014
Mailing Address 915 Camino Ranchitos NW		<b>Transaction ID : C10374367</b>
City Albuquerque	State NM	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer None	Occupation Retired	Election Cycle-to-Date 1000.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>Deborah R. Grisham</b>		Date of Receipt MM / DD / YYYY 06 / 30 / 2014
Mailing Address 3330 Linda Vista Ave SE		<b>Transaction ID : C10376252</b>
City Albuquerque	State NM	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Albuquerque Public Schools	Occupation Teacher	Election Cycle-to-Date 450.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

**A.** Full Name (Last, First, Middle Initial)  
**Deborah Hall**

Mailing Address 521 Solano Dr NE

City Albuquerque State NM Zip Code 87108-1047

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

Name of Employer Retired Occupation Physician/Mediator

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 29 / 2014

**Transaction ID : C10375922**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 1332 Camino Ecuestre NW

City Albuquerque State NM Zip Code 87107-2613

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

Name of Employer Self Occupation Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 29 / 2014

**Transaction ID : C10375899**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**David W. Harris**

Mailing Address 5923 Los Hermanos Ct NE

City Albuquerque State NM Zip Code 87111-1357

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

Name of Employer University of New Mexico Occupation Executive VP

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : C10378921**

Amount of Each Receipt this Period  
250.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

**A.** Full Name (Last, First, Middle Initial)  
**Fred R. Harris**

Mailing Address 472 Priestly Rd

City Corrales State NM Zip Code 87048-9330

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

Name of Employer University of New Mexico Occupation Professor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **650.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 29 / 2014**

**Transaction ID : C10375898**

Amount of Each Receipt this Period  
**200.00**

**B.** Full Name (Last, First, Middle Initial)  
**LaDonna V. Harris**

Mailing Address 288 Placitas Rd NW

City Albuquerque State NM Zip Code 87107-5331

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 21 / 2014**

**Transaction ID : C10368165**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**F. Michael Hart**

Mailing Address 1801 Rio Grande Blvd NW  
Oso Del Rio

City Albuquerque State NM Zip Code 87104-2566

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

Name of Employer Martinez, Hart & Thompson, PC Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3100.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 29 / 2014**

**Transaction ID : C10375886**

Amount of Each Receipt this Period  
**500.00**

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

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

**1200.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

Full Name (Last, First, Middle Initial) <b>A. Arthur Hayman</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2014	
Mailing Address 1719 Avenida Alturas NE		<b>Transaction ID : C10382032</b>	
City Albuquerque	State NM	Zip Code 87110-4944	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2000.00	
Name of Employer Highland Pharmacy	Occupation CEO		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 4600.00		

Full Name (Last, First, Middle Initial) <b>B. Penelope S. Holbrook</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 20 / 2014	
Mailing Address 804 Camino Del Prado NW		<b>Transaction ID : C10331088</b>	
City Albuquerque	State NM	Zip Code 87114-1050	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 50.00	
Name of Employer None	Occupation Retired		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 225.00		

Full Name (Last, First, Middle Initial) <b>C. Thomas J. Horan</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 25 / 2014	
Mailing Address 510 Laguna Blvd SW		<b>Transaction ID : C10336485</b>	
City Albuquerque	State NM	Zip Code 87104-1117	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 50.00	
Name of Employer Self	Occupation Government Relations		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 800.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2100.00
<b>TOTAL</b> This Period (last page this line number only).....	[Empty Box]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

**A.** Full Name (Last, First, Middle Initial)  
**Thomas J. Horan**

Mailing Address 510 Laguna Blvd SW

City Albuquerque State NM Zip Code 87104-1117

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

Name of Employer Self Occupation Government Relations

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
800.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 25 / 2014

**Transaction ID : C10370525**

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
**Tommy D. Hughes**

Mailing Address 2309 Rozinante Dr NW

City Albuquerque State NM Zip Code 87104-3047

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

Name of Employer Hughes & Strumor Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : C10375856**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Robin T. Hunn**

Mailing Address 3607 Calle Del Sol NE

City Albuquerque State NM Zip Code 87110-6111

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

Name of Employer Self Occupation Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
299.99

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : C10376244**

Amount of Each Receipt this Period  
100.00

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

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

650.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

**A.** Full Name (Last, First, Middle Initial)  
**Kathleen D. Ingley**

Mailing Address 5228 Tierra Amada St NW

City Albuquerque State NM Zip Code 87120-1366

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

Name of Employer US Gov't, DoD Occupation retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **325.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 16 / 2014

**Transaction ID : C10328948**

Amount of Each Receipt this Period  
**25.00**

**B.** Full Name (Last, First, Middle Initial)  
**Kathleen D. Ingley**

Mailing Address 5228 Tierra Amada St NW

City Albuquerque State NM Zip Code 87120-1366

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

Name of Employer US Gov't, DoD Occupation retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **325.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 31 / 2014

**Transaction ID : C10340847**

Amount of Each Receipt this Period  
**25.00**

**C.** Full Name (Last, First, Middle Initial)  
**Eileen Ireland**

Mailing Address 722 5th Street

City Las Vegas State NM Zip Code 87701-4329

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

Name of Employer none Occupation not employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **504.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 08 / 2014

**Transaction ID : C10349641**

Amount of Each Receipt this Period  
**25.00**

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

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

**75.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

**A.** Full Name (Last, First, Middle Initial)  
**Karl E. Johnson**

Mailing Address 4808 College Heights Drive NW

City Albuquerque State NM Zip Code 87120-2435

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

Name of Employer Johnson Barnhouse & Keegan LLP Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1540.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 27 / 2014

**Transaction ID : C10336681**

Amount of Each Receipt this Period  
65.00

**B.** Full Name (Last, First, Middle Initial)  
**Karl E. Johnson**

Mailing Address 4808 College Heights Drive NW

City Albuquerque State NM Zip Code 87120-2435

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

Name of Employer Johnson Barnhouse & Keegan LLP Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1540.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2014

**Transaction ID : C10373429**

Amount of Each Receipt this Period  
65.00

**C.** Full Name (Last, First, Middle Initial)  
**Karen Kahn**

Mailing Address 22 Eagle Nest Ct NE

City Albuquerque State NM Zip Code 87122-2025

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

Name of Employer Modrall Sperling Law Firm Occupation Lawyer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
450.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 29 / 2014

**Transaction ID : C10375392**

Amount of Each Receipt this Period  
250.00

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

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

380.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

**A.** Full Name (Last, First, Middle Initial)  
**Michael L. Keleher**

Mailing Address 1400 Morningside Dr NE

City Albuquerque State NM Zip Code 87110-5640

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

Name of Employer Keleher & McLeod, PA Occupation Retired Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 20 / 2014

**Transaction ID : C10332081**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**John J. Kelly Esq.**

Mailing Address 3009 Calle San Ysidro NW

City Albuquerque State NM Zip Code 87107-3029

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

Name of Employer Modrall Sperling Law firm Occupation Attorney.

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2400.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 03 / 2014

**Transaction ID : C10344969**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Shannon L. Kennedy**

Mailing Address 2420 Dietz Farm Rd NW

City Los Ranchos State NM Zip Code 87107-3151

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

Name of Employer Kennedy Law Firm Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 06 / 2014

**Transaction ID : C10349560**

Amount of Each Receipt this Period  
1000.00

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

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

**A.** Full Name (Last, First, Middle Initial)  
**Dave Kirby**

Mailing Address 1115 San Rafael Ave NE

City Albuquerque State NM Zip Code 87122-1130

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

Name of Employer Leidos Occupation Sr. Procurement Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 04 / 2014

**Transaction ID : C10344956**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 1115 San Rafael Ave NE

City Albuquerque State NM Zip Code 87122-1130

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

Name of Employer Leidos Occupation Sr. Procurement Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 07 / 2014

**Transaction ID : C10349579**

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
**Julianna D. Koob**

Mailing Address 1200 Columbia Dr NE

City Albuquerque State NM Zip Code 87106-2604

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

Name of Employer Self Occupation Government Relations

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1100.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 23 / 2014

**Transaction ID : C10334991**

Amount of Each Receipt this Period  
100.00

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

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

300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

**A.** Full Name (Last, First, Middle Initial)  
**Kathyleen M. Kunkel**

Mailing Address 1324 Camino Amparo NW

City Albuquerque State NM Zip Code 87107-2606

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

Name of Employer Walz and Associates Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **440.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 16 / 2014

**Transaction ID : C10328227**

Amount of Each Receipt this Period  
 20.00

**B.** Full Name (Last, First, Middle Initial)  
**Kathyleen M. Kunkel**

Mailing Address 1324 Camino Amparo NW

City Albuquerque State NM Zip Code 87107-2606

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

Name of Employer Walz and Associates Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **440.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 16 / 2014

**Transaction ID : C10357065**

Amount of Each Receipt this Period  
 20.00

**C.** Full Name (Last, First, Middle Initial)  
**Jane Laflin**

Mailing Address 3024 Delano PI NE

City Albuquerque State NM Zip Code 87106-2035

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

Name of Employer Butt Thornton & Baehr Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : C10357597**

Amount of Each Receipt this Period  
 100.00

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

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

140.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

**A.** Full Name (Last, First, Middle Initial)  
**Kathleen Davidson Lebeck**

Mailing Address 1006 Tramway Ln NE

City Albuquerque State NM Zip Code 87122-1317

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

Name of Employer Self Occupation Admin asst.

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 02 / 2014**

**Transaction ID : C10343033**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**Stephen F. Lewis**

Mailing Address 5015 Royene Ave NE

City Albuquerque State NM Zip Code 87110-5839

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

Name of Employer University of New Mexico School of Med Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 03 / 2014**

**Transaction ID : C10343899**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address 313 Carlisle Blvd NE

City Albuquerque State NM Zip Code 87106-1318

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

Name of Employer Retired Occupation Solar Energy Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 12 / 2014**

**Transaction ID : C10355090**

Amount of Each Receipt this Period  
**1000.00**

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

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

**1500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

**A.** Full Name (Last, First, Middle Initial)  
**Brian W. Lindberg**

Mailing Address 4205 Webster Ct

City Annandale State VA Zip Code 22003-3424

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

Name of Employer Self/Limited to Lindberg, LLC Occupation Public Policy Advisor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 20 / 2014**

**Transaction ID : C10332170**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address 430 North Jackson St

City Arlington State VA Zip Code 22201

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

Name of Employer Van Scoyoc & Assoc. Occupation Vice President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 27 / 2014**

**Transaction ID : C10374361**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**James Lyle**

Mailing Address 1115 Roadrunner Ln NW

City Los Ranchos State NM Zip Code 87107-6443

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

Name of Employer Self Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 06 / 2014**

**Transaction ID : C10349572**

Amount of Each Receipt this Period  
**1000.00**

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

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

**1750.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

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

Mailing Address 2301 Vista Larga Ave NE

City Albuquerque State NM Zip Code 87106-3733

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

Name of Employer VAWTPower Management, Inc Occupation Engineer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 20 / 2014

**Transaction ID : C10367405**

Amount of Each Receipt this Period  
**500.00**

**B.** Full Name (Last, First, Middle Initial)  
**Karen J. Meyers**

Mailing Address 905 Fruit Ave NW

City Albuquerque State NM Zip Code 87102-1917

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

Name of Employer State of New Mexico Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 06 / 2014

**Transaction ID : C10349563**

Amount of Each Receipt this Period  
**150.00**

**C.** Full Name (Last, First, Middle Initial)  
**David C. Mielke**

Mailing Address 34 Camino De Los Desmontes

City Placitas State NM Zip Code 87043-8730

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

Name of Employer Sonosky, Chambers, Sachse, Mielke & Br Occupation Lawyer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1575.20**

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 20 / 2014

**Transaction ID : C10365757**

Amount of Each Receipt this Period  
**1000.00**

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

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

**1650.00**

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

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

FOR LINE NUMBER: PAGE 35 OF 111  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

**A.** Full Name (Last, First, Middle Initial)  
**Melinda Moffitt**

Mailing Address 2710 Veranda Rd NW

City Albuquerque State NM Zip Code 87107-2941

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
800.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 08 / 2014

**Transaction ID : C10349638**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 13509 Pino Canyon PI NE

City Albuquerque State NM Zip Code 87111-7102

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

Name of Employer Economic Forum of ABQ Occupation Executive Director

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : C10372340**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Sarita Nair**

Mailing Address 3 Garden Park Cir NW

City Albuquerque State NM Zip Code 87107-2620

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

Name of Employer Self Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1200.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 29 / 2014

**Transaction ID : C10339127**

Amount of Each Receipt this Period  
75.00

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

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

675.00

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

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

FOR LINE NUMBER: PAGE 36 OF 111  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

**A.** Full Name (Last, First, Middle Initial)  
**Sarita Nair**

Mailing Address 3 Garden Park Cir NW

City Albuquerque State NM Zip Code 87107-2620

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

Name of Employer Self Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1200.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 29 / 2014

**Transaction ID : C10375277**

Amount of Each Receipt this Period  
75.00

**B.** Full Name (Last, First, Middle Initial)  
**Daniel A Najjar**

Mailing Address 2594 Calle Delfino

City Santa Fe State NM Zip Code 87505-6488

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

Name of Employer Virtue & Najjar PC Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : C10375622**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**David L. Norvell**

Mailing Address 1206 Las Lomas Rd NE

City Albuquerque State NM Zip Code 87106-4526

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

Name of Employer Norvell Law Firm Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 06 / 2014

**Transaction ID : C10349569**

Amount of Each Receipt this Period  
100.00

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

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

425.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

**A.** Full Name (Last, First, Middle Initial)  
**Michael O'Hara**

Mailing Address **1 Camino Ranchitos**

City **Alamogordo** State **NM** Zip Code **88310-9306**

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

Name of Employer **Self** Occupation **Insurance Claims Adjuster**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 14 / 2014**

**Transaction ID : C10356563**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**Bill B. O'Neill**

Mailing Address **343 Sarah Ln NW Apt D**

City **Albuquerque** State **NM** Zip Code **87114-1059**

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

Name of Employer **PEP Program** Occupation **Development Director**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**750.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 29 / 2014**

**Transaction ID : C10375972**

Amount of Each Receipt this Period  
**100.00**

**C.** Full Name (Last, First, Middle Initial)  
**James P. O'Neill**

Mailing Address **3301 Beach Road NW**

City **Albuquerque** State **NM** Zip Code **87104-2911**

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

Name of Employer **O'Neill Consulting LLC** Occupation **tax consultant/lobbyist**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1505.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 31 / 2014**

**Transaction ID : C10340884**

Amount of Each Receipt this Period  
**500.00**

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

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

**850.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

**A.** Full Name (Last, First, Middle Initial)  
**Debra S. Olinger**

Mailing Address 2253 Wilderness Vw

City Santa Fe State NM Zip Code 87505-6086

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

Name of Employer Self Occupation Investments

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 15 / 2014

**Transaction ID : C10328043**

Amount of Each Receipt this Period  
**200.00**

**B.** Full Name (Last, First, Middle Initial)  
**Debra S. Olinger**

Mailing Address 2253 Wilderness Vw

City Santa Fe State NM Zip Code 87505-6086

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

Name of Employer Self Occupation Investments

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 28 / 2014

**Transaction ID : C10375259**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**Kathleen K. Parton**

Mailing Address 6401 Oak Hill Ct. NE

City Albuquerque State NM Zip Code 87111-6540

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

Name of Employer None Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **735.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 28 / 2014

**Transaction ID : C10374540**

Amount of Each Receipt this Period  
**200.00**

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

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

**650.00**

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

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

FOR LINE NUMBER: PAGE 39 OF 111  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

**A.** Full Name (Last, First, Middle Initial)  
**Rae Perls**

Mailing Address 15 Tennis Ct NW

City Albuquerque State NM Zip Code 87120-1825

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 28 / 2014

**Transaction ID : C10338332**

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
**Charles R. Powell**

Mailing Address PO Box 20451

City Albuquerque State NM Zip Code 87154-0451

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

Name of Employer None Occupation Retired Postal Worker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : C10376247**

Amount of Each Receipt this Period  
 100.00

**C.** Full Name (Last, First, Middle Initial)  
**Phillip E. Prevender**

Mailing Address 12928 Sandia Point Rd NE

City Albuquerque State NM Zip Code 87111-8198

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

Name of Employer Self Occupation Financial Services

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : C10375669**

Amount of Each Receipt this Period  
 250.00

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

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

600.00

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

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

FOR LINE NUMBER: PAGE 40 OF 111  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

**A.** Full Name (Last, First, Middle Initial)  
**Pueblo of Isleta**

Mailing Address **PO Box 1290**

City **Isleta** State **NM** Zip Code **87022-1290**

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5200.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 28 / 2014**

**Transaction ID : C10338445**

Amount of Each Receipt this Period  
**2500.00**

**B.** Full Name (Last, First, Middle Initial)  
**PUEBLO OF JEMEZ**

Mailing Address **PO Box 100**

City **Jemez Pueblo** State **NM** Zip Code **87024-0100**

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 27 / 2014**

**Transaction ID : C10374546**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**Pueblo of Sandia**

Mailing Address **481 Sandia Loop Rd**

City **Bernalillo** State **NM** Zip Code **87004**

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**4000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 17 / 2014**

**Transaction ID : C10361387**

Amount of Each Receipt this Period  
**1000.00**

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

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

**4500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

**A.** Full Name (Last, First, Middle Initial)  
**Michael A Puelle**

Mailing Address **PO Box 25466**

City **Albuquerque** State **NM** Zip Code **87125-0466**

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

Name of Employer **Associated General Contractors - New M** Occupation **Director, Public Policy & Government R**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 29 / 2014**

**Transaction ID : C10375934**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**Arvind Aashir Raichur**

Mailing Address **8521 San Diego Ct NE**

City **Albuquerque** State **NM** Zip Code **87122-3622**

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

Name of Employer **Sonicseo.com, Inc.** Occupation **President/web designer**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 28 / 2014**

**Transaction ID : C10375258**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**Richard E. Ransom**

Mailing Address **5407 Eakes Rd NW**

City **Los Ranchos** State **NM** Zip Code **87107-5531**

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

Name of Employer **None** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 26 / 2014**

**Transaction ID : C10371875**

Amount of Each Receipt this Period  
**500.00**

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

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

**1250.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

**A.** Full Name (Last, First, Middle Initial)  
**David Clark Rigsby**

Mailing Address **PO Box 44**

City **Embudo** State **NM** Zip Code **87531-0044**

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

Name of Employer **Embudo Valley Organics** Occupation **Farmer**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 12 / 2014**

**Transaction ID : C10355247**

Amount of Each Receipt this Period  
**1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**Edward L. Romero**

Mailing Address **1521 Eagle Ridge Rd NE**

City **Albuquerque** State **NM** Zip Code **87122-1156**

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

Name of Employer **None** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 25 / 2014**

**Transaction ID : C10371381**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**Joseph D. Sabatini**

Mailing Address **3514 6th St NW**

City **Albuquerque** State **NM** Zip Code **87107-2419**

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

Name of Employer **None** Occupation **Retired Librarian**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**300.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 30 / 2014**

**Transaction ID : C10376242**

Amount of Each Receipt this Period  
**200.00**

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

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

**1700.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

**A.** Full Name (Last, First, Middle Initial)  
**John P. Salazar**

Mailing Address **PO Box 1888**

City **Albuquerque** State **NM** Zip Code **87103-1888**

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

Name of Employer **Rodey Dickason Sloan Akin & Robb** Occupation **Attorney**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 06 / 2014**

**Transaction ID : C10349559**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**Nick L. Salazar**

Mailing Address **PO Box 1076**

City **San Juan Pueblo** State **NM** Zip Code **87566-1076**

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

Name of Employer **Los Alamos National Laboratory** Occupation **Government Relations**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**800.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 30 / 2014**

**Transaction ID : C10375605**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**Joanne P. Sanchez**

Mailing Address **5282 N. Arrowhead Dr**

City **Eloy** State **AZ** Zip Code **85131**

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

Name of Employer **None** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 29 / 2014**

**Transaction ID : C10375929**

Amount of Each Receipt this Period  
**250.00**

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

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

**1000.00**

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

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

FOR LINE NUMBER: PAGE 44 OF 111  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

**A.** Full Name (Last, First, Middle Initial)  
**Ken Sanchez**

Mailing Address 9609 Sundoro PI NW

City Albuquerque State NM Zip Code 87120-2988

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

Name of Employer Gilbert Sanchez Tax and Accounting Sev Occupation VP of Operations

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 28 / 2014

**Transaction ID : C10381672**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Raymond G. Sanchez**

Mailing Address PO Box 1966

City Albuquerque State NM Zip Code 87103-1966

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

Name of Employer Sanchez Mowrer & Desiderio Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 30 / 2014

**Transaction ID : C10339886**

Amount of Each Receipt this Period  
 775.00

**C.** Full Name (Last, First, Middle Initial)  
**Raymond G. Sanchez**

Mailing Address PO Box 1966

City Albuquerque State NM Zip Code 87103-1966

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

Name of Employer Sanchez Mowrer & Desiderio Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : C10375606**

Amount of Each Receipt this Period  
 775.00

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

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

650.00

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

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

FOR LINE NUMBER: PAGE 45 OF 111  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

**A.** Full Name (Last, First, Middle Initial)  
**Maureen A. Sanders Esq.**

Mailing Address 3410 Mackland Ave NE

City Albuquerque State NM Zip Code 87106-1217

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

Name of Employer Sanders & Westbrook Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 30 / 2014**

**Transaction ID : C10375890**

Amount of Each Receipt this Period  
**200.00**

**B.** Full Name (Last, First, Middle Initial)  
**Barbara H. Scharf**

Mailing Address 5900 Wildflower Trl NE

City Albuquerque State NM Zip Code 87111-8052

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 07 / 2014**

**Transaction ID : C10351080**

Amount of Each Receipt this Period  
**150.00**

**C.** Full Name (Last, First, Middle Initial)  
**Susan Scott**

Mailing Address 7025 Ottawa Rd NE

City Albuquerque State NM Zip Code 87110-2249

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

Name of Employer UNM School of Medicine Occupation Working retiree, physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **554.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 29 / 2014**

**Transaction ID : C10375896**

Amount of Each Receipt this Period  
**500.00**

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

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

**850.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

**A.** Full Name (Last, First, Middle Initial)  
**Dan W. Shapiro**

Mailing Address 6032 Quemado Dr NE

City Albuquerque State NM Zip Code 87109-3812

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

Name of Employer Dan Shapiro PC Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **950.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 30 / 2014**

**Transaction ID : C10340777**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**Paul A. Shave**

Mailing Address 2909 Sol De Vida NW

City Albuquerque State NM Zip Code 87120-1352

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

Name of Employer Navy Occupation retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **220.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 09 / 2014**

**Transaction ID : C10350677**

Amount of Each Receipt this Period  
**25.00**

**C.** Full Name (Last, First, Middle Initial)  
**Martin Shore**

Mailing Address 6509 High Ridge Pl NE

City Albuquerque State NM Zip Code 87111-8154

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

Name of Employer retired Occupation retired CPA

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **465.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 24 / 2014**

**Transaction ID : C10336461**

Amount of Each Receipt this Period  
**38.00**

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

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

**313.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

Full Name (Last, First, Middle Initial) <b>A. Martin Shore</b>		Date of Receipt MM / DD / YYYY 05 / 30 / 2014
Mailing Address 6509 High Ridge PI NE		<b>Transaction ID : C10339822</b>
City Albuquerque	State NM	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer retired	Occupation retired CPA	Amount of Each Receipt this Period 465.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 465.00	

Full Name (Last, First, Middle Initial) <b>B. Gregory A. Smith</b>		Date of Receipt MM / DD / YYYY 06 / 27 / 2014
Mailing Address 513 Autumn Wind Way		<b>Transaction ID : C10374268</b>
City Rockville	State MD	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Hobbs Straus Dean & Walker LLP	Occupation Attorney/Lobbyist	Amount of Each Receipt this Period 1000.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) <b>C. Bethany Spratley</b>		Date of Receipt MM / DD / YYYY 06 / 29 / 2014
Mailing Address 8520 Harwood Ave NE		<b>Transaction ID : C10375945</b>
City Albuquerque	State NM	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Albuquerque Public Schools	Occupation Teacher	Amount of Each Receipt this Period 250.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	775.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

**A.** Full Name (Last, First, Middle Initial)  
**Patricia M. Stelzner**

Mailing Address 3521 Campbell Ct NW

City Albuquerque	State NM	Zip Code 87104-3201
---------------------	-------------	------------------------

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

Name of Employer N/A	Occupation Retired Attorney
-------------------------	--------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 03 / 2014

**Transaction ID : C10344377**

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
**Patricia M. Stelzner**

Mailing Address 3521 Campbell Ct NW

City Albuquerque	State NM	Zip Code 87104-3201
---------------------	-------------	------------------------

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

Name of Employer N/A	Occupation Retired Attorney
-------------------------	--------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 29 / 2014

**Transaction ID : C10375878**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Gail S. Stewart**

Mailing Address 731 Camino Del Bosque NW

City Albuquerque	State NM	Zip Code 87114-2307
---------------------	-------------	------------------------

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

Name of Employer Steven Granberg, PA	Occupation Attorney
---	------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : C10378538**

Amount of Each Receipt this Period  
250.00

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

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

800.00

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

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

FOR LINE NUMBER: PAGE 49 OF 111  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

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

Mailing Address 1501 San Patricio Ave SW

City Albuquerque State NM Zip Code 87104-1045

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

Name of Employer Self Occupation Investments

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1750.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : C10379680**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 7459B Old Santa Fe Trl

City Santa Fe State NM Zip Code 87505-9578

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

Name of Employer Self Occupation Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
675.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 30 / 2014

**Transaction ID : C10339831**

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
**Paula Tackett**

Mailing Address 7459B Old Santa Fe Trl

City Santa Fe State NM Zip Code 87505-9578

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

Name of Employer Self Occupation Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
675.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : C10375608**

Amount of Each Receipt this Period  
100.00

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

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

450.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

**A.** Full Name (Last, First, Middle Initial)  
**Alan Torgerson**

Mailing Address 12231 Academy Rd, NE

City Albuquerque State NM Zip Code 87111

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

Name of Employer None Occupation Retired Judge

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : C10376034**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Carol Tucker Trelease**

Mailing Address 8234 Raintree Dr NE

City Albuquerque State NM Zip Code 87122-1333

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

Name of Employer NMI Occupation Executive Director

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : C10372512**

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
**Jerrold M. Trim**

Mailing Address 1659 Tierra Del Rio NW

City Albuquerque State NM Zip Code 87107-3244

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 24 / 2014

**Transaction ID : C10369911**

Amount of Each Receipt this Period  
1000.00

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

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

2100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

**A.** Full Name (Last, First, Middle Initial)  
**H. John Underwood**

Mailing Address 1221 Mechem Dr  
Ste 5

City Ruidoso State NM Zip Code 88345-7224

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

Name of Employer H. John Underwood, Ltd. Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : C10379020**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Gloria Valencia-Weber**

Mailing Address 2810 Bosque Del Sol Ln NW

City Albuquerque State NM Zip Code 87120-3135

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 03 / 2014

**Transaction ID : C10344066**

Amount of Each Receipt this Period  
300.00

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

Mailing Address 8232 Loma Del Norte Rd NE

City Albuquerque State NM Zip Code 87109-4981

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

Name of Employer Ret. Occupation Retired Air Force/ Safety Engineer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2027.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 28 / 2014

**Transaction ID : C10338359**

Amount of Each Receipt this Period  
150.00

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

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

1450.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

**A.** Full Name (Last, First, Middle Initial)  
**John K. Vance**

Mailing Address 8232 Loma Del Norte Rd NE

City Albuquerque State NM Zip Code 87109-4981

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

Name of Employer Ret. Occupation Retired Air Force/ Safety Engineer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2027.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 28 / 2014**

**Transaction ID : C10374520**

Amount of Each Receipt this Period  
**150.00**

**B.** Full Name (Last, First, Middle Initial)  
**Charles I. Wellborn**

Mailing Address 3819 La Hacienda Dr NE

City Albuquerque State NM Zip Code 87110-6115

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

Name of Employer Wellborn Strategies LLC Occupation Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 21 / 2014**

**Transaction ID : C10368268**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**Margaret C. Werner Washburne**

Mailing Address 424 Wellesley Dr SE

City Albuquerque State NM Zip Code 87106-1424

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

Name of Employer UNM Occupation Professor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **850.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 29 / 2014**

**Transaction ID : C10375905**

Amount of Each Receipt this Period  
**600.00**

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

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

**1000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

Full Name (Last, First, Middle Initial) <b>A. Patricia S. White</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 29 / 2014	
Mailing Address 609 Encino PI NE Apt 207		<b>Transaction ID : C10375913</b>	
City Albuquerque	State NM	Amount of Each Receipt this Period 1000.00	
Zip Code 87102-2614			
FEC ID number of contributing federal political committee. C			
Name of Employer None	Occupation Retired		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1075.00		

Full Name (Last, First, Middle Initial) <b>B. Cheryl L. Willman</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2014	
Mailing Address 4633 Los Poblanos Cir NW		<b>Transaction ID : C10376209</b>	
City Los Ranchos	State NM	Amount of Each Receipt this Period 500.00	
Zip Code 87107-5554			
FEC ID number of contributing federal political committee. C			
Name of Employer UNM	Occupation Physician/Scientist		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00		

Full Name (Last, First, Middle Initial) <b>C. James Wood</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 21 / 2014	
Mailing Address 509 Camino La Morada NW		<b>Transaction ID : C10368217</b>	
City Albuquerque	State NM	Amount of Each Receipt this Period 2600.00	
Zip Code 87114-2043			
FEC ID number of contributing federal political committee. C			
Name of Employer Law Office of James H Wood PC	Occupation Attorney		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4100.00
<b>TOTAL</b> This Period (last page this line number only).....	[Empty Box]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

**A.** Full Name (Last, First, Middle Initial)  
**Beulah Woodfin**

Mailing Address 5004 Northern Trl NW

City Albuquerque State NM Zip Code 87120-2026

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 29 / 2014

**Transaction ID : C10375285**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**Carolina E. Yahne**

Mailing Address 441 Solano Dr NE

City Albuquerque State NM Zip Code 87108-1045

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

Name of Employer Self Occupation Psychologist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **425.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 23 / 2014

**Transaction ID : C10368990**

Amount of Each Receipt this Period  
**100.00**

**C.** Full Name (Last, First, Middle Initial)  
**Amador Dean Aguillen**

Mailing Address PO Box 15506

City Washington State DC Zip Code 20003-0506

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

Name of Employer Ogilvy Government Relations Occupation Senior Vice President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : C10378370A**

Amount of Each Receipt this Period  
**500.00**

\* Earmarked Contribution: See Below

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

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

**700.00**



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

**A.** Full Name (Last, First, Middle Initial)  
**Jacqueline Baca**

Mailing Address 279 Mariquita Rd

City Corrales State NM Zip Code 87048-8238

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

Name of Employer: Bueno Foods Occupation: President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 350.00

Date of Receipt: 06 / 28 / 2014

**Transaction ID : C10378337A**

Amount of Each Receipt this Period: 100.00

\* Earmarked Contribution: See Below

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

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C** c00439703

Name of Employer: Occupation: Conduit total listed in Agg. field

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 8081.50

Date of Receipt: 06 / 30 / 2014

**Transaction ID : C10378337AB**

Amount of Each Receipt this Period: 100.00

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

**C.** Full Name (Last, First, Middle Initial)  
**Caren E. Cowan**

Mailing Address 3417 Avenida Charada

City Albuquerque State NM Zip Code 87107-2601

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

Name of Employer: NM Cattle Growers/NM Stockman Occupation: Exec Dir / Publisher

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 300.00

Date of Receipt: 06 / 19 / 2014

**Transaction ID : C10369855A**

Amount of Each Receipt this Period: 100.00

\* Earmarked Contribution: See Below

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

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

200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

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

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C c00439703**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_  
Conduit total listed in Agg. field \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date  
 \_\_\_\_\_ **8081.50**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 22 / 2014**

**Transaction ID : C10369855AB**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **100.00**

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

**B.** Full Name (Last, First, Middle Initial)  
**MICHAEL A. CREWS**

Mailing Address **6501 Caballero Pkwy NW**

City **Los Ranchos** State **NM** Zip Code **87107-5603**

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

Name of Employer **RETIRED** Occupation **PHYSICIAN**

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date  
 \_\_\_\_\_ **575.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 26 / 2014**

**Transaction ID : C10378327A**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **250.00**

\* Earmarked Contribution: See Below

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

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C c00439703**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_  
Conduit total listed in Agg. field \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date  
 \_\_\_\_\_ **8081.50**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 30 / 2014**

**Transaction ID : C10378327AB**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **250.00**

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

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

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

\_\_\_\_\_ **250.00**

\_\_\_\_\_

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

Full Name (Last, First, Middle Initial) <b>A. John Lawton Lawton Davis</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 19 / 2014	
Mailing Address 533 Roehl Rd NW		<b>Transaction ID : C10369851A</b>	
City Los Ranchos	State NM	Zip Code 87107-6651	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		* Earmarked Contribution: See Below	
Name of Employer NA	Occupation retired		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1750.00		

Full Name (Last, First, Middle Initial) <b>B. ACTBLUE</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 22 / 2014	
Mailing Address PO Box 382110		<b>Transaction ID : C10369851AB</b>	
City Cambridge	State MA	Zip Code 02238-2110	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C c00439703		[MEMO ITEM] Note: Above Contribution earmarked through this organization.	
Name of Employer	Occupation Conduit total listed in Agg. field		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 8081.50		

Full Name (Last, First, Middle Initial) <b>C. Michelle L. Giger</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 15 / 2014	
Mailing Address 4808 College Heights Drive NW		<b>Transaction ID : C10365768A</b>	
City Albuquerque	State NM	Zip Code 87120-2435	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		* Earmarked Contribution: See Below	
Name of Employer Center for Civic Values	Occupation Nonprofit CEO		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1540.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	750.00
<b>TOTAL</b> This Period (last page this line number only).....	[Empty Box]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

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

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C c00439703**

Name of Employer \_\_\_\_\_ Occupation **Conduit total listed in Agg. field**

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **8081.50**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 15 / 2014**

**Transaction ID : C10365768AB**

Amount of Each Receipt this Period  
 \_\_\_\_\_  
**500.00**

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

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

Mailing Address **1747 Pennsylvania Ave #1000**

City **Washington** State **DC** Zip Code **20006-4636**

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

Name of Employer **Webster, Chamberlain & Bean** Occupation **Attorney**

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **1250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 30 / 2014**

**Transaction ID : C10378391A**

Amount of Each Receipt this Period  
 \_\_\_\_\_  
**500.00**

\* Earmarked Contribution: See Below

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

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C c00439703**

Name of Employer \_\_\_\_\_ Occupation **Conduit total listed in Agg. field**

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **8081.50**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 30 / 2014**

**Transaction ID : C10378391AB**

Amount of Each Receipt this Period  
 \_\_\_\_\_  
**500.00**

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

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

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

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\_\_\_\_\_

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

**A.** Full Name (Last, First, Middle Initial)  
**Dale W W Gunn**

Mailing Address **PO Box 14175**

City **Albuquerque** State **NM** Zip Code **87191**

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

Name of Employer **Zia Diagnostic Imaging** Occupation **Physician**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**270.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 30 / 2014**

**Transaction ID : C10378390A**

Amount of Each Receipt this Period  
**20.00**

\* Earmarked Contribution: See Below

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

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C c00439703**

Name of Employer \_\_\_\_\_ Occupation **Conduit total listed in Agg. field**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**8081.50**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 30 / 2014**

**Transaction ID : C10378390AB**

Amount of Each Receipt this Period  
**20.00**

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

**C.** Full Name (Last, First, Middle Initial)  
**Terry Ihnat**

Mailing Address **3800 Oxbow Village Ln NW**

City **Albuquerque** State **NM** Zip Code **87120-1180**

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

Name of Employer **Not employed** Occupation **Not employed**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**350.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 29 / 2014**

**Transaction ID : C10378349A**

Amount of Each Receipt this Period  
**200.00**

\* Earmarked Contribution: See Below

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

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

**220.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

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

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C c00439703**

Name of Employer \_\_\_\_\_ Occupation **Conduit total listed in Agg. field**

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **8081.50**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 30 / 2014**

**Transaction ID : C10378349AB**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **200.00** \_\_\_\_\_

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

**B.** Full Name (Last, First, Middle Initial)  
**Kathleen D. Ingley**

Mailing Address **5228 Tierra Amada St NW**

City **Albuquerque** State **NM** Zip Code **87120-1366**

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

Name of Employer **US Gov't, DoD** Occupation **retired**

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **325.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 23 / 2014**

**Transaction ID : C10378306A**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **25.00** \_\_\_\_\_

\* Earmarked Contribution: See Below

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

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C c00439703**

Name of Employer \_\_\_\_\_ Occupation **Conduit total listed in Agg. field**

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **8081.50**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 30 / 2014**

**Transaction ID : C10378306AB**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **25.00** \_\_\_\_\_

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

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

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

\_\_\_\_\_ **25.00** \_\_\_\_\_

\_\_\_\_\_

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

**A.** Full Name (Last, First, Middle Initial)  
**Karl E. Johnson**

Mailing Address 4808 College Heights Drive NW

City Albuquerque State NM Zip Code 87120-2435

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

Name of Employer Johnson Barnhouse & Keegan LLP Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1540.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 15 / 2014

**Transaction ID : C10365769A**

Amount of Each Receipt this Period  
500.00

\* Earmarked Contribution: See Below

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

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C** c00439703

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
8081.50

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 15 / 2014

**Transaction ID : C10365769AB**

Amount of Each Receipt this Period  
500.00

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

**C.** Full Name (Last, First, Middle Initial)  
**John M. Karon PhD**

Mailing Address 2505 Elfego Road NW

City Albuquerque State NM Zip Code 87107-3010

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

Name of Employer None Occupation None

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 24 / 2014

**Transaction ID : C10378318A**

Amount of Each Receipt this Period  
250.00

\* Earmarked Contribution: See Below

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

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

750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

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

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C c00439703**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_  
Conduit total listed in Agg. field \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date \_\_\_\_\_  
**8081.50**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
06		30		2014

**Transaction ID : C10378318AB**

Amount of Each Receipt this Period  

250.00
--------

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

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

Mailing Address **Po Box 6351**

City **Santa Fe** State **NM** Zip Code **87502-6351**

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

Name of Employer **SF Public schools** Occupation **Spec Ed Teacher**

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date \_\_\_\_\_  
**1006.00**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
05		16		2014

**Transaction ID : C10336745A**

Amount of Each Receipt this Period  

3.00
------

\* Earmarked Contribution: See Below

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

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C c00439703**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_  
Conduit total listed in Agg. field \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date \_\_\_\_\_  
**8081.50**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
05		18		2014

**Transaction ID : C10336745AB**

Amount of Each Receipt this Period  

3.00
------

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

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

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

3.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 111
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

**A.** Full Name (Last, First, Middle Initial)  
**Lois Zoller**

Mailing Address 1300 N Lake Shore Dr #35D

City Chicago State IL Zip Code 60610-5166

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

Name of Employer Self Occupation Investor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
275.00

Date of Receipt  
06 / 23 / 2014

**Transaction ID : C10378314A**

Amount of Each Receipt this Period  
25.00

\* Earmarked Contribution: See Below

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

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C** c00439703

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
8081.50

Date of Receipt  
06 / 30 / 2014

**Transaction ID : C10378314AB**

Amount of Each Receipt this Period  
25.00

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

**C.** Full Name (Last, First, Middle Initial)  
**Lois Zoller**

Mailing Address 1300 N Lake Shore Dr #35D

City Chicago State IL Zip Code 60610-5166

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

Name of Employer Self Occupation Investor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
275.00

Date of Receipt  
06 / 29 / 2014

**Transaction ID : C10378346A**

Amount of Each Receipt this Period  
100.00

\* Earmarked Contribution: See Below

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

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

125.00

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

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

FOR LINE NUMBER: PAGE 65 OF 111  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

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

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C c00439703**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_  
Conduit total listed in Agg. field \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date  
 \_\_\_\_\_ **8081.50**

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
**06 / 30 / 2014**

**Transaction ID : C10378346AB**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **100.00**

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

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

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date  
 \_\_\_\_\_

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

Amount of Each Receipt this Period  
 \_\_\_\_\_

**C.** Full Name (Last, First, Middle Initial) \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date  
 \_\_\_\_\_

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

Amount of Each Receipt this Period  
 \_\_\_\_\_

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

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

\_\_\_\_\_ **0.00**

\_\_\_\_\_ **63871.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 111
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

**A.** Full Name (Last, First, Middle Initial)  
**AAJ PAC**

Mailing Address **777 6th St NW**  
**Ste 200**

City **Washington** State **DC** Zip Code **20001-3707**

FEC ID number of contributing federal political committee. **C C00024521**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**7000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 27 / 2014**

**Transaction ID : C10374363**

Amount of Each Receipt this Period  
**1000.00**

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

Mailing Address **1455 Pennsylvania Ave NW**

City **Washington** State **DC** Zip Code **20004-1008**

FEC ID number of contributing federal political committee. **C C00041947**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 23 / 2014**

**Transaction ID : C10369065**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**ABBOTT LABORATORIES EMPLOYEE POLITICAL ACTION COMMITTEE**

Mailing Address **100 ABBOTT PARK RD.**  
**D312 AP6D-2**

City **ABBOTT PARK** State **IL** Zip Code **60064**

FEC ID number of contributing federal political committee. **C C00040279**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**4500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 27 / 2014**

**Transaction ID : C10336954**

Amount of Each Receipt this Period  
**1500.00**

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

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

**3500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 111
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

**A.** Full Name (Last, First, Middle Initial)  
**AFSCME PEOPLE**

Mailing Address 1625 L St NW

City Washington State DC Zip Code 20036-5665

FEC ID number of contributing federal political committee. **C C00011114**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
8000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 31 / 2014

**Transaction ID : C10340877**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
AMERICAN ACADEMY OF DERMATOLOGY ASSOCIATION POLITICAL ACTION COMMITTEE (SKINPAC)

Mailing Address 1445 New York Ave NW  
Ste 800

City Washington State DC Zip Code 20005-2125

FEC ID number of contributing federal political committee. **C C00359539**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 03 / 2014

**Transaction ID : C10345924**

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
AMERICAN ASSOCIATION OF CLINICAL UROLOGISTS - AMERICAN UROLOGICAL ASSOCIATION PAC (UROPAC)

Mailing Address P.O. BOX 15441

City WASHINGTON State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C C00273003**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 27 / 2014

**Transaction ID : C10374357**

Amount of Each Receipt this Period  
1000.00

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 111
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

A. Full Name (Last, First, Middle Initial)  
**AMERICAN ASSOCIATION OF ORTHODONTISTS POLITICAL ACTION COMMITTEE**

Mailing Address **401 N Lindbergh Blvd**

City	State	Zip Code
Saint Louis	MO	63141-7839

FEC ID number of contributing federal political committee. **C C00293910**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**10000.00**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
06	/	30	/	2014

**Transaction ID : C10379003**

Amount of Each Receipt this Period  
**5000.00**

B. Full Name (Last, First, Middle Initial)  
**AMERICAN COLLEGE OF PHYSICIAN SERVICES INC PAC; AKA ACP SERVICES PAC**

Mailing Address **25 Massachusetts Ave NW  
Ste 700**

City	State	Zip Code
Washington	DC	20001-7401

FEC ID number of contributing federal political committee. **C C00403881**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
06	/	30	/	2014

**Transaction ID : C10381526**

Amount of Each Receipt this Period  
**1000.00**

C. Full Name (Last, First, Middle Initial)  
**AMERICAN COLLEGE OF RADIOLOGY ASSOCIATION POLITICAL ACTION COMMITTEE**

Mailing Address **1891 Preston White Dr**

City	State	Zip Code
Reston	VA	20191-4326

FEC ID number of contributing federal political committee. **C C00343459**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**6500.00**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
06	/	27	/	2014

**Transaction ID : C10374364**

Amount of Each Receipt this Period  
**1500.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 111
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

**A.** Full Name (Last, First, Middle Initial)  
**AMERICAN COLLEGE OF SURGEONS PROFESSIONAL ASSOCIATION PAC**

Mailing Address **20 F ST NW, STE 1000**  
**ATTN: SARA MORSE**

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

FEC ID number of contributing federal political committee. **C C00382424**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 30 / 2014**

**Transaction ID : C10379010**

Amount of Each Receipt this Period  
**1500.00**

**B.** Full Name (Last, First, Middle Initial)  
**American Dental Association PAC**

Mailing Address **1111 14th St NW**  
**Ste 1100**

City **Washington** State **DC** Zip Code **20005-5627**

FEC ID number of contributing federal political committee. **C C00000729**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 30 / 2014**

**Transaction ID : C10378949**

Amount of Each Receipt this Period  
**2000.00**

**C.** Full Name (Last, First, Middle Initial)  
**AMERICAN GASTROENTEROLOGICAL ASSOCIATION INC. PAC**

Mailing Address **4720 Montgomery Ln**  
**Ste 430**

City **Bethesda** State **MD** Zip Code **20814-3441**

FEC ID number of contributing federal political committee. **C C00423228**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 27 / 2014**

**Transaction ID : C10336946**

Amount of Each Receipt this Period  
**2000.00**

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

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

**5500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 111
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

**A.** Full Name (Last, First, Middle Initial)  
**American Society of Anesthesiologists PAC**

Mailing Address 520 N Northwest Hwy

City Park Ridge State IL Zip Code 60068-2538

FEC ID number of contributing federal political committee. **C C00255752**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**8000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 27 / 2014**

**Transaction ID : C10340833**

Amount of Each Receipt this Period  
**2500.00**

**B.** Full Name (Last, First, Middle Initial)  
**American Society of Anesthesiologists PAC**

Mailing Address 520 N Northwest Hwy

City Park Ridge State IL Zip Code 60068-2538

FEC ID number of contributing federal political committee. **C C00255752**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**8000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 27 / 2014**

**Transaction ID : C10336938**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**American Society of Anesthesiologists PAC**

Mailing Address 520 N Northwest Hwy

City Park Ridge State IL Zip Code 60068-2538

FEC ID number of contributing federal political committee. **C C00255752**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**8000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 30 / 2014**

**Transaction ID : C10379012**

Amount of Each Receipt this Period  
**1000.00**

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

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

**4500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 71 OF 111
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

**A.** Full Name (Last, First, Middle Initial)  
**AMERICAN SOCIETY OF ASSOCIATION EXECUTIVES APAC**

Mailing Address 1575 I St NW

City Washington State DC Zip Code 20005-1105

FEC ID number of contributing federal political committee. **C** C00041566

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 27 / 2014

**Transaction ID : C10336958**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**AMERICAN SOCIETY OF RADIOLOGIC TECHNOLOGISTS PAC**

Mailing Address 15000 Central Ave SE

City Albuquerque State NM Zip Code 87123-3909

FEC ID number of contributing federal political committee. **C** C00362327

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 06 / 2014

**Transaction ID : C10349573**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**ARDENT HEALTH SERVICES MEDICAL HOLDINGS LLC GOOD GOVERNMENT FUND**

Mailing Address 1 Burton Hills Blvd Ste 250

City Nashville State TN Zip Code 37215-6195

FEC ID number of contributing federal political committee. **C** C00390963

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 02 / 2014

**Transaction ID : C10342275**

Amount of Each Receipt this Period  
1000.00

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 111
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

**A.** Full Name (Last, First, Middle Initial)  
**BNSF RAILWAY COMPANY RAILPAC (BNSF RAILPAC)**

Mailing Address PO Box 961039

City State Zip Code  
Fort Worth TX 76161-0039

FEC ID number of contributing federal political committee. **C C00235739**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 02 / 2014

**Transaction ID : C10342259**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Castro for Congress**

Mailing Address PO Box 544

City State Zip Code  
San Antonio TX 78292-0544

FEC ID number of contributing federal political committee. **C C00497933**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : C10384745**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**CENTURYLINK INC. EMPLOYEES' POLITICAL ACTION COMMITTEE**

Mailing Address 1099 New York Ave NW  
Ste 250

City State Zip Code  
Washington DC 20001-4836

FEC ID number of contributing federal political committee. **C C00419911**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 02 / 2014

**Transaction ID : C10343057**

Amount of Each Receipt this Period  
1000.00

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

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

3000.00

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

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

FOR LINE NUMBER: PAGE 73 OF 111  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

**A.** Full Name (Last, First, Middle Initial)  
**CME Group, Inc. PAC**

Mailing Address 20 S Wacker Dr

City Chicago State IL Zip Code 60606-7431

FEC ID number of contributing federal political committee. **C C00076299**

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 27 / 2014

**Transaction ID : C10336949**

Amount of Each Receipt this Period  
 1000.00

Amount of Each Receipt this Period  
 4000.00

**B.** Full Name (Last, First, Middle Initial)  
**COLLEGE OF AMERICAN PATHOLOGISTS POLITICAL ACTION COMMITTEE**

Mailing Address 1350 I St NW Ste 590

City Washington State DC Zip Code 20005-3305

FEC ID number of contributing federal political committee. **C C00274944**

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : C10372336**

Amount of Each Receipt this Period  
 1000.00

Amount of Each Receipt this Period  
 2000.00

**C.** Full Name (Last, First, Middle Initial)  
**COMCAST CORPORATION POLITICAL ACTION COMMITTEE- FEDERAL**

Mailing Address 1701 John F Kennedy Blvd Fl 49

City Philadelphia State PA Zip Code 19103-2855

FEC ID number of contributing federal political committee. **C C00248716**

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 02 / 2014

**Transaction ID : C10342261**

Amount of Each Receipt this Period  
 1000.00

Amount of Each Receipt this Period  
 2000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 111
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

Full Name (Last, First, Middle Initial) COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION (LETTER CARRIERS POLITICAL ACTION FUND)		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 02 / 2014
A. Mailing Address 100 Indiana Ave NW		Transaction ID : C10343056
City Washington	State DC	
FEC ID number of contributing federal political committee. C C00023580		Amount of Each Receipt this Period 2500.00
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000.00	

Full Name (Last, First, Middle Initial) <b>CUMMINS INC. POLITICAL ACTION COMMITTEE (CIPAC)</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 27 / 2014
B. Mailing Address 601 PENNSYLVANIA AVENUE, NW NORTH BUILDING, SUITE 625		Transaction ID : C10374365
City WASHINGTON	State DC	
FEC ID number of contributing federal political committee. C C00377952		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) <b>DELTA DENTAL PLANS ASSOCIATION PAC</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 25 / 2014
C. Mailing Address 1515 W 22nd St Ste 450		Transaction ID : C10371129
City Oak Brook	State IL	
FEC ID number of contributing federal political committee. C C00213819		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 111
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

**A.** Full Name (Last, First, Middle Initial)  
**Diana DeGette for Congress**

Mailing Address PO Box 61337

City State Zip Code  
Denver CO 80206-8337

FEC ID number of contributing federal political committee. **C** C00311639

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1579.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 03 / 2014

**Transaction ID : C10349570**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Diana DeGette for Congress**

Mailing Address PO Box 61337

City State Zip Code  
Denver CO 80206-8337

FEC ID number of contributing federal political committee. **C** C00311639

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1579.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 06 / 2014

**Transaction ID : C10349571**

Amount of Each Receipt this Period  
579.00

\* In-Kind: Travel - US Airway and United

**C.** Full Name (Last, First, Middle Initial)  
**EMPLOYEES OF NORTHROP GRUMMAN CORPORATION PAC**

Mailing Address 2980 Fairview Park Dr

City State Zip Code  
Falls Church VA 22042-4511

FEC ID number of contributing federal political committee. **C** C00088591

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 16 / 2014

**Transaction ID : C10357805**

Amount of Each Receipt this Period  
3000.00

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

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

4579.00

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

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

FOR LINE NUMBER: PAGE 76 OF 111  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

Full Name (Last, First, Middle Initial)  
ENGINEERS POLITICAL EDUCATION COMMITTEE (EPEC)/INTERNATIONAL UNION OF OPERATING ENGINEERS

**A.** Mailing Address 1125 17th St NW

City Washington State DC Zip Code 20036-4709

FEC ID number of contributing federal political committee. **C** C00029504

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 10000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 19 / 2014

**Transaction ID : C10330181**

Amount of Each Receipt this Period  
 5000.00

Full Name (Last, First, Middle Initial)  
**ERNST & YOUNG POLITICAL ACTION COMMITTEE**

**B.** Mailing Address 1101 New York Ave NW

City Washington State DC Zip Code 20005-4269

FEC ID number of contributing federal political committee. **C** C00227744

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 7000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : C10381531**

Amount of Each Receipt this Period  
 2000.00

Full Name (Last, First, Middle Initial)  
**EXPRESS SCRIPTS INC. POLITICAL FUND (A/K/A EXPRESS SCRIPTS PAC)**

**C.** Mailing Address 1 Express Way

City Saint Louis State MO Zip Code 63121-1824

FEC ID number of contributing federal political committee. **C** C00365072

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 7500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 09 / 2014

**Transaction ID : C10350718**

Amount of Each Receipt this Period  
 2500.00

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

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

9500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 111
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

**A.** Full Name (Last, First, Middle Initial)  
**Farm Credit Council PAC**

Mailing Address 50 F St NW  
Ste 900

City Washington State DC Zip Code 20001-1530

FEC ID number of contributing federal political committee. **C** C00193631

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 03 / 2014

**Transaction ID : C10350965**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Farm Credit Council PAC**

Mailing Address 50 F St NW  
Ste 900

City Washington State DC Zip Code 20001-1530

FEC ID number of contributing federal political committee. **C** C00193631

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 03 / 2014

**Transaction ID : C10350968**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**GENENTECH INC. POLITICAL ACTION COMMITTEE**

Mailing Address 1 DNA WAY

City SO. SAN FRANCISCO State CA Zip Code 94080

FEC ID number of contributing federal political committee. **C** C00199257

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 21 / 2014

**Transaction ID : C10333685**

Amount of Each Receipt this Period  
1000.00

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

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

2000.00

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

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

FOR LINE NUMBER: PAGE 78 OF 111  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

**A. Generic Pharmaceutical Association**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 777 6TH STREET, NW  
 SUITE 510  
 City State Zip Code  
 WASHINGTON DC 20001  
 FEC ID number of contributing federal political committee. **C C00383463**  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2014  
**Transaction ID : C10379006**  
 Amount of Each Receipt this Period  
 1000.00

**B. Health Care Service Corporation Employees' PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 300 E. RANDOLPH  
 LEGAL DEPARTMENT  
 City State Zip Code  
 CHICAGO IL 60601  
 FEC ID number of contributing federal political committee. **C C00199711**  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 20 / 2014  
**Transaction ID : C10332168**  
 Amount of Each Receipt this Period  
 1000.00

**C. Health Care Service Corporation Employees' PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 300 E. RANDOLPH  
 LEGAL DEPARTMENT  
 City State Zip Code  
 CHICAGO IL 60601  
 FEC ID number of contributing federal political committee. **C C00199711**  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 20 / 2014  
**Transaction ID : C10332169**  
 Amount of Each Receipt this Period  
 3500.00

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

5500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 111
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

**A.** Full Name (Last, First, Middle Initial)  
**INDEPENDENT COMMUNITY BANKERS OF AMERICA POLITICAL ACTION COMMITTEE**

Mailing Address 1615 L St NW  
Ste 900

City Washington State DC Zip Code 20036-5623

FEC ID number of contributing federal political committee. **C** C00032698

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 03 / 2014

**Transaction ID : C10344060**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**INTEL CORPORATION POLITICAL ACTION COMMITTEE**

Mailing Address 1155 F St NW  
Ste 1025

City Washington State DC Zip Code 20004-1342

FEC ID number of contributing federal political committee. **C** C00125641

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : C10379675**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**International Academy of Compounding Pharmacists**

Mailing Address 4638 RIVERSTONE BLVD

City MISSOURI CITY State TX Zip Code 77459

FEC ID number of contributing federal political committee. **C** C00424143

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : C10379672**

Amount of Each Receipt this Period  
1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 80 OF 111
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

**A.** Full Name (Last, First, Middle Initial)  
INTERNATIONAL BROTHERHOOD OF BOILERMAKERS CAMPAIGN ASSISTANCE FUND

Mailing Address 753 State Ave  
Ste 565

City Kansas City State KS Zip Code 66101-2511

FEC ID number of contributing federal political committee. **C** C00005157

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 02 / 2014

**Transaction ID : C10341990**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
INTERNATIONAL UNION OF PAINTERS AND ALLIED TRADES POLITICAL ACTION TOGETHER POLITICAL COMM

Mailing Address 7234 Parkway Dr

City Hanover State MD Zip Code 21076-1307

FEC ID number of contributing federal political committee. **C** C00000885

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
6500.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 14 / 2014

**Transaction ID : C10357079**

Amount of Each Receipt this Period  
1500.00

**C.** Full Name (Last, First, Middle Initial)  
**JOBS, OPPORTUNITIES AND EDUCATION PAC (JOE-PAC)**

Mailing Address 410 1ST ST, SE  
SUITE 310

City WASHINGTON State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C** C00362384

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
6500.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 02 / 2014

**Transaction ID : C10355667**

Amount of Each Receipt this Period  
1500.00

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 111
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

**A. Lifepoint Hospitals Inc. Good Government Fund**

Full Name (Last, First, Middle Initial)  
Mailing Address 103 Powell Ct  
Ste 200  
City Brentwood State TN Zip Code 37027-5079

FEC ID number of contributing federal political committee. **C C00347955**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : C10381525**

Amount of Each Receipt this Period  
2500.00

**B. Maggie Hart Stebbins for Bernalillo County**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 27191  
City Albuquerque State NM Zip Code 87125-7191

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
450.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 29 / 2014

**Transaction ID : C10375885**

Amount of Each Receipt this Period  
150.00

**C. MICHIGAN SUGAR COMPANY GROWERS POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)  
Mailing Address 2600 SOUTH EUCLID AVENUE  
City BAY CITY State MI Zip Code 48706

FEC ID number of contributing federal political committee. **C C00384354**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 28 / 2014

**Transaction ID : C10338348**

Amount of Each Receipt this Period  
2000.00

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

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

4650.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 111
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

**A.** Full Name (Last, First, Middle Initial)  
**MOLINA HEALTHCARE, INC. PAC**

Mailing Address 200 Oceangate  
Ste 100

City Long Beach State CA Zip Code 90802-4317

FEC ID number of contributing federal political committee. **C** C00430256

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 16 / 2014

**Transaction ID : C10357806**

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
**NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION PAC**

Mailing Address 1325 Massachusetts Ave NW

City Washington State DC Zip Code 20005-4171

FEC ID number of contributing federal political committee. **C** C00238725

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 28 / 2014

**Transaction ID : C10375220**

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
**NATIONAL ASSOCIATION OF INSURANCE AND FINANCIAL ADVISORS POLITICAL ACTION COMM**

Mailing Address 2901 Telestar Ct

City Falls Church State VA Zip Code 22042-1260

FEC ID number of contributing federal political committee. **C** C00005249

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 31 / 2014

**Transaction ID : C10340926**

Amount of Each Receipt this Period  
1000.00

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

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

6000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 111
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

**A.** Full Name (Last, First, Middle Initial)  
NATIONAL ASSOCIATION OF SURETY BOND PRODUCERS POLITICAL ACTION COMMITTEE (SURETYPAC)

Mailing Address 1140 19th St NW  
Ste 800

City Washington State DC Zip Code 20036-6607

FEC ID number of contributing federal political committee. **C** C00300525

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 20 / 2014

**Transaction ID : C10332167**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
National Community Pharmacists Association PAC

Mailing Address 100 Daingerfield Rd

City Alexandria State VA Zip Code 22314-6302

FEC ID number of contributing federal political committee. **C** C00030809

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 3500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 25 / 2014

**Transaction ID : C10334621**

Amount of Each Receipt this Period  
 1500.00

**C.** Full Name (Last, First, Middle Initial)  
NATIONAL EMERGENCY MEDICINE POLITICAL ACTION COMMITTEE

Mailing Address 1125 EXECUTIVE CIRCLE

City IRVING State TX Zip Code 75038

FEC ID number of contributing federal political committee. **C** C00140061

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 4500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : C10381530**

Amount of Each Receipt this Period  
 1500.00

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 111
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

**A.** Full Name (Last, First, Middle Initial)  
**NATIONAL LEAGUE OF POSTMASTERS OF THE US POLITICAL ACTION COMMITTEE**

Mailing Address **8 Herbert St**

City **Alexandria** State **VA** Zip Code **22305-2628**

FEC ID number of contributing federal political committee. **C C00100404**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 03 / 2014**

**Transaction ID : C10345927**

Amount of Each Receipt this Period  
**1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**NATIONAL STONE, SAND & GRAVEL ASSOCIATION ROCKPAC**

Mailing Address **1605 KING STREET**

City **ALEXANDRIA** State **VA** Zip Code **22314**

FEC ID number of contributing federal political committee. **C C00089458**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 27 / 2014**

**Transaction ID : C10374542**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**Oral & Maxillofacial Surgeons PAC**

Mailing Address **9700 Bryn Mawr Ave**

City **Rosemont** State **IL** Zip Code **60018-5701**

FEC ID number of contributing federal political committee. **C C00005660**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**7000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 30 / 2014**

**Transaction ID : C10378933**

Amount of Each Receipt this Period  
**2000.00**

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

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

**4000.00**

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

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

FOR LINE NUMBER: PAGE 85 OF 111  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

**A.** Full Name (Last, First, Middle Initial)  
**People for Mimi Stewart**

Mailing Address 313 Moon St NE

City Albuquerque State NM Zip Code 87123-1151

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2014

**Transaction ID : C10375229**

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
**Pharmaceutical Care Management Assoc. PCMA PAC**

Mailing Address 601 PENNSYLVANIA AVENUE NW STE 740

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00388819

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 03 / 2014

**Transaction ID : C10344047**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**PNM Responsible Citizens Group Federal Account**

Mailing Address Alvarado Sq

City Albuquerque State NM Zip Code 87158-0001

FEC ID number of contributing federal political committee. **C** C00025395

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : C10378267**

Amount of Each Receipt this Period  
 2500.00

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

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

3750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 111
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

**A.** Full Name (Last, First, Middle Initial)  
POLITICAL ACTION COMMITTEE OF THE AMERICAN ASSOCIATION OF ORTHOPAEDIC SURGEONS

Mailing Address 317 MASSACHUSETTS AVENUE, NE  
1ST FLOOR

City WASHINGTON State DC Zip Code 20002

FEC ID number of contributing federal political committee. **C** C00343137

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 27 / 2014

**Transaction ID : C10374359**

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
PRIME THERAPEUTICS LLC EMPLOYEE PAC (PRIMEPAC)

Mailing Address 1305 Corporate Center Dr

City Eagan State MN Zip Code 55121-1204

FEC ID number of contributing federal political committee. **C** C00498105

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 27 / 2014

**Transaction ID : C10336957**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
SEIU COPE (SERVICE EMPLOYEES INTERNATIONAL UNION COMMITTEE ON POLITICAL EDUCATION)

Mailing Address 1800 Massachusetts Ave NW

City Washington State DC Zip Code 20036-1222

FEC ID number of contributing federal political committee. **C** C00004036

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 29 / 2014

**Transaction ID : C10339196**

Amount of Each Receipt this Period  
5000.00

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

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

8500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 111
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

**A.** Full Name (Last, First, Middle Initial)  
**SYNERGY PAC**

Mailing Address 6849 Old Dominion Dr  
Ste 222

City State Zip Code  
McLean VA 22101-3705

FEC ID number of contributing federal political committee. **C** C00409623

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 27 / 2014

**Transaction ID : C10374362**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**THE COCA-COLA COMPANY NONPARTISAN COMMITTEE FOR GOOD GOVERNMENT**

Mailing Address 1 Coca Cola Plz NW

City State Zip Code  
Atlanta GA 30313-2420

FEC ID number of contributing federal political committee. **C** C00012468

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 11 / 2014

**Transaction ID : C10355670**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**THE COUNCIL OF INSURANCE AGENTS & BROKERS POLITICAL ACTION COMMITTEE**

Mailing Address 701 Pennsylvania Ave NW  
Ste 750

City State Zip Code  
Washington DC 20004-2661

FEC ID number of contributing federal political committee. **C** C00039578

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : C10384704**

Amount of Each Receipt this Period  
1000.00

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

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

3000.00

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

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

FOR LINE NUMBER: PAGE 88 OF 111  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

**A.** Full Name (Last, First, Middle Initial)  
**UA Political Education Committee**

Mailing Address 3 Park Pl

City State Zip Code  
Annapolis MD 21401-3687

FEC ID number of contributing federal political committee. **C** C00012476

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
10000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 18 / 2014

**Transaction ID : C10363545**

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
**UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB**

Mailing Address 1775 K St NW

City State Zip Code  
Washington DC 20006-1228

FEC ID number of contributing federal political committee. **C** C00002766

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
10000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 30 / 2014

**Transaction ID : C10375719**

Amount of Each Receipt this Period  
1500.00

**C.** Full Name (Last, First, Middle Initial)  
**UNITED TECHNOLOGIES CORPORATION POLITICAL ACTION COMMITTEE**

Mailing Address 1101 Pennsylvania Ave NW  
FI 10

City State Zip Code  
Washington DC 20004-2566

FEC ID number of contributing federal political committee. **C** C00035683

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 29 / 2014

**Transaction ID : C10375936**

Amount of Each Receipt this Period  
3000.00

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

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

9500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 89 OF 111
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

**A.** Full Name (Last, First, Middle Initial)  
**WAL-MART STORES INC. PAC FOR RESPONSIBLE GOVERNMENT**

Mailing Address 702 SW 8th St

City Bentonville State AR Zip Code 72716-6209

FEC ID number of contributing federal political committee. **C** C00093054

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 19 / 2014

**Transaction ID : C10330978**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**WALGREEN CO PAC**

Mailing Address 104 WILMOT ROAD MS #1447

City DEERFIELD State IL Zip Code 60015

FEC ID number of contributing federal political committee. **C** C00160770

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 15 / 2014

**Transaction ID : C10329408**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**WATERPAC - NATIONAL RURAL WATER ASSOCIATION POLITICAL COMMITTEE**

Mailing Address 2915 S 13th St

City Duncan State OK Zip Code 73533-9086

FEC ID number of contributing federal political committee. **C** C00202184

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2014

**Transaction ID : C10374358**

Amount of Each Receipt this Period  
 1500.00

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 111
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

**A.** Full Name (Last, First, Middle Initial)  
**Women's Campaign Forum PAC**

Mailing Address 1900 L St NW  
Ste 500

City Washington State DC Zip Code 20036-5031

FEC ID number of contributing federal political committee. **C C00424150**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**750.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 27 / 2014**

**Transaction ID : C10374360**

Amount of Each Receipt this Period  
**500.00**

**B.** Full Name (Last, First, Middle Initial)  
**ERNST & YOUNG POLITICAL ACTION COMMITTEE**

Mailing Address 1101 New York Ave NW

City Washington State DC Zip Code 20005-4269

FEC ID number of contributing federal political committee. **C C00227744**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**7000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 03 / 2014**

**Transaction ID : C10349089**

Amount of Each Receipt this Period  
**1500.00**

\* Earmarked Contribution: See Below

**C.** Full Name (Last, First, Middle Initial)  
**Ameripac: The Fund for a Greater America**

Mailing Address 700 13th St NW  
Ste 600

City Washington State DC Zip Code 20005-3960

FEC ID number of contributing federal political committee. **C C00271338**

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 03 / 2014**

**Transaction ID : C10349089B**

Amount of Each Receipt this Period  
**1500.00**

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

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

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

**2000.00**

**115479.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 111			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

Full Name (Last, First, Middle Initial) <b>A. 1-800-Flowers.com</b>			Date of Disbursement M M / D D / Y Y Y Y <b>05 / 19 / 2014</b>
Mailing Address <b>Carle Place</b>			Amount of Each Disbursement this Period <b>69.53</b>
City <b>New York</b>	State <b>NY</b>	Zip Code <b>11514</b>	
Purpose of Disbursement <b>Flowers</b>		Category/ Type	<b>Transaction ID : D718915</b>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) <b>B. ActBlue Technical Services</b>			Date of Disbursement M M / D D / Y Y Y Y <b>05 / 18 / 2014</b>
Mailing Address <b>PO Box 382110</b>			Amount of Each Disbursement this Period <b>123.14</b>
City <b>Cambridge</b>	State <b>MA</b>	Zip Code <b>02238-2110</b>	
Purpose of Disbursement <b>Online Credit Card Processing Fee</b>		Category/ Type	<b>Transaction ID : D715787</b>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) <b>c. Artichoke Cafe</b>			Date of Disbursement M M / D D / Y Y Y Y <b>06 / 09 / 2014</b>
Mailing Address <b>424 Central Ave SE</b>			Amount of Each Disbursement this Period <b>493.06</b>
City <b>Albuquerque</b>	State <b>NM</b>	Zip Code <b>87102-3518</b>	
Purpose of Disbursement <b>Event Food</b>		Category/ Type	<b>Transaction ID : D718924</b>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>685.73</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 111			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

Full Name (Last, First, Middle Initial) <b>A. Authorize.Net</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2014
Mailing Address PO Box 8999		Amount of Each Disbursement this Period 17.95 <b>Transaction ID : D718922</b>
City San Francisco	State CA	
Zip Code 94128-8999	Purpose of Disbursement Online Credit Card Processing Fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Greysen F Carlson</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2014
Mailing Address 432 NE Thornberry Pl		Amount of Each Disbursement this Period 1607.40 <b>Transaction ID : D718936</b>
City Lees Summit	State MO	
Zip Code 64064-1664	Purpose of Disbursement Salary	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Greysen F Carlson</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2014
Mailing Address 432 NE Thornberry Pl		Amount of Each Disbursement this Period 1607.40 <b>Transaction ID : D716968</b>
City Lees Summit	State MO	
Zip Code 64064-1664	Purpose of Disbursement Salary	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3232.75
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 111			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

Full Name (Last, First, Middle Initial) <b>A. Greysen F Carlson</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2014
Mailing Address 432 NE Thornberry Pl			Amount of Each Disbursement this Period 9,999.99 8,888.88 7,777.77 6,666.66 5,555.55 4,444.44 3,333.33 2,222.22 1,111.11 1607.40
City Lees Summit	State MO	Zip Code 64064-1664	
Purpose of Disbursement Salary	Candidate Name		Transaction ID : D716979
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:	Category/Type		

Full Name (Last, First, Middle Initial) <b>B. CB Solutions, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2014
Mailing Address 5801 Desert View Ct NE			Amount of Each Disbursement this Period 9,999.99 8,888.88 7,777.77 6,666.66 5,555.55 4,444.44 3,333.33 2,222.22 1,111.11 3000.00
City Rio Rancho	State NM	Zip Code 87144-2638	
Purpose of Disbursement Campaign Management Consulting	Candidate Name		Transaction ID : D716980
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:	Category/Type		

Full Name (Last, First, Middle Initial) <b>c. Democratic Congressional Campaign Committee</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address 430 S Capitol St SE FI 2			Amount of Each Disbursement this Period 9,999.99 8,888.88 7,777.77 6,666.66 5,555.55 4,444.44 3,333.33 2,222.22 1,111.11 5000.00
City Washington	State DC	Zip Code 20003-4024	
Purpose of Disbursement Transfer to Party Committee	Candidate Name		Transaction ID : D716990
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:	Category/Type		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	9607.40
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 111			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

Full Name (Last, First, Middle Initial)  
**A. Democratic Congressional Campaign Committee**

Mailing Address 430 S Capitol St SE  
FI 2

City Washington State DC Zip Code 20003-4024

Purpose of Disbursement  
Transfer to Party Committee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
05 / 27 / 2014

Amount of Each Disbursement this Period  
5000.00

Transaction ID : D716973

Category/Type

Full Name (Last, First, Middle Initial)  
**B. Diana DeGette for Congress**

Mailing Address PO Box 61337

City Denver State CO Zip Code 80206-8337

Purpose of Disbursement  
Travel - US Airway and United

Candidate Name  
**Diana DeGette**

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: CO District: 01

Date of Disbursement  
M M / D D / Y Y Y Y  
06 / 06 / 2014

Amount of Each Disbursement this Period  
579.00

Transaction ID : D716276

\* In-Kind Received

Category/Type

Full Name (Last, First, Middle Initial)  
**c. First Data USA**

Mailing Address 5565 Glenridge Connector NE  
Ste 2000

City Atlanta State GA Zip Code 30342-1651

Purpose of Disbursement  
Online Credit Card Processing Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
06 / 02 / 2014

Amount of Each Disbursement this Period  
549.57

Transaction ID : D718911

Category/Type

**SUBTOTAL** of Disbursements This Page (optional)..... 6128.57

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 OF 111			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

Full Name (Last, First, Middle Initial) <b>A. Flying Star Restaurant</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address 723 Silver Ave SW		Amount of Each Disbursement this Period 10.10 <b>Transaction ID : D718933</b>
City Albuquerque	State NM Zip Code 87102-3018	
Purpose of Disbursement Event Food	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Matthew GlouDEMANS</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2014
Mailing Address 407 Vassar Dr SE		Amount of Each Disbursement this Period 1305.75 <b>Transaction ID : D718937</b>
City Albuquerque	State NM Zip Code 87106-2805	
Purpose of Disbursement Salary	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Matthew GlouDEMANS</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2014
Mailing Address 407 Vassar Dr SE		Amount of Each Disbursement this Period 1305.75 <b>Transaction ID : D716978</b>
City Albuquerque	State NM Zip Code 87106-2805	
Purpose of Disbursement Salary	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2621.60
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 96 OF 111	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

Full Name (Last, First, Middle Initial) <b>A. Matthew Gludemans</b>		Date of Disbursement M M / D D / Y Y Y Y <b>05 / 15 / 2014</b>
Mailing Address <b>407 Vassar Dr SE</b>		Amount of Each Disbursement this Period <b>1305.75</b> <b>Transaction ID : D716969</b>
City <b>Albuquerque</b> State <b>NM</b> Zip Code <b>87106-2805</b>	Purpose of Disbursement <b>Salary</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Greetings, Etc!</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 01 / 2014</b>
Mailing Address <b>2505 Commercial St NE</b>		Amount of Each Disbursement this Period <b>181.90</b> <b>Transaction ID : D716983</b>
City <b>Albuquerque</b> State <b>NM</b> Zip Code <b>87102-1121</b>	Purpose of Disbursement <b>Banners</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Greetings, Etc!</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 16 / 2014</b>
Mailing Address <b>2505 Commercial St NE</b>		Amount of Each Disbursement this Period <b>873.64</b> <b>Transaction ID : D718934</b>
City <b>Albuquerque</b> State <b>NM</b> Zip Code <b>87102-1121</b>	Purpose of Disbursement <b>Printing</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>2361.29</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 OF 111			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

Full Name (Last, First, Middle Initial) <b>A. Sarah Grisham</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2014
Mailing Address 516 Solar Rd NW		Amount of Each Disbursement this Period 803.70 <b>Transaction ID : D716976</b>
City Albuquerque	State NM	
Zip Code 87107-5742	Purpose of Disbursement Salary	Category/Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Sarah Grisham</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2014
Mailing Address 516 Solar Rd NW		Amount of Each Disbursement this Period 803.70 <b>Transaction ID : D716967</b>
City Albuquerque	State NM	
Zip Code 87107-5742	Purpose of Disbursement Salary	Category/Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Health Care Services Corporation</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2014
Mailing Address 300 E. Randolph Corporate Real Estate, 39th Floor		Amount of Each Disbursement this Period 300.00 <b>Transaction ID : D716971</b>
City Chicago	State IL	
Zip Code 60601	Purpose of Disbursement Event Room Rental	Category/Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1907.40
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 111			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

Full Name (Last, First, Middle Initial) <b>A. Hyatt Regency Chesapeake Bay</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 30 / 2014</b>
Mailing Address 1100 Heron Blvd		Amount of Each Disbursement this Period <b>581.69</b>
City Cambridge	State MD	
Zip Code 21613	Purpose of Disbursement Lodging	<b>Transaction ID : D718931</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Internal Revenue Service</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 17 / 2014</b>
Mailing Address 5338 Montgomery Blvd NE		Amount of Each Disbursement this Period <b>2449.68</b>
City Albuquerque	State NM	
Zip Code 87109-1338	Purpose of Disbursement Payroll Taxes	<b>Transaction ID : D718927</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Internal Revenue Service</b>		Date of Disbursement M M / D D / Y Y Y Y <b>05 / 15 / 2014</b>
Mailing Address 5338 Montgomery Blvd NE		Amount of Each Disbursement this Period <b>2757.66</b>
City Albuquerque	State NM	
Zip Code 87109-1338	Purpose of Disbursement Payroll Taxes	<b>Transaction ID : D718913</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>5789.03</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 OF 111			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

Full Name (Last, First, Middle Initial) <b>A. Lilly Barrack</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2014
Mailing Address 4022 Rio Grande Blvd, NW		Amount of Each Disbursement this Period 576.73
City Albuquerque	State NM	
Zip Code 87107	Purpose of Disbursement Pins	Transaction ID : D718926
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Sheila A Nelson</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 27 / 2014
Mailing Address 2828 Butch Cassidy Dr SW		Amount of Each Disbursement this Period 600.00
City Albuquerque	State NM	
Zip Code 87121-5013	Purpose of Disbursement Database Support	Transaction ID : D716974
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Sheila A Nelson</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 27 / 2014
Mailing Address 2828 Butch Cassidy Dr SW		Amount of Each Disbursement this Period 151.89
City Albuquerque	State NM	
Zip Code 87121-5013	Purpose of Disbursement Mileage Reimbursement	Transaction ID : D716975
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1328.62
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 100 OF 111	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

Full Name (Last, First, Middle Initial)  
**A. New Mexico Religious Coalition for Reproductive Choice**

Mailing Address PO Box 66433

City Albuquerque State NM Zip Code 87193

Purpose of Disbursement Event Tickets

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement 05 / 28 / 2014

Amount of Each Disbursement this Period 400.00

Transaction ID : D718916

Full Name (Last, First, Middle Initial)  
**B. New Mexico Taxation & Revenue Dept**

Mailing Address PO Box 25127

City Santa Fe State NM Zip Code 87504-5127

Purpose of Disbursement Payroll Taxes

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement 05 / 28 / 2014

Amount of Each Disbursement this Period 67.95

Transaction ID : D718918

Full Name (Last, First, Middle Initial)  
**C. New Mexico Taxation & Revenue Dept**

Mailing Address PO Box 25127

City Santa Fe State NM Zip Code 87504-5127

Purpose of Disbursement Payroll Taxes

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement 06 / 19 / 2014

Amount of Each Disbursement this Period 216.20

Transaction ID : D718928

**SUBTOTAL** of Disbursements This Page (optional) ..... 684.15

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 101 OF 111			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

Full Name (Last, First, Middle Initial) <b>A. NGP VAN Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2014
Mailing Address 1101 15th St NW Ste 500		Amount of Each Disbursement this Period 2100.00
City Washington	State DC	
Zip Code 20005-5006	Purpose of Disbursement Database, Online contribution fee, broadcast email fee	Transaction ID : D718920
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Old Town Catering Company</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2014
Mailing Address 108 Rio Grande		Amount of Each Disbursement this Period 774.00
City Albuquerque	State NM	
Zip Code 87104	Purpose of Disbursement Event Catering	Transaction ID : D716985
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Oldmixon Hill</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2014
Mailing Address 1201 1st Ave S., Suite 325		Amount of Each Disbursement this Period 10000.00
City Seattle	State WA	
Zip Code 98134	Purpose of Disbursement Web Design, Email Management	Transaction ID : D716981
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	12874.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 102 OF 111			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

Full Name (Last, First, Middle Initial)		Date of Disbursement											
<b>A. PhoneTag</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>06</td> <td></td> <td>03</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	06		03		2014
M M	/	D D	/	Y Y Y Y									
06		03		2014									
Mailing Address 3099 N 1st St		Amount of Each Disbursement this Period											
City San Jose State CA Zip Code 95134-2006		<table border="1"> <tr> <td colspan="4">29.95</td> </tr> </table>		29.95									
29.95													
Purpose of Disbursement Voicemail Service		Transaction ID : D718921											
Candidate Name		Category/Type											
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014											
State:	District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											

Full Name (Last, First, Middle Initial)		Date of Disbursement											
<b>B. Radisson Hotel</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>05</td> <td></td> <td>16</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	05		16		2014
M M	/	D D	/	Y Y Y Y									
05		16		2014									
Mailing Address 2020 Jefferson Davis Hwy		Amount of Each Disbursement this Period											
City Arlington State VA Zip Code 22202		<table border="1"> <tr> <td colspan="4">359.34</td> </tr> </table>		359.34									
359.34													
Purpose of Disbursement Lodging		Transaction ID : D718914											
Candidate Name		Category/Type											
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014											
State:	District:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)											

Full Name (Last, First, Middle Initial)		Date of Disbursement											
<b>C. Rasika Restaurant</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>06</td> <td></td> <td>26</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	06		26		2014
M M	/	D D	/	Y Y Y Y									
06		26		2014									
Mailing Address 633 D St NW		Amount of Each Disbursement this Period											
City Washington State DC Zip Code 20004-2904		<table border="1"> <tr> <td colspan="4">793.00</td> </tr> </table>		793.00									
793.00													
Purpose of Disbursement Event Food		Transaction ID : D718929											
Candidate Name		Category/Type											
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014											
State:	District:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)											

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1182.29
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 103 OF 111			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

Full Name (Last, First, Middle Initial) <b>A. Restaurant Associates</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 27 / 2014
Mailing Address PO Box 417632		Amount of Each Disbursement this Period 300.00 <b>Transaction ID : D716972</b>
City Boston	State MA	
Zip Code 02241	Purpose of Disbursement Event Food	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. The Blue Deal, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 28 / 2014
Mailing Address PO Box 50		Amount of Each Disbursement this Period 847.28 <b>Transaction ID : D718917</b>
City Annandale	State VA	
Zip Code 22003	Purpose of Disbursement Printing	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. United States Postal Service</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2014
Mailing Address 111 Alvarado Dr SE		Amount of Each Disbursement this Period 245.00 <b>Transaction ID : D716970</b>
City Albuquerque	State NM	
Zip Code 87108-3496	Purpose of Disbursement Stamps	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1392.28
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 104 OF 111			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

Full Name (Last, First, Middle Initial) <b>A. Utrecht, Kleinfeld, Fiori, Zeglis &amp; Partners</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2014
Mailing Address 1900 M St NW Ste 500		Amount of Each Disbursement this Period 161.20
City Washington	State DC	
Zip Code 20036-3522	Purpose of Disbursement Legal Services	Transaction ID : D716984
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Stefanie Weber</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2014
Mailing Address PO Box 35268		Amount of Each Disbursement this Period 1315.84
City Albuquerque	State NM	
Zip Code 87176-5268	Purpose of Disbursement Salary	Transaction ID : D716977
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Stefanie Weber</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2014
Mailing Address PO Box 35268		Amount of Each Disbursement this Period 1315.84
City Albuquerque	State NM	
Zip Code 87176-5268	Purpose of Disbursement Salary	Transaction ID : D716215
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2792.88
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 105 OF 111			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

Full Name (Last, First, Middle Initial) <b>A. Stefanie Weber</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2014
Mailing Address PO Box 35268		Amount of Each Disbursement this Period 1315.84
City Albuquerque	State NM	
Zip Code 87176-5268	Purpose of Disbursement Salary	Transaction ID : D718935
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Deborah A. Armstrong</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2014
Mailing Address 2015 Dietz PL, NW		Amount of Each Disbursement this Period 1377.51
City Albuquerque	State NM	
Zip Code 87107-3240	Purpose of Disbursement Reimburse: Food for events, travel, volunteer recognition, See Below	Transaction ID : D715329
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Palms Trading Company</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2014
Mailing Address 1504 Lomas Blvd NW		Amount of Each Disbursement this Period 460.05
City Albuquerque	State NM	
Zip Code 87104-1238	Purpose of Disbursement Volunteer Recognition	Transaction ID : D722233
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2693.35
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 106 OF 111	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

Full Name (Last, First, Middle Initial) <b>A. Scalo Northern Italian Grill</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2014
Mailing Address 3500 Central Ave SE		Amount of Each Disbursement this Period 300.00
City Albuquerque	State NM	
Zip Code 87106-1446	Purpose of Disbursement Event Food	Transaction ID : D722323 <b>[MEMO ITEM]</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Stevens Inn</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2014
Mailing Address 1829 S Canal		Amount of Each Disbursement this Period 441.38
City Carlsbad	State NM	
Zip Code 88220	Purpose of Disbursement Event Food & Fees	Transaction ID : D72235 <b>[MEMO ITEM]</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Hon. Michelle Lujan Grisham</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 27 / 2014
Mailing Address 1001 Los Arboles Ave NW		Amount of Each Disbursement this Period 98.82
City Albuquerque	State NM	
Zip Code 87107-1141	Purpose of Disbursement Reimburse Event Food, See Below	Transaction ID : D716203
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	98.82
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 107 OF 111			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

Full Name (Last, First, Middle Initial) <b>A. Flying Star Restaurant</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 27 / 2014
Mailing Address 723 Silver Ave SW			Amount of Each Disbursement this Period 8.27
City Albuquerque	State NM	Zip Code 87102-3018	
Purpose of Disbursement Event Food		Candidate Name	Transaction ID : D716208 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Category/ Type	
State:	District:		

Full Name (Last, First, Middle Initial) <b>B. Scalo Northern Italian Grill</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 27 / 2014
Mailing Address 3500 Central Ave SE			Amount of Each Disbursement this Period 11.01
City Albuquerque	State NM	Zip Code 87106-1446	
Purpose of Disbursement Event Food		Candidate Name	Transaction ID : D716204 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Category/ Type	
State:	District:		

Full Name (Last, First, Middle Initial) <b>c. Matthew Gludemans</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2014
Mailing Address 407 Vassar Dr SE			Amount of Each Disbursement this Period 112.73
City Albuquerque	State NM	Zip Code 87106-2805	
Purpose of Disbursement Reimburse Event Supplies		Candidate Name	Transaction ID : D716210
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Category/ Type	
State:	District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	112.73
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 108 OF 111	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

Full Name (Last, First, Middle Initial) <b>A. Matthew Gludemans</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 02 / 2014</b>
Mailing Address <b>407 Vassar Dr SE</b>		Amount of Each Disbursement this Period <b>53.47</b>
City <b>Albuquerque</b> State <b>NM</b> Zip Code <b>87106-2805</b>	Purpose of Disbursement <b>Reimburse Event Supplies</b>	
Candidate Name		<b>Transaction ID : D716213</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. Matthew Gludemans</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 13 / 2014</b>
Mailing Address <b>407 Vassar Dr SE</b>		Amount of Each Disbursement this Period <b>127.17</b>
City <b>Albuquerque</b> State <b>NM</b> Zip Code <b>87106-2805</b>	Purpose of Disbursement <b>Reimburse Event Food and Supplies</b>	
Candidate Name		<b>Transaction ID : D716989</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>c. Stefanie Weber</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 13 / 2014</b>
Mailing Address <b>PO Box 35268</b>		Amount of Each Disbursement this Period <b>329.71</b>
City <b>Albuquerque</b> State <b>NM</b> Zip Code <b>87176-5268</b>	Purpose of Disbursement <b>Reimburse Supplies, Stamps, Flowers, See Below</b>	
Candidate Name		<b>Transaction ID : D716991</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>510.35</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 109 OF 111			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

Full Name (Last, First, Middle Initial) <b>A. 1-800-Flowers.com</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address Carle Place		Amount of Each Disbursement this Period 128.13
City New York	State NY	
Zip Code 11514	Purpose of Disbursement Flowers	Transaction ID : D722209
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Garcia's Kitchen</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address 1113 4th St NW		Amount of Each Disbursement this Period 25.00
City Albuquerque	State NM	
Zip Code 87102-1412	Purpose of Disbursement Event Room Rental	Transaction ID : D722195
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>C. United States Postal Service</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address 111 Alvarado Dr SE		Amount of Each Disbursement this Period 65.06
City Albuquerque	State NM	
Zip Code 87108-3496	Purpose of Disbursement Postage	Transaction ID : D722199
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	56003.24

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 110 OF 111			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

Full Name (Last, First, Middle Initial) <b>A. Pueblo of Isleta</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 30 / 2014</b>
Mailing Address PO Box 1290		Amount of Each Disbursement this Period <b>2300.00</b>
City <b>Isleta</b>	State <b>NM</b>	
Zip Code <b>87022-1290</b>	Purpose of Disbursement <b>Refund Excess Contribution</b>	<b>Transaction ID : D718939</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 111 OF 111	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Friends of Michelle**

Full Name (Last, First, Middle Initial) <b>A. A Strong New Mexico</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 03 / 2014</b>
Mailing Address <b>PO Box 7553</b>		Amount of Each Disbursement this Period <b>3000.00</b>
City <b>Albuquerque</b> State <b>NM</b> Zip Code <b>87194</b>	Category/Type	
Purpose of Disbursement <b>Non-Federal PAC Contribution</b>		<b>Transaction ID : D716987</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Debbie Armstrong for New Mexico</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 03 / 2014</b>
Mailing Address <b>2015 Dietz PI NW</b>		Amount of Each Disbursement this Period <b>2500.00</b>
City <b>Albuquerque</b> State <b>NM</b> Zip Code <b>87107-3240</b>	Category/Type	
Purpose of Disbursement <b>Political Campaign Contribution</b>		<b>Transaction ID : D716986</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>5500.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>5500.00</b>