

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

People for Ben

ADDRESS (number and street) PO Box 31129

Check if different than previously reported. (ACC) Sante Fe NM 87594

2. **FEC IDENTIFICATION NUMBER** C00443689 **CITY** **STATE** NM **ZIP CODE** NM **STATE** NM **DISTRICT** 03

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

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

5. Covering Period 07 01 2008 through 09 30 2008

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 Carmen Lujan

Signature of Treasurer Electronically Filed by Carmen Lujan Date 10 15 2008

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

Office Use Only **FEC FORM 3** (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

People for Ben

Report Covering the Period:

From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	8

To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	8

	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)).....	384310.40	1122046.81
(b) Total Contribution Refunds (from Line 20(d)).....	1300.00	20310.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	383010.40	1101736.81
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	181442.33	957874.58
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	181442.33	957874.58
8. Cash on Hand at Close of Reporting Period (from Line 27).....	294013.89	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	150006.94	

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
People for Ben

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	8

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).....

231124.89

791982.30

(ii) Unitemized.....

14425.51

53344.51

(iii) TOTAL of contributions

245550.40

845326.81

from individuals..... ▶

0.00

0.00

(b) Political Party Committees.....

(c) Other Political Committees (such as PACS).....

138760.00

276720.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))

384310.40

1122046.81

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....

0.00

0.00

13. LOANS

(a) Made or Guaranteed by the Candidate.....

0.00

200000.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

200000.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....

0.00

0.00

15. OTHER RECEIPTS (Dividends, Interest, etc.).....

0.00

33.21

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

384310.40

1322080.02

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	181442.33	957874.58
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	49993.06
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	49993.06
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	1300.00	20310.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	1300.00	20310.00
21. OTHER DISBURSEMENTS.....	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	182742.33	1028177.64

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	92445.82
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	384310.40
25. SUBTOTAL (add Line 23 and Line 24).....	476756.22
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	182742.33
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	294013.89

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

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

FOR LINE NUMBER: PAGE 5 / 192
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
People for Ben

A. Full Name (Last, First, Middle Initial)
Esteban Aguilar, Sr.
Mailing Address 24011 Calle De Panza NW
City Albuquerque State NM Zip Code 87104
FEC ID number of contributing federal political committee. **C**
Name of Employer self Occupation attorney
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00
Date of Receipt 08 / 11 / 2008
Transaction ID: C2032806
Amount of Each Receipt this Period 250.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
John Alejandro
Mailing Address PO Box 5812
City Santa Fe State NM Zip Code 87502-5812
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00
Date of Receipt 09 / 30 / 2008
Transaction ID: C2120421
Amount of Each Receipt this Period 250.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Joanne Allen
Mailing Address 4830 Juan Tabo Blvd NE Ste K
City Albuquerque State NM Zip Code 87111-2682
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Dentist
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 550.00
Date of Receipt 07 / 16 / 2008
Transaction ID: C1930399
Amount of Each Receipt this Period 100.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ **600.00**
TOTAL 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: PAGE 6 / 192
(check only one)

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

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NAME OF COMMITTEE (In Full)
People for Ben

A.

Full Name (Last, First, Middle Initial) Joanne Allen		Date of Receipt MM / DD / YYYY 09 / 03 / 2008
Mailing Address 4830 Juan Tabo Blvd NE Ste K		Transaction ID: C2073725
City Albuquerque	State NM	Zip Code 87111-2682
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Self	Occupation Dentist	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 550.00	

B.

Full Name (Last, First, Middle Initial) Joanne Allen		Date of Receipt MM / DD / YYYY 09 / 30 / 2008
Mailing Address 4830 Juan Tabo Blvd NE Ste K		Transaction ID: C2123185
City Albuquerque	State NM	Zip Code 87111-2682
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Self	Occupation Dentist	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 550.00	

C.

Full Name (Last, First, Middle Initial) Charmay B Allred		Date of Receipt MM / DD / YYYY 07 / 09 / 2008
Mailing Address 1428 Canada Del Sur		Transaction ID: C1811764
City Santa Fe	State NM	Zip Code 87501-8720
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer None	Occupation Retired	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2250.00	

SUBTOTAL of Receipts This Page (optional)	700.00
TOTAL 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: PAGE 7 / 192
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
Charmay B Allred
Mailing Address 1428 Canada Del Sur
City Santa Fe State NM Zip Code 87501-8720
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation Retired
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2250.00
Date of Receipt 09 / 30 / 2008
Transaction ID: C2116241
Amount of Each Receipt this Period 250.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Mike Anaya
Mailing Address PO Box 10
City Moriarty State NM Zip Code 87035-0010
FEC ID number of contributing federal political committee. **C**
Name of Employer Mike's Friendly Store Occupation Restaurant Owner
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00
Date of Receipt 09 / 04 / 2008
Transaction ID: C2079373
Amount of Each Receipt this Period 250.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Steve Anaya
Mailing Address PO Box 10
City Moriarty State NM Zip Code 87035-0010
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Businessman
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00
Date of Receipt 09 / 04 / 2008
Transaction ID: C2079378
Amount of Each Receipt this Period 250.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ 750.00
TOTAL 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: PAGE 8 / 192

(check only one)

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

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NAME OF COMMITTEE (In Full)
People for Ben

A.

Full Name (Last, First, Middle Initial)
David E. Archuleta

Mailing Address PO Box 217

City Cebolla State NM Zip Code 87518-0217

FEC ID number of contributing federal political committee. C

Name of Employer Self Employed Occupation Rancher

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 350.00

Date of Receipt 08 / 27 / 2008

Transaction ID: C2066798

Amount of Each Receipt this Period 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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 Self Occupation Dr.

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 07 / 01 / 2008

Transaction ID: C1801321

Amount of Each Receipt this Period 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Stuart A. Ashman

Mailing Address 10 Angelitos Rd

City Santa Fe State NM Zip Code 87506-0082

FEC ID number of contributing federal political committee. C

Name of Employer Secretary OCA Occupation Secretary

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 07 / 11 / 2008

Transaction ID: C1917669

Amount of Each Receipt this Period 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) 750.00

TOTAL 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: PAGE 9 / 192
(check only one)

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

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NAME OF COMMITTEE (In Full)
People for Ben

A.

Full Name (Last, First, Middle Initial) Luis L. Atencio		Date of Receipt <table border="1" style="font-size: small;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>0</td><td>7</td><td>/</td><td>0</td><td>9</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7	/	0	9	/	2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	7	/	0	9	/	2	0	0	8													
Mailing Address 603 Santa Cruz Rd		Transaction ID: C1811771																				
City	State	Zip Code																				
Espanola	NM	87532-2873																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr><td>1500.00</td></tr> </table>	1500.00																			
1500.00																						
Name of Employer El Purzguz Restaurant	Occupation Business Consultant	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)																				
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"> <tr><td>2950.00</td></tr> </table>		2950.00																			
2950.00																						

B.

Full Name (Last, First, Middle Initial) Herman D Baca		Date of Receipt <table border="1" style="font-size: small;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>0</td><td>9</td><td>/</td><td>0</td><td>4</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9	/	0	4	/	2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	9	/	0	4	/	2	0	0	8													
Mailing Address 610 Gold Ave SW Ste 224		Transaction ID: C2079182																				
City	State	Zip Code																				
Albuquerque	NM	87102-3188																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr><td>500.00</td></tr> </table>	500.00																			
500.00																						
Name of Employer Crestino, LLC	Occupation Engineer	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)																				
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"> <tr><td>1500.00</td></tr> </table>		1500.00																			
1500.00																						

C.

Full Name (Last, First, Middle Initial) Shannon C. Bacon		Date of Receipt <table border="1" style="font-size: small;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>0</td><td>9</td><td>/</td><td>0</td><td>4</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9	/	0	4	/	2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
0	9	/	0	4	/	2	0	0	8													
Mailing Address 715 Loma Vista Dr NE		Transaction ID: C2079275																				
City	State	Zip Code																				
Albuquerque	NM	87106-1945																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr><td>100.00</td></tr> </table>	100.00																			
100.00																						
Name of Employer Sutin Thayer & Browne	Occupation Lawyer	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)																				
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"> <tr><td>300.00</td></tr> </table>		300.00																			
300.00																						

SUBTOTAL of Receipts This Page (optional)	<table border="1" style="width: 100%;"><tr><td>2100.00</td></tr></table>	2100.00
2100.00		
TOTAL This Period (last page this line number only)	<table border="1" style="width: 100%;"><tr><td> </td></tr></table>	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 192
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
Judy E Basham
Mailing Address 1112 N. Plata Cr.
City Santa Fe State NM Zip Code 87501
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired/State of New Mexico Occupation retired
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 3051.71
Date of Receipt 07 / 11 / 2008
Transaction ID: C1917666
Amount of Each Receipt this Period 500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Virgil Beagles
Mailing Address PO Box 2167
City Roswell State NM Zip Code 88202-2167
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Construction
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2000.00
Date of Receipt 09 / 30 / 2008
Transaction ID: C2116517
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Alletta D. Belin
Mailing Address 1239 Madrid Rd
City Santa Fe State NM Zip Code 87505-0637
FEC ID number of contributing federal political committee. **C**
Name of Employer Belin & Sugarman Occupation Lawyer
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 750.00
Date of Receipt 09 / 15 / 2008
Transaction ID: C2091803
Amount of Each Receipt this Period 250.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 1750.00
TOTAL 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: PAGE 11 / 192
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
Ravi Bhasker

Mailing Address 200 Neel Ave

City State Zip Code
Socorro NM 87801-4649

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

Name of Employer City of Socorro Occupation Mayor

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt: 09 / 30 / 2008
Transaction ID: C2122187
 Amount of Each Receipt this Period: 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Michael P Branch

Mailing Address 228 S. St. Francis Dr.

City State Zip Code
Santa Fe NM 87505

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

Name of Employer Branch Realty Occupation President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 750.00

Date of Receipt: 08 / 11 / 2008
Transaction ID: C2032631
 Amount of Each Receipt this Period: 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Michael P Branch

Mailing Address 228 S. St. Francis Dr.

City State Zip Code
Santa Fe NM 87505

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

Name of Employer Branch Realty Occupation President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 750.00

Date of Receipt: 09 / 30 / 2008
Transaction ID: C2120316
 Amount of Each Receipt this Period: 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **1250.00**

TOTAL 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: PAGE 12 / 192
(check only one)

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

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NAME OF COMMITTEE (In Full)
People for Ben

A.

Full Name (Last, First, Middle Initial)
Melinda Breitmeyer

Mailing Address 133 Martinez St

City State Zip Code
Santa Fe NM 87501-2219

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

Name of Employer Self Occupation
Self Graphics Consultant

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
08 / 12 / 2008

Transaction ID: C2033291

Amount of Each Receipt this Period
50.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Melinda Breitmeyer

Mailing Address 133 Martinez St

City State Zip Code
Santa Fe NM 87501-2219

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

Name of Employer Self Occupation
Self Graphics Consultant

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
08 / 27 / 2008

Transaction ID: C2066892

Amount of Each Receipt this Period
50.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Richard A. Brenner

Mailing Address 123 Tano Norte

City State Zip Code
Santa Fe NM 87506-7513

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

Name of Employer Retired Occupation
Retired Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt
MM / DD / YYYY
07 / 16 / 2008

Transaction ID: C1930354

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **600.00**

TOTAL 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: PAGE 13 / 192
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
Dennise P. Bridgers, Rd
Mailing Address 2264 Monterrey Rd NE

City: Rio Rancho State: NM Zip Code: 87144-5584

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

Name of Employer: State of NM Occupation: HR Administrator

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2750.00

Date of Receipt: 08 / 04 / 2008
Transaction ID: C2019255
 Amount of Each Receipt this Period: 2200.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Duane E. Brown, Cir
Mailing Address 1110 El Alhambra Cir NW

City: Albuquerque State: NM Zip Code: 87107-6338

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

Name of Employer: Modrall Sperleng Law Firm Occupation: Attorney

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt: 09 / 04 / 2008
Transaction ID: C2079293
 Amount of Each Receipt this Period: 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Jean Brunstad
Mailing Address 25480 W Deep Canyon Dr

City: Star State: ID Zip Code: 83669-5704

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

Name of Employer: Angel Fire Resort Occupation: Executive

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

Date of Receipt: 09 / 30 / 2008
Transaction ID: C2116320
 Amount of Each Receipt this Period: 2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 5500.00

TOTAL 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: PAGE 14 / 192
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
Patrick Brunstad

Mailing Address 25480 W Deep Canyon Dr

City State Zip Code
Star ID 83669-5704

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

Name of Employer Occupation
Angel Fire Resort CEO

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
0 9 / 3 0 / 2 0 0 8

Transaction ID: C2116314

Amount of Each Receipt this Period
2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 5201 Constitution Ave NE

City State Zip Code
Albuquerque NM 87110-5813

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

Name of Employer Occupation
Self Trial Lawyer

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
0 8 / 1 2 / 2 0 0 8

Transaction ID: C2033286

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 9921 Barrinson NE

City State Zip Code
Albuquerque NM 87111-5895

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

Name of Employer Occupation
Brownstein Hyatt & Farber Lawyer

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
0 8 / 1 1 / 2 0 0 8

Transaction ID: C2032654

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **3550.00**

TOTAL 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: PAGE 15 / 192
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
John r Buchser, St
Mailing Address 606 Alto St

City State Zip Code
Santa Fe NM 87501-2519

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

Name of Employer Occupation
State of NM Computer System Architect

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
0 9 / 2 2 / 2 0 0 8

Transaction ID: C2101748

Amount of Each Receipt this Period
80.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Caroline Buerkle
Mailing Address 4405 Willow View Ln NW

City State Zip Code
Albuquerque NM 87120-5425

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

Name of Employer Occupation
Self Consultant

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
0 8 / 1 3 / 2 0 0 8

Transaction ID: C2037506

Amount of Each Receipt this Period
2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Sandy Alison Buffett
Mailing Address 369 Montezuma Avenue, #206

City State Zip Code
Santa Fe NM 87501

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

Name of Employer Occupation
CVNM Executive Director

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
0 9 / 1 5 / 2 0 0 8

Transaction ID: C2091800

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **2880.00**

TOTAL 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: PAGE 16 / 192
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
Richard Burns

Mailing Address 215 Poinsettia Ave

City State Zip Code
Corona Del Mar CA 92625-3017

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

Name of Employer Self Occupation Investor

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 9 / 2 3 / 2 0 0 8

Transaction ID: C2103946

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Cristy J Carbon-Gaul

Mailing Address 10509 4th St NW

City State Zip Code
Albuquerque NM 87114-2219

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

Name of Employer Sutin Thayer Browne Occupation Lawyer

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 9 / 0 4 / 2 0 0 8

Transaction ID: C2079248

Amount of Each Receipt this Period
150.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Mark E. Chaiken

Mailing Address 2109 San Venito Rd NW

City State Zip Code
Albuquerque NM 87104-2579

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

Name of Employer NO RECORD Occupation NO RECORD

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 7 / 1 1 / 2 0 0 8

Transaction ID: C1917663

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **900.00**

TOTAL 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: PAGE 17 / 192
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
Thomas Chase

Mailing Address 425 30th St
Ste 21

City State Zip Code
Newport Beach CA 92663-3730

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

Name of Employer Occupation
Chase Mortgage Broker

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y
0 8 / 1 3 / 2 0 0 8

Transaction ID: C2037520

Amount of Each Receipt this Period
2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 309 Morningside Dr SE

City State Zip Code
Albuquerque NM 87108-2686

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

Name of Employer Occupation
State of New Mexico PUC

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y
0 9 / 0 4 / 2 0 0 8

Transaction ID: C2079141

Amount of Each Receipt this Period
50.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 721 Montclair Dr NE

City State Zip Code
Albuquerque NM 87110-7732

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

Name of Employer Occupation
CB Richard Ellis Managing Director

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y
0 9 / 3 0 / 2 0 0 8

Transaction ID: C2116197

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **2850.00**

TOTAL 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: PAGE 18 / 192
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
David P. Contarino

Mailing Address 7 Arroyo Hondo Trl

City State Zip Code
Santa Fe NM 87508-9492

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

Name of Employer Self Occupation
Businessman

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
09 / 15 / 2008

Transaction ID: C2091788

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Johnny D. Cope

Mailing Address 618 E Zia Dr

City State Zip Code
Hobbs NM 88240-3453

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

Name of Employer Self Occupation
Investor

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
09 / 04 / 2008

Transaction ID: C2079173

Amount of Each Receipt this Period
2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Marty Cope, Dr

Mailing Address 618 E Zia Dr

City State Zip Code
Hobbs NM 88240-3453

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

Name of Employer self Occupation
Investor

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
09 / 04 / 2008

Transaction ID: C2079175

Amount of Each Receipt this Period
2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **5600.00**

TOTAL 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: PAGE 19 / 192

(check only one)

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

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NAME OF COMMITTEE (In Full)
People for Ben

A.

Full Name (Last, First, Middle Initial)
Gerald Coppler, Ave

Mailing Address 645 Don Gaspar Ave

City State Zip Code
Santa Fe NM 87505-2696

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

Name of Employer Self Occupation
Attorney

Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 2300.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 4 / 2 0 0 8

Transaction ID: C2079177

Amount of Each Receipt this Period

2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Vernoica De Lao

Mailing Address 9301 E Adobe Dr

City State Zip Code
Scottsdale AZ 85255-5018

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

Name of Employer Homemaker Occupation
Homemaker

Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 2000.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 3 0 / 2 0 0 8

Transaction ID: C2121759

Amount of Each Receipt this Period

2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Herb Denish

Mailing Address 2604 Morrow Rd NE

City State Zip Code
Albuquerque NM 87106-2523

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

Name of Employer Self Occupation
Consultant

Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

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

Transaction ID: C2032799

Amount of Each Receipt this Period

500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

4800.00

TOTAL 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: PAGE 20 / 192
(check only one)

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

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NAME OF COMMITTEE (In Full)
People for Ben

A.

Full Name (Last, First, Middle Initial)
Robert J. Desiderio

Mailing Address 1516 Stanford Dr NE

City Albuquerque State NM Zip Code 87106-3728

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

Name of Employer U N M School Of Law/Sanchez, Mower, & Occupation Attorney

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General Other (specify) ▼

500.00

Date of Receipt
M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 0 8

Transaction ID: C2073696

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Mario Diaz

Mailing Address 9301 E Adobe Dr

City Scottsdale State AZ Zip Code 85255-5018

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

Name of Employer Self Occupation Consultant

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General Other (specify) ▼

2000.00

Date of Receipt
M M / D D / Y Y Y Y
0 9 / 3 0 / 2 0 0 8

Transaction ID: C2121757

Amount of Each Receipt this Period
2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Christine DiGregorio

Mailing Address PO Box 1455

City Gallup State NM Zip Code 87305-1455

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

Name of Employer Retired Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General Other (specify) ▼

300.00

Date of Receipt
M M / D D / Y Y Y Y
0 9 / 3 0 / 2 0 0 8

Transaction ID: C2121795

Amount of Each Receipt this Period
300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **2550.00**

TOTAL 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: PAGE 21 / 192
(check only one)

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

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NAME OF COMMITTEE (In Full)
People for Ben

A.

Full Name (Last, First, Middle Initial)
Steven Dobbie

Mailing Address 436 Locust St

City Laguna Beach State CA Zip Code 92651-1606

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

Name of Employer Self Occupation Architect

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

Date of Receipt 08 / 15 / 2008

Transaction ID: C2157928

Amount of Each Receipt this Period 2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Yvette Dobbie

Mailing Address 436 Locust St

City Laguna Beach State CA Zip Code 92651-1606

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

Name of Employer Self Occupation Businesswoman

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3300.00

Date of Receipt 08 / 13 / 2008

Transaction ID: C2037509

Amount of Each Receipt this Period 2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
David Duhigg

Mailing Address PO Box 527

City Albuquerque State NM Zip Code 87103-0527

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

Name of Employer Duhigg Cronin Spring Occupation attorney

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 650.00

Date of Receipt 08 / 11 / 2008

Transaction ID: C2032824

Amount of Each Receipt this Period 150.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **4750.00**

TOTAL 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: PAGE 22 / 192
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
Pauline O. Duran

Mailing Address 7 Cam Bojo

City State Zip Code
Santa Fe NM 87508

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

Name of Employer Occupation
PCI Contractors Contractors

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 22 / 2008

Transaction ID: C2101817

Amount of Each Receipt this Period
2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Karen A. Durkovich

Mailing Address PO Box 2346

City State Zip Code
Santa Fe NM 87504-2346

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

Name of Employer Occupation
Self Interior Design

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 11 / 2008

Transaction ID: C1917670

Amount of Each Receipt this Period
1300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Stephen A. Durkovich

Mailing Address PO Box 2346

City State Zip Code
Santa Fe NM 87504-2346

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

Name of Employer Occupation
Self Attorney

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 11 / 2008

Transaction ID: C1917671

Amount of Each Receipt this Period
1300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **4900.00**

TOTAL 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: PAGE 23 / 192
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
Nancy Edwards
Mailing Address 1215 Gold Ave SW
City Albuquerque State NM Zip Code 87102-2831
FEC ID number of contributing federal political committee. **C**
Name of Employer State of New Mexico Occupation Administrator
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00
Date of Receipt 09 / 04 / 2008
Transaction ID: C2079143
Amount of Each Receipt this Period 250.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
David Ehrman
Mailing Address 7137 Calientito Loop
City Santa Fe State NM Zip Code 87507-4613
FEC ID number of contributing federal political committee. **C**
Name of Employer Defenders of the Wildlife Occupation Fundraising
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00
Date of Receipt 09 / 15 / 2008
Transaction ID: C2091806
Amount of Each Receipt this Period 250.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Bruce Elieff
Mailing Address 2392 Morse Ave
City Irvine State CA Zip Code 92614-6234
FEC ID number of contributing federal political committee. **C**
Name of Employer SunCal Occupation Executive
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 9200.00
Date of Receipt 09 / 30 / 2008
Transaction ID: C2124231
Amount of Each Receipt this Period 2300.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 2800.00
TOTAL 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 24 / 192
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 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)
People for Ben

A.	Full Name (Last, First, Middle Initial) Stephan Z Elieff	Date of Receipt MM / DD / YYYY 09 / 30 / 2008
	Mailing Address 2392 Morse Ave	Transaction ID: C2124234
	City Irvine State CA Zip Code 92614-6234	Amount of Each Receipt this Period 2300.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer SunCal Occupation Executive		
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 9200.00	

B.	Full Name (Last, First, Middle Initial) Richard Ellenberg	Date of Receipt MM / DD / YYYY 09 / 15 / 2008
	Mailing Address 1714 Canyon Rd	Transaction ID: C2091799
	City Santa Fe State NM Zip Code 87501	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Retired Occupation Retired		
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 3500.00	

C.	Full Name (Last, First, Middle Initial) Rhonda G. Faught, PI	Date of Receipt MM / DD / YYYY 09 / 30 / 2008
	Mailing Address 6 Spur Cross PI	Transaction ID: C2120688
	City Santa Fe State NM Zip Code 87508-1340	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Secretary NMTD Occupation Cabinet Secretary		
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	3400.00
TOTAL 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: PAGE 25 / 192
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
James H. Franken

Mailing Address 1025 Douglas Ave

City State Zip Code
Las Vegas NM 87701-3930

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

Name of Employer: Franken Construction & Franken Oil Co. Occupation: Construction

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt: 09 / 30 / 2008
Transaction ID: C2121387
Amount of Each Receipt this Period: 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 12700 Desert Sky Ave NE

City State Zip Code
Albuquerque NM 87111-8042

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

Name of Employer: NM Cancer Center Occupation: Doctor

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt: 09 / 15 / 2008
Transaction ID: C2091779
Amount of Each Receipt this Period: 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 16 Brilliant Sky Dr

City State Zip Code
Santa Fe NM 87508-1320

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

Name of Employer: Anasazi Medical Associates Occupation: Doctor

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt: 09 / 03 / 2008
Transaction ID: C2073732
Amount of Each Receipt this Period: 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ **750.00**

TOTAL 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: PAGE 26 / 192
(check only one)

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

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NAME OF COMMITTEE (In Full)
People for Ben

A.

Full Name (Last, First, Middle Initial) Michelle L. Frost		Date of Receipt MM / DD / YYYY 08 / 04 / 2008
Mailing Address 1710 A Quay Rd 50		Transaction ID: C2019253
City San Jon	State NM	Zip Code 88434
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Self	Occupation Rancher	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1250.00	

B.

Full Name (Last, First, Middle Initial) Leroy Gabaldon		Date of Receipt MM / DD / YYYY 09 / 15 / 2008
Mailing Address 3701 Chaco Dr		Transaction ID: C2091782
City Gallup	State NM	Zip Code 87301-4554
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer self-employed	Occupation Fast Food	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

C.

Full Name (Last, First, Middle Initial) Philip C. Gaddy		Date of Receipt MM / DD / YYYY 08 / 11 / 2008
Mailing Address 2025 San Pedro Dr NE		Transaction ID: C2032746
City Albuquerque	State NM	Zip Code 87110-5951
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Gaddy Law Firm	Occupation attorney	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 750.00	

SUBTOTAL of Receipts This Page (optional)	▶	1750.00
TOTAL 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: PAGE 27 / 192
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
Carlos D. Gallegos, Sr.
Mailing Address 706 Sperry Dr

City State Zip Code
Las Vegas NM 87701-4940

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

Name of Employer Retired Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2008

Transaction ID: C2121341

Amount of Each Receipt this Period
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

600.00

B. Full Name (Last, First, Middle Initial)
Chris Garcia
Mailing Address 6230 Saint Josephs Ct NW

City State Zip Code
Albuquerque NM 87120-3708

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

Name of Employer State of New Mexico Occupation Assistant to the Governor

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
09 / 22 / 2008

Transaction ID: C2101782

Amount of Each Receipt this Period
20.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

220.00

C. Full Name (Last, First, Middle Initial)
David P. Garcia
Mailing Address 2108 Senda De Daniel

City State Zip Code
Santa Fe NM 87501

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

Name of Employer Self-Employed Occupation Attorney

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
08 / 11 / 2008

Transaction ID: C2032777

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

1000.00

SUBTOTAL of Receipts This Page (optional) ► **1120.00**

TOTAL 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: PAGE 28 / 192
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
LeRoy H. Garcia

Mailing Address PO Box 95

City Montezuma State NM Zip Code 87731-0095

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

Name of Employer NM DOT Occupation Assistant Deputy Secretary

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 350.00

Date of Receipt 09 / 30 / 2008
Transaction ID: C2121402
 Amount of Each Receipt this Period 100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

* In-Kind: Food for Event

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

Mailing Address 14 Lugar De Pacifica

City Santa Fe State NM Zip Code 87506-0970

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

Name of Employer Retired Occupation Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 550.00

Date of Receipt 09 / 22 / 2008
Transaction ID: C2101799
 Amount of Each Receipt this Period 100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 2274A 47

City Los Alamos State NM Zip Code 87544

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt 09 / 30 / 2008
Transaction ID: C2120320
 Amount of Each Receipt this Period 200.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **400.00**

TOTAL 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: PAGE 29 / 192
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

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

Mailing Address 27 Wildhorse

City State Zip Code
Santa Fe NM 87506-8285

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

Name of Employer None Occupation Investor

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	1	6	/	2	0	0	8

Transaction ID: C1930406

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 928 Juniper

City State Zip Code
Santa Fe NM 87505

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

Name of Employer Self Occupation Consulting

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt

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

Transaction ID: C2033107

Amount of Each Receipt this Period
200.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Eddie M. Gilbert

Mailing Address 503 Camino Del Monte Sol

City State Zip Code
Santa Fe NM 87505-2827

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

Name of Employer BGK Properties Occupation President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	0	9	/	2	0	0	8

Transaction ID: C2031589

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **2200.00**

TOTAL 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: PAGE 30 / 192
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A.

Full Name (Last, First, Middle Initial)
Gary J Giron, Rd

Mailing Address 5436 Tecamec Rd NE

City State Zip Code
Rio Rancho NM 87144-3297

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

Name of Employer State of NM Occupation
HR Specialist

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 450.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 9 / 3 0 / 2 0 0 8

Transaction ID: C2120671

Amount of Each Receipt this Period
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Gary J Giron, Rd

Mailing Address 5436 Tecamec Rd NE

City State Zip Code
Rio Rancho NM 87144-3297

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

Name of Employer State of NM Occupation
HR Specialist

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 450.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 9 / 3 0 / 2 0 0 8

Transaction ID: C2121405

Amount of Each Receipt this Period
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

* In-Kind: Catering for Event

C.

Full Name (Last, First, Middle Initial)
Daniela Glick, Rd

Mailing Address 4232 Big Sky Rd

City State Zip Code
Santa Fe NM 87507-4844

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

Name of Employer State of NM Occupation
State Employee

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 9 / 0 3 / 2 0 0 8

Transaction ID: C2073717

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **450.00**

TOTAL 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: PAGE 31 / 192
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
Joseph Goldberg
Mailing Address 1504 Harvard Ct NE
City Albuquerque State NM Zip Code 87106-3712
FEC ID number of contributing federal political committee. **C**
Name of Employer Freedman, Boyd, Daniels, Etc Occupation attorney
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 1500.00
Date of Receipt 08 / 11 / 2008
Transaction ID: C2032712
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Bennie E Gonzales
Mailing Address PO Box 28
City Tesuque State NM Zip Code 87574-0028
FEC ID number of contributing federal political committee. **C**
Name of Employer Southwest Proposal Development Occupation Owner
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 250.00
Date of Receipt 07 / 09 / 2008
Transaction ID: C1811694
Amount of Each Receipt this Period 250.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Javier Gonzales
Mailing Address 1109 Don Gaspar
City Santa Fe State NM Zip Code 87501
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Businessman
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 1000.00
Date of Receipt 09 / 30 / 2008
Transaction ID: C2116257
Amount of Each Receipt this Period 250.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 1500.00
TOTAL 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: PAGE 32 / 192
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A.

Full Name (Last, First, Middle Initial)
Mary Gonzales

Date of Receipt
MM / DD / YYYY
07 / 09 / 2008

Mailing Address 1 Camino Del Ojito
B

Transaction ID: C1811702

City Santa Fe State NM Zip Code 87506

Amount of Each Receipt this Period
200.00

FEC ID number of contributing federal political committee. C

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
600.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Mary Gonzales

Date of Receipt
MM / DD / YYYY
09 / 30 / 2008

Mailing Address 1 Camino Del Ojito
B

Transaction ID: C2120307

City Santa Fe State NM Zip Code 87506

Amount of Each Receipt this Period
200.00

FEC ID number of contributing federal political committee. C

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
600.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Johnell Gonzales-Lujan

Date of Receipt
MM / DD / YYYY
09 / 25 / 2008

Mailing Address 161 Country Rd 113

Transaction ID: C2111491

City Santa Fe State NM Zip Code 87506

Amount of Each Receipt this Period
2300.00

FEC ID number of contributing federal political committee. C

Name of Employer Los Alamos National Labs Occupation Administrator

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 2700.00

TOTAL 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: PAGE 33 / 192
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
Gregory S. Green

Mailing Address 2832 Don Quixote

City State Zip Code
Santa Fe NM 87505-6481

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

Name of Employer Self Occupation Lobbyist

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 15 / 2008

Transaction ID: C2091809

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address PO Box 10

City State Zip Code
San Jose NM 87565-0010

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

Name of Employer Surety Title Occupation CEO

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2008

Transaction ID: C2116271

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address PO Box 1046

City State Zip Code
Española NM 87532-1046

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

Name of Employer Saby Janitorial Occupation Owner

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 750.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 27 / 2008

Transaction ID: C2066865

Amount of Each Receipt this Period
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **1100.00**

TOTAL 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: PAGE 34 / 192
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
People for Ben

A. Full Name (Last, First, Middle Initial)
Toby Gurule
Mailing Address PO Box 1046
City Espanola State NM Zip Code 87532-1046
FEC ID number of contributing federal political committee. C
Name of Employer Information Requested _____ Occupation Information Requested _____
Receipt For: 2008
 Primary General
 Other (specify) ▼ _____
Election Cycle-to-Date ▼ _____ 300.00
Date of Receipt 08 / 27 / 2008
Transaction ID: C2066862
Amount of Each Receipt this Period _____ 50.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Toby Gurule
Mailing Address PO Box 1046
City Espanola State NM Zip Code 87532-1046
FEC ID number of contributing federal political committee. C
Name of Employer Information Requested _____ Occupation Information Requested _____
Receipt For: 2008
 Primary General
 Other (specify) ▼ _____
Election Cycle-to-Date ▼ _____ 300.00
Date of Receipt 09 / 30 / 2008
Transaction ID: C2120700
Amount of Each Receipt this Period _____ 100.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
David 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 Information Requested UNM Occupation Information Requested CEO
Receipt For: 2008
 Primary General
 Other (specify) ▼ _____
Election Cycle-to-Date ▼ _____ 500.00
Date of Receipt 09 / 04 / 2008
Transaction ID: C2079271
Amount of Each Receipt this Period _____ 500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 650.00
TOTAL 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: PAGE 35 / 192
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
People for Ben

A. Full Name (Last, First, Middle Initial)
LaDonna 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: Americans for Indian Opportunity
Occupation: President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period: 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 1801 Rio Grande Blvd NW

City Albuquerque State NM Zip Code 87104

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

Name of Employer: Eaton Martinez Hart & Valdez
Occupation: Lawyer

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period: 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Mary Ann Hendrixson

Mailing Address 5600 Fulton Ct NE

City Albuquerque State NM Zip Code 87111-6629

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

Name of Employer: DOE
Occupation: Government

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period: 2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **3550.00**

TOTAL 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: PAGE 36 / 192
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 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)
People for Ben

A.

Full Name (Last, First, Middle Initial)
Robyn Hendrixson

Mailing Address 5600 Fulton Ct NE

City State Zip Code
Albuquerque NM 87111-6629

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

Name of Employer Occupation
Mechanical Concepts, Ltd. Partner

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2008

Transaction ID: C2116221

Amount of Each Receipt this Period
2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Angelica Henry

Mailing Address PO Box 953

City State Zip Code
San Juan Capistran CA 92693-0953

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

Name of Employer Occupation
Retired Retired

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
08 / 13 / 2008

Transaction ID: C2037491

Amount of Each Receipt this Period
2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Smith Holt

Mailing Address PO Box 254

City State Zip Code
Angel Fire NM 87710

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

Name of Employer Occupation
Self Consultant

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2008

Transaction ID: C2120283

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **4550.00**

TOTAL 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: PAGE 37 / 192
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
Tom 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 Thomas J. Horan, LTD Occupation lobbyist/attorney

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt 09 / 04 / 2008
Transaction ID: C2079211
 Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Barbara T. Ingram

Mailing Address 24 General Sage Dr

City Santa Fe State NM Zip Code 87505-6395

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

Name of Employer self Occupation artist/investor

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt 07 / 07 / 2008
Transaction ID: C1807228
 Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 3262 Nizhoni Dr

City Santa Fe State NM Zip Code 87507-2555

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

Name of Employer NOne Occupation None

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt 08 / 12 / 2008
Transaction ID: C2033102
 Amount of Each Receipt this Period 50.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **2050.00**

TOTAL 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: PAGE 38 / 192
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 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)
People for Ben

A.

Full Name (Last, First, Middle Initial) Daniel James		Date of Receipt MM / DD / YYYY 08 / 19 / 2008
Mailing Address 3262 Nizhoni Dr		Transaction ID: C2045158
City Santa Fe	State NM	Zip Code 87507-2555
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer None	Occupation None	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 200.00	

B.

Full Name (Last, First, Middle Initial) David J. Jaramillo		Date of Receipt MM / DD / YYYY 08 / 11 / 2008
Mailing Address 2025 San Pedro Dr NE		Transaction ID: C2032749
City Albuquerque	State NM	Zip Code 87110-5951
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Gaddy Law Firm	Occupation attorney	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

C.

Full Name (Last, First, Middle Initial) Johnny Jaramillo		Date of Receipt MM / DD / YYYY 08 / 27 / 2008
Mailing Address PO Box 1007		Transaction ID: C2066794
City Abiquiu	State NM	Zip Code 87510-1007
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Information Requested	Occupation Information Requested	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	400.00
TOTAL 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: PAGE 39 / 192

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 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)
People for Ben

A.

Full Name (Last, First, Middle Initial)
Setareh Javaheripour

Mailing Address 1101 Alameda Rd NW

City State Zip Code
Albuquerque NM 87114-1905

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

Name of Employer Occupation
State of New Mexico Executive Assistant

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 550.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 04 / 2008

Transaction ID: C2079291

Amount of Each Receipt this Period

300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Eric Scott Jeffries

Mailing Address 3312 Calle De Daniel NW

City State Zip Code
Albuquerque NM 87104-3023

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

Name of Employer Occupation
Self Attorney

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 15 / 2008

Transaction ID: C2091790

Amount of Each Receipt this Period

250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Jicarilla Apache Tribe

Mailing Address PO Box 507

City State Zip Code
Dulce NM 87528-0507

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

Name of Employer Occupation

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 4600.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 30 / 2008

Transaction ID: C2117848

Amount of Each Receipt this Period

2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

2850.00

TOTAL 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: PAGE 40 / 192
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
Inder Jit Kaur

Mailing Address 407 Hermosa Dr SE

City Albuquerque State NM Zip Code 87108-2615

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

Name of Employer Retired Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt 09 / 30 / 2008
Transaction ID: C2122906
 Amount of Each Receipt this Period 25.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Daya Singh Khalsa

Mailing Address PO Box 739

City Santa Cruz State NM Zip Code 87567-0739

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

Name of Employer AKAL Security Occupation Security Co.

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt 09 / 30 / 2008
Transaction ID: C2118225
 Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 2655 Steiner St

City San Francisco State CA Zip Code 94115-1141

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

Name of Employer Kieve Law Office Occupation Lawyer

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt 08 / 19 / 2008
Transaction ID: C2045152
 Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **2025.00**

TOTAL 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: PAGE 41 / 192
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
Nene A. Koch

Mailing Address 1453 Don Gaspar Ave

City State Zip Code
Santa Fe NM 87505-4654

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

Name of Employer Retired Occupation Housewife

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
07 / 11 / 2008

Transaction ID: C1917636

Amount of Each Receipt this Period
2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Paul J. Kovnat

Mailing Address 407 Camino Del Monte Sol

City State Zip Code
Santa Fe NM 87505-2805

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

Name of Employer Self-Employed Occupation Physician

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
09 / 15 / 2008

Transaction ID: C2091804

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Ruth L. Kovnat

Mailing Address 407 Camino Del Monte Sol

City State Zip Code
Santa Fe NM 87505-2805

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

Name of Employer Unm School Of Law Occupation Law Professor

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
07 / 11 / 2008

Transaction ID: C1917665

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **3800.00**

TOTAL 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: PAGE 42 / 192
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
Joe Kupfer
Mailing Address 3013 Oculus Loop NE
City Rio Rancho State NM Zip Code 87144-6458
FEC ID number of contributing federal political committee. **C**
Name of Employer DBA Kupfer Consulting Occupation Lobbyist
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00
Date of Receipt 09 / 04 / 2008
Transaction ID: C2079131
Amount of Each Receipt this Period 500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Barry Lang
Mailing Address 5980 E Terra Grande
City Tucson State AZ Zip Code 85750-1043
FEC ID number of contributing federal political committee. **C**
Name of Employer Forrest City Stapleton, Inc. Occupation Developer
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 4175.00
Date of Receipt 09 / 30 / 2008
Transaction ID: C2116179
Amount of Each Receipt this Period 2300.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Janet O Lang
Mailing Address 5980 E Terra Grande
City Tucson State AZ Zip Code 85750-1043
FEC ID number of contributing federal political committee. **C**
Name of Employer Dorman & Associates Occupation Attorney
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 4175.00
Date of Receipt 09 / 30 / 2008
Transaction ID: C2116182
Amount of Each Receipt this Period 2300.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ 5100.00
TOTAL 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: PAGE 43 / 192
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
Greg Levenson

Mailing Address 5531 Poblanos Ct NW

City Albuquerque State NM Zip Code 87107-3249

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

Name of Employer Bank Of Las Vegas Occupation Banker

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2250.00

Date of Receipt 07 / 01 / 2008

Transaction ID: C1994870

Amount of Each Receipt this Period 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 5531 Poblanos Ct NW

City Albuquerque State NM Zip Code 87107-3249

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

Name of Employer Bank Of Las Vegas Occupation Banker

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2250.00

Date of Receipt 09 / 03 / 2008

Transaction ID: C2073716

Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 5531 Poblanos Ct NW

City Albuquerque State NM Zip Code 87107-3249

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

Name of Employer Bank Of Las Vegas Occupation Banker

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2250.00

Date of Receipt 09 / 30 / 2008

Transaction ID: C2116523

Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 2250.00

TOTAL 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: PAGE 44 / 192
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
Henry Mclvaine Lewis

Mailing Address 19 Sonrisa Trl

City State Zip Code
Santa Fe NM 87506-1286

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

Name of Employer State of New Mexico Occupation Tax & Revenue

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 02 / 2008

Transaction ID: C2101961

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address PO Box 12

City State Zip Code
Tererro NM 87573

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

Name of Employer Tererro General Store Occupation Self

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 27 / 2008

Transaction ID: C2066790

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 1020 Don Diego Ave

City State Zip Code
Santa Fe NM 87505-1627

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

Name of Employer Self Occupation Accountant

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 30 / 2008

Transaction ID: C2120292

Amount of Each Receipt this Period
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **1600.00**

TOTAL 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: PAGE 45 / 192
(check only one)

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

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NAME OF COMMITTEE (In Full)
People for Ben

A.

Full Name (Last, First, Middle Initial)
G. Michael Lopez

Mailing Address 105 Mills Ave
Ste 300

City Las Vegas State NM Zip Code 87701-4169

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

Name of Employer Self Occupation Doctor

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 350.00

Date of Receipt 09 / 30 / 2008

Transaction ID: C2120715

Amount of Each Receipt this Period 100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Jesus L Lopez

Mailing Address PO Box 2115

City Las Vegas State NM Zip Code 87701-2115

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

Name of Employer self-employed Occupation attorney

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 09 / 30 / 2008

Transaction ID: C2121379

Amount of Each Receipt this Period 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Ronnie Lopez

Mailing Address 703 W San Miguel Ave

City Phoenix State AZ Zip Code 85013-1743

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

Name of Employer Phoenix International Consultants Occupation Chairman

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 09 / 30 / 2008

Transaction ID: C2121766

Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 1350.00

TOTAL 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: PAGE 46 / 192
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
Kathleen J. Love

Mailing Address 702 Sunset Rd SW

City State Zip Code
Albuquerque NM 87105-3034

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

Name of Employer Occupation
MCML, PA Attorney

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
08 / 11 / 2008

Transaction ID: C2032791

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

500.00

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

Mailing Address 18 Sibley Rd

City State Zip Code
Santa Fe NM 87508-1431

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

Name of Employer Occupation
Flywheel Ventures Venture Capitalist

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
07 / 07 / 2008

Transaction ID: C1807166

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

500.00

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

Mailing Address 6453 Main Street

City State Zip Code
Cuba NM 87013

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

Name of Employer Occupation
Retired Retired

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
09 / 30 / 2008

Transaction ID: C2122357

Amount of Each Receipt this Period
254.89

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

* In-Kind: Catering for Event

254.89

SUBTOTAL of Receipts This Page (optional) ► **1004.89**

TOTAL 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: PAGE 47 / 192
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
Eric Lujan

Mailing Address 1929 Arroyo De Las Cruces Rd

City State Zip Code
Santa Fe NM 87505-0984

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

Name of Employer State of NM Occupation Engineer

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 28 / 2008

Transaction ID: C2154875

Amount of Each Receipt this Period
225.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

* In-Kind: Event Expenses

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

Mailing Address 161 Country Rd 113

City State Zip Code
Santa Fe NM 87506

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

Name of Employer Integrated Electric and Utility Occupation Businessman

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 22 / 2008

Transaction ID: C2101813

Amount of Each Receipt this Period
2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 02 Calle Ponciano

City State Zip Code
Santa Fe NM 87506-8908

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

Name of Employer Retired Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 03 / 2008

Transaction ID: C2073980

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **3025.00**

TOTAL 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: PAGE 48 / 192
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
Tobias Lujan

Mailing Address 1065 Camino Manana

City State Zip Code
Santa Fe NM 87501-1088

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

Name of Employer Retired Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Amount of Each Receipt this Period: 250.00

Transaction ID: C1930388

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 2875 Qeresta

City State Zip Code
Las Cruces NM 88005

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

Name of Employer Retired Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Amount of Each Receipt this Period: 1000.00

Transaction ID: C2101806

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Ed T Mahr

Mailing Address 1509 Silver Ave SW

City State Zip Code
Albuquerque NM 87104-1053

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

Name of Employer self Occupation Lobbyist

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Amount of Each Receipt this Period: 500.00

Transaction ID: C2091810

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **1750.00**

TOTAL 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: PAGE 49 / 192
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
Colleen Maloof

Mailing Address 4317 Altura Ave NE

City Albuquerque State NM Zip Code 87110-5701

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

Name of Employer The Maloof Compaiaes Occupation business owner

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 9200.00

Date of Receipt 09 / 30 / 2008
Transaction ID: C2124180
 Amount of Each Receipt this Period 2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Gavin P Maloof

Mailing Address 119 Industrial Ave NE

City Albuquerque State NM Zip Code 87107-2228

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

Name of Employer Maloof Companies Occupation Executive

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 6900.00

Date of Receipt 09 / 30 / 2008
Transaction ID: C2124172
 Amount of Each Receipt this Period 2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
George Maloof, Jr.

Mailing Address 4321 W Flamingo Rd

City Las Vegas State NV Zip Code 89103-3903

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

Name of Employer The Palms Casino Occupation Owner

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 6900.00

Date of Receipt 09 / 30 / 2008
Transaction ID: C2124168
 Amount of Each Receipt this Period 2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ **6900.00**

TOTAL 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: PAGE 50 / 192
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
Joseph G. Maloof

Mailing Address PO Box 1086
523 Commercial NE

City Albuquerque State NM Zip Code 87103-1086

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

Name of Employer Coors Quality Import Co. Occupation Executive

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 6900.00

Date of Receipt 09 / 30 / 2008
Transaction ID: C2124175
 Amount of Each Receipt this Period 2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Phillip J Maloof

Mailing Address PO Box 30428

City Las Vegas State NV Zip Code 89173-0428

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

Name of Employer Maloof Companies Occupation Businessman

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 6900.00

Date of Receipt 09 / 30 / 2008
Transaction ID: C2124165
 Amount of Each Receipt this Period 2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Adrienne Maloof-Nassif

Mailing Address PO Box 30428

City Las Vegas State NV Zip Code 89173-0428

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

Name of Employer Palms Hotel and Casino Occupation Vice President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 6900.00

Date of Receipt 09 / 30 / 2008
Transaction ID: C2124171
 Amount of Each Receipt this Period 2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 6900.00

TOTAL 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: PAGE 51 / 192
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
David Maniatis

Mailing Address 7835 E Redfield Rd
Ste 100

City State Zip Code
Scottsdale AZ 85260-6902

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

Name of Employer Self Occupation Developer

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2008

Transaction ID: C2124162

Amount of Each Receipt this Period
2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 1060 Camino Manana

City State Zip Code
Santa Fe NM 87501-1043

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

Name of Employer Mares Realty Occupation Realtor

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
07 / 07 / 2008

Transaction ID: C1807232

Amount of Each Receipt this Period
200.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 1060 Camino Manana

City State Zip Code
Santa Fe NM 87501-1043

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

Name of Employer Mares Realty Occupation Realtor

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
09 / 22 / 2008

Transaction ID: C2101750

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **2750.00**

TOTAL 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: PAGE 52 / 192
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
N. Boris Margolin

Mailing Address 73 Spring Park Ave
A

City State Zip Code
Jamaica Plain MA 02130-4428

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

Name of Employer Occupation
Adaptive Analytics Software Developer

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 30 / 2008

Transaction ID: C2124212

Amount of Each Receipt this Period
2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 5 Big Bear Pl

City State Zip Code
Santa Fe NM 87508-1382

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

Name of Employer Occupation
TVI Teacher

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 27 / 2008

Transaction ID: C2066809

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 2877 Paradise Rd
Unit 2904

City State Zip Code
Las Vegas NV 89109-5273

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

Name of Employer Occupation
Self Filmmaker

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 30 / 2008

Transaction ID: C2116183

Amount of Each Receipt this Period
2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **4850.00**

TOTAL 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: PAGE 53 / 192
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
Walter Matuska

Mailing Address 530 Rover Blvd

City Los Alamos State NM Zip Code 87544-3555

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

Name of Employer Retired Occupation Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 09 / 30 / 2008
Transaction ID: C2120300
 Amount of Each Receipt this Period 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 823 S Edison Ave

City Tampa State FL Zip Code 33606-2918

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

Name of Employer Self Occupation Real Estate Development

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

Date of Receipt 09 / 04 / 2008
Transaction ID: C2079235
 Amount of Each Receipt this Period 2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 823 S Edison Ave

City Tampa State FL Zip Code 33606-2918

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

Name of Employer University of Tampa Occupation Professor

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

Date of Receipt 09 / 04 / 2008
Transaction ID: C2079241
 Amount of Each Receipt this Period 2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ **5100.00**

TOTAL 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: PAGE 54 / 192
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
Barbara McAneny
Mailing Address 3325 Calle De Daniel NW
City Albuquerque State NM Zip Code 87104-3023
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Doctor
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00
Date of Receipt 09 / 15 / 2008
Transaction ID: C2091775
Amount of Each Receipt this Period 250.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Barbara McAneny
Mailing Address 3325 Calle De Daniel NW
City Albuquerque State NM Zip Code 87104-3023
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Doctor
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00
Date of Receipt 09 / 15 / 2008
Transaction ID: C2091776
Amount of Each Receipt this Period 250.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Gray McBride
Mailing Address PO Box 22010
City Santa Fe State NM Zip Code 87502-2010
FEC ID number of contributing federal political committee. **C**
Name of Employer self Occupation Consultant
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 475.00
Date of Receipt 07 / 09 / 2008
Transaction ID: C1811810
Amount of Each Receipt this Period 100.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 600.00
TOTAL 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: PAGE 55 / 192
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
Greg McBride
Mailing Address 307 Pino Rd
City Santa Fe State NM Zip Code 87505-0312
FEC ID number of contributing federal political committee. **C**
Name of Employer Information Requested Occupation Information Requested
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 2000.00
Date of Receipt 09 / 28 / 2008
Transaction ID: C2154862
Amount of Each Receipt this Period 2000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
* In-Kind: Food for Event

B. Full Name (Last, First, Middle Initial)
Randi McGinn
Mailing Address 201 Broadway Blvd SE
City Albuquerque State NM Zip Code 87102-3424
FEC ID number of contributing federal political committee. **C**
Name of Employer McGinn, Carpenter, Montoya and Love, P Occupation Attorney
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 1000.00
Date of Receipt 08 / 11 / 2008
Transaction ID: C2032793
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Cordy Medina
Mailing Address PO Box 491
City Tesuque State NM Zip Code 87574-0491
FEC ID number of contributing federal political committee. **C**
Name of Employer State of NM Occupation State Employee
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 400.00
Date of Receipt 09 / 28 / 2008
Transaction ID: C2154921
Amount of Each Receipt this Period 400.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
* In-Kind: Event Expenses

SUBTOTAL of Receipts This Page (optional) ► 3400.00
TOTAL 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: PAGE 56 / 192
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
Arthur Melendres

Mailing Address 732 Manzano St NE

City Albuquerque State NM Zip Code 87110-6304

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

Name of Employer Modrall Sperling Roehl Harris & Sisk P Occupation Attorney

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 09 / 04 / 2008
Transaction ID: C2079298
 Amount of Each Receipt this Period 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
William And Alicia Miller

Mailing Address 40 Camino Del Valle

City Santa Fe State NM Zip Code 87506-2161

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

Name of Employer self Occupation Consultant

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 09 / 30 / 2008
Transaction ID: C2117813
 Amount of Each Receipt this Period 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Thomas C.H. Mills

Mailing Address PO Box 269

City Santa Fe State NM Zip Code 87504-0269

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

Name of Employer Gallagher and Kennedy Occupation Attorney

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2800.00

Date of Receipt 09 / 04 / 2008
Transaction ID: C2079278
 Amount of Each Receipt this Period 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 1500.00

TOTAL 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: PAGE 57 / 192
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
Richard C. Minzner
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 Law Firm Occupation Attorney
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 4800.00
Date of Receipt 09 / 04 / 2008
Transaction ID: C2079290
Amount of Each Receipt this Period 2300.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
David Montoya, Rd
Mailing Address 7 Manzano Rd
City Corrales State NM Zip Code 87048-8325
FEC ID number of contributing federal political committee. **C**
Name of Employer Manzano Strategies Occupation CEO
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 5250.00
Date of Receipt 09 / 04 / 2008
Transaction ID: C2079142
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Elicia Montoya
Mailing Address 14 Vista Esperanza
City Santa Fe State NM Zip Code 87506
FEC ID number of contributing federal political committee. **C**
Name of Employer MCMC, PA Occupation attorney
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1250.00
Date of Receipt 08 / 11 / 2008
Transaction ID: C2032820
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ 4300.00
TOTAL 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: PAGE 58 / 192
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
Frank Montoya
Mailing Address 500 Circle Dr
City Santa Fe State NM Zip Code 87501-7018
FEC ID number of contributing federal political committee. **C**
Name of Employer Information Requested Occupation Information Requested
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 400.00
Date of Receipt 08 / 11 / 2008
Transaction ID: C2032627
Amount of Each Receipt this Period 200.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Horace Montoya
Mailing Address PO Box 926
City Espanola State NM Zip Code 87532-0926
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 350.00
Date of Receipt 07 / 16 / 2008
Transaction ID: C1930393
Amount of Each Receipt this Period 50.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Paul Montoya
Mailing Address 21 Paseo De Aguila
City Santa Fe State NM Zip Code 87506-7905
FEC ID number of contributing federal political committee. **C**
Name of Employer Burro Alley Partners Occupation Developer
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 225.00
Date of Receipt 09 / 28 / 2008
Transaction ID: C2154913
Amount of Each Receipt this Period 225.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
* In-Kind: Event Expenses

SUBTOTAL of Receipts This Page (optional) ▶ 475.00
TOTAL 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: PAGE 59 / 192
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 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)
People for Ben

A. Full Name (Last, First, Middle Initial)
Yvonne Montoya

Mailing Address PO Box 2452

City Santa Fe State NM Zip Code 87504-2452

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

Name of Employer Self Employed Occupation Real Estate

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3300.00

Date of Receipt 08 / 19 / 2008

Transaction ID: C2045899

Amount of Each Receipt this Period 2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 508 Solano Dr SE

City Albuquerque State NM Zip Code 87108-2669

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

Name of Employer self Occupation attorney

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 08 / 11 / 2008

Transaction ID: C2032802

Amount of Each Receipt this Period 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address PO Box 962

City Tucumcari State NM Zip Code 88401-0962

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

Name of Employer Retired Occupation Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 08 / 09 / 2008

Transaction ID: C2031595

Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **3550.00**

TOTAL 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: PAGE 60 / 192
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
Nick R. Naranjo

Mailing Address PO Box 1808

City State Zip Code
Espanola NM 87532-1808

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

Name of Employer Retired Occupation Information requested

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Amount of Each Receipt this Period
250.00

Transaction ID: C2101800

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Fred S Nathan, Jr.

Mailing Address 46 Laughing Horse Ln

City State Zip Code
Santa Fe NM 87508-9484

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

Name of Employer Think New Mexico Occupation Executive Director

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Amount of Each Receipt this Period
250.00

Transaction ID: C2091802

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Amount of Each Receipt this Period
800.00

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

Mailing Address 4421 Avienda del Sol NE

City State Zip Code
Albuquerque NM 87110

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

Name of Employer CB Richard Ellis Occupation First Vice President

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Amount of Each Receipt this Period
2000.00

Transaction ID: C2116211

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **2500.00**

TOTAL 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: PAGE 61 / 192
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
Natasha Ning

Mailing Address 1331 Park Ave SW
Unit 611

City Albuquerque State NM Zip Code 87102-2853

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

Name of Employer Self-Employed Occupation Government Affairs

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt: 08 / 13 / 2008
Transaction ID: C2037508
 Amount of Each Receipt this Period: 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Nicholas John Nino

Mailing Address 8143 Manitoba St
Apt 4

City Playa Del Rey State CA Zip Code 90293-8781

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

Name of Employer not employed Occupation not employed

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt: 09 / 04 / 2008
Transaction ID: C2079138
 Amount of Each Receipt this Period: 2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address PO Box 1099

City San Juan Pueblo State NM Zip Code 87566-1099

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

Name of Employer Occupation

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt: 09 / 04 / 2008
Transaction ID: C2079171
 Amount of Each Receipt this Period: 2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **5600.00**

TOTAL 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: PAGE 62 / 192
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
Antonio F. Ortega

Mailing Address 1418 Luisa St
Ste 6

City Santa Fe State NM Zip Code 87505-4091

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

Name of Employer Ortega, Romero & Rodriguez Occupation Partner

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 750.00

Date of Receipt 09 / 30 / 2008
Transaction ID: C2120268
 Amount of Each Receipt this Period 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address PO Box 46

City Sanders State AZ Zip Code 86512-0046

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

Name of Employer Indian Ruins Trading Post Occupation Self

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt 09 / 15 / 2008
Transaction ID: C2091783
 Amount of Each Receipt this Period 300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address PO Box 265

City Montezuma State NM Zip Code 87731-0265

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

Name of Employer retired Occupation retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 07 / 09 / 2008
Transaction ID: C1811806
 Amount of Each Receipt this Period 150.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **700.00**

TOTAL 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: PAGE 63 / 192
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
Raymond Z. Ortiz

Mailing Address PO Box 2900

City Santa Fe State NM Zip Code 87504-2900

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

Name of Employer State of New Mexico Occupation Legal

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt 07 / 11 / 2008

Transaction ID: C1917642

Amount of Each Receipt this Period 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Robert D. Ortiz

Mailing Address PO Box 2

City Moriarty State NM Zip Code 87035-0002

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

Name of Employer State of New Mexico Occupation DOT

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 350.00

Date of Receipt 09 / 30 / 2008

Transaction ID: C2120686

Amount of Each Receipt this Period 100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address PO Box 305

City Tome State NM Zip Code 87060-0305

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 07 / 09 / 2008

Transaction ID: C1811814

Amount of Each Receipt this Period 50.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **650.00**

TOTAL 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: PAGE 64 / 192
(check only one)

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

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NAME OF COMMITTEE (In Full)
People for Ben

A.

Full Name (Last, First, Middle Initial)
Marisol Padilla

Mailing Address PO Box 305

City Tome State NM Zip Code 87060-0305

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

Name of Employer Los Lunas School District Occupation Councilor

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt: 09 / 30 / 2008
Transaction ID: C2122190
Amount of Each Receipt this Period: 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Bryon J. Paez

Mailing Address 8900 Ortega Ct NW

City Albuquerque State NM Zip Code 87114-1747

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

Name of Employer Butch Maki & Associates Occupation Consultant

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt: 07 / 21 / 2008
Transaction ID: C1992173
Amount of Each Receipt this Period: 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Andrew J. Perkins

Mailing Address 117 Mateo Cir N

City Santa Fe State NM Zip Code 87505-4029

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

Name of Employer State of New Mexico Occupation Homeland Security

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 850.00

Date of Receipt: 09 / 30 / 2008
Transaction ID: C2120291
Amount of Each Receipt this Period: 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ **750.00**

TOTAL 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: PAGE 65 / 192
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 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)
People for Ben

A.

Full Name (Last, First, Middle Initial)
Gregory Phillips

Mailing Address 2735 N Lincoln Ave

City State Zip Code
Chicago IL 60614-1469

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

Name of Employer PRKN Occupation Investment Banker

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 30 / 2008

Transaction ID: C2117880

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
David Poms

Mailing Address 6405 Bonsall Dr

City State Zip Code
Malibu CA 90265-3829

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

Name of Employer President Occupation Poms & Associates Insurance Brokers, I

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4300.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 16 / 2008

Transaction ID: C1930403

Amount of Each Receipt this Period
2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Sandra Poms

Mailing Address 23565 Park South St

City State Zip Code
Calabasas CA 91302-2026

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

Name of Employer Housewife Occupation Housewife

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 04 / 2008

Transaction ID: C2079139

Amount of Each Receipt this Period
2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **5600.00**

TOTAL 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: PAGE 66 / 192
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
People for Ben

A. Full Name (Last, First, Middle Initial)
Deborah Dozier Potter

Mailing Address PO Box 1902

City State Zip Code
Santa Fe NM 87504-1902

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

Name of Employer self-employed Occupation
self-employed Santa Fe Hospitality

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 11 / 2008

Transaction ID: C1917664

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Deborah Dozier Potter

Mailing Address PO Box 1902

City State Zip Code
Santa Fe NM 87504-1902

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

Name of Employer self-employed Occupation
self-employed Santa Fe Hospitality

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 30 / 2008

Transaction ID: C2116513

Amount of Each Receipt this Period
975.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
John B. Pound

Mailing Address 2302 Calle Halcon

City State Zip Code
Santa Fe NM 87505-5715

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

Name of Employer Occupation
Herrera, Long, Pound and Komer, PA Lawyers

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 11 / 2008

Transaction ID: C1917672

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **2475.00**

TOTAL 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: PAGE 67 / 192
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

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: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 9 / 0 4 / 2 0 0 8

Transaction ID: C2079162

Amount of Each Receipt this Period
2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Pueblo of Pojoaque

Mailing Address 78 Cities Of Gold Rd

City Santa Fe State NM Zip Code 87506-0918

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 6300.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 9 / 2 4 / 2 0 0 8

Transaction ID: C2106631

Amount of Each Receipt this Period
2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Pueblo of San Felipe

Mailing Address PO Box 4339
Office of the Governor

City Algodones State NM Zip Code 87001-2012

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 9 / 0 4 / 2 0 0 8

Transaction ID: C2079167

Amount of Each Receipt this Period
2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **6900.00**

TOTAL 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: PAGE 68 / 192
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 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)
People for Ben

A. 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: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

Date of Receipt 09 / 04 / 2008

Transaction ID: C2079219

Amount of Each Receipt this Period 2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Pueblo of Santa Clara

Mailing Address PO Box 5105

City Espanola State NM Zip Code 87533-5105

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 09 / 30 / 2008

Transaction ID: C2124226

Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address RR 42 Box 360T

City Santa Fe State NM Zip Code 87506-2632

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

Date of Receipt 09 / 30 / 2008

Transaction ID: C2124361

Amount of Each Receipt this Period 2050.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 5350.00

TOTAL 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: PAGE 69 / 192
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
People for Ben

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

Mailing Address RR 42 Box 360T

City State Zip Code
Santa Fe NM 87506-2632

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

Date of Receipt
M M / D D / Y Y Y Y
0 9 / 3 0 / 2 0 0 8

Transaction ID: C2124363

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 2401 12th St NW

City State Zip Code
Albuquerque NM 87102-1815

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

Name of Employer Occupation
Consultant The Setter Group

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
0 9 / 0 4 / 2 0 0 8

Transaction ID: C2079279

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 4449 E 4th St

City State Zip Code
Long Beach CA 90814-3002

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

Name of Employer Occupation
Democratic Party of Orange County Executive Director

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
0 8 / 1 3 / 2 0 0 8

Transaction ID: C2037504

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **1250.00**

TOTAL 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: PAGE 70 / 192
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
Daniel Rakes

Mailing Address PO Box 473

City State Zip Code
Angel Fire NM 87710-0473

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

Name of Employer Occupation
Angel Fire Resort President

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 30 / 2008

Transaction ID: C2116303

Amount of Each Receipt this Period
2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Rose Marie Rakes

Mailing Address PO Box 473

City State Zip Code
Angel Fire NM 87710-0473

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

Name of Employer Occupation
Angel Fire Resort administrator

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 30 / 2008

Transaction ID: C2116306

Amount of Each Receipt this Period
1600.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Roberta & Barry Ramo

Mailing Address 908 El Alhambra Cir NW

City State Zip Code
Albuquerque NM 87107-6304

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

Name of Employer Occupation
Modrall Sperling Lawyer

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 13 / 2008

Transaction ID: C2037467

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **4400.00**

TOTAL 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: PAGE 71 / 192
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
Roberta & Barry Ramo

Mailing Address 908 El Alhambra Cir NW

City Albuquerque State NM Zip Code 87107-6304

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

Name of Employer Modrall Sperling Occupation Lawyer

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 750.00

Date of Receipt 09 / 04 / 2008
Transaction ID: C2079294
 Amount of Each Receipt this Period 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 714 Kane Dr

City Las Vegas State NM Zip Code 87701-4949

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

Name of Employer Mr. T's Construction Occupation Self

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 09 / 30 / 2008
Transaction ID: C2120745
 Amount of Each Receipt this Period 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 4240 Lost Hills Rd Unit 3005

City Agoura Hills State CA Zip Code 91301-5391

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

Name of Employer not employed Occupation not employed

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

Date of Receipt 09 / 04 / 2008
Transaction ID: C2079137
 Amount of Each Receipt this Period 2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 2800.00

TOTAL 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: PAGE 72 / 192
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
Bill Richardson

Mailing Address 1 Mansion Dr

City State Zip Code
Santa Fe NM 87501-6904

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
State of NM Governor

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
0 9 / 2 2 / 2 0 0 8

Transaction ID: C2101775

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 5 Los Coyotes

City State Zip Code
Santa Fe NM 87506-8535

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
NMPRC Attorney

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
0 9 / 2 2 / 2 0 0 8

Transaction ID: C2101780

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 152 Arroyo Hondo Rd
B

City State Zip Code
Santa Fe NM 87508-5941

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
State of New Mexico Environmental Ombudsman

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
0 9 / 1 5 / 2 0 0 8

Transaction ID: C2091801

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) 2500.00

TOTAL 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: PAGE 73 / 192
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
Patricia G. Rogers

Mailing Address 10044 Wellington NE

City State Zip Code
Albuquerque NM 87111-7401

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

Name of Employer Self Occupation
Realtor

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Amount of Each Receipt this Period
100.00

Transaction ID: C1994830

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

500.00

B. Full Name (Last, First, Middle Initial)
Patricia G. Rogers

Mailing Address 10044 Wellington NE

City State Zip Code
Albuquerque NM 87111-7401

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

Name of Employer Self Occupation
Realtor

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Amount of Each Receipt this Period
100.00

Transaction ID: C2045163

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

500.00

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

Mailing Address 06 Nuestro Callejon

City State Zip Code
Santa Fe NM 87506-2677

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

Name of Employer Retired Occupation
Retired

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Amount of Each Receipt this Period
250.00

Transaction ID: C1930381

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

350.00

SUBTOTAL of Receipts This Page (optional) ▶ **450.00**

TOTAL 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:	PAGE 74 / 192
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
<input type="checkbox"/> 14	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
People for Ben

A.	Full Name (Last, First, Middle Initial) Robert Romero		Date of Receipt MM / DD / YYYY 09 / 22 / 2008
	Mailing Address 1704 State Rd 502		Transaction ID: C2101749
	City Santa Fe	State NM	Zip Code 87506
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
	Name of Employer Self	Occupation Businessman	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 800.00		

B.	Full Name (Last, First, Middle Initial) Bob Rosebrough		Date of Receipt MM / DD / YYYY 09 / 15 / 2008
	Mailing Address 1506 S Grandview Dr		Transaction ID: C2091784
	City Gallup	State NM	Zip Code 87301-5906
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
	Name of Employer Self	Occupation lawyer	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00		

C.	Full Name (Last, First, Middle Initial) Marc H Saavedra		Date of Receipt MM / DD / YYYY 09 / 04 / 2008
	Mailing Address 919 Jefferson St NE		Transaction ID: C2079144
	City Albuquerque	State NM	Zip Code 87110-6207
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
	Name of Employer UNM	Occupation Government Affairs	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00		

SUBTOTAL of Receipts This Page (optional)	▶	1300.00
TOTAL 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: PAGE 75 / 192
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
Bergit Salazar, Rd
Mailing Address 1036 Mansion Ridge Rd

City State Zip Code
Santa Fe NM 87501-1050

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

Name of Employer Not-employed Occupation not employed

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 11 / 2008

Transaction ID: C1917645

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Joann Vigil Salazar
Mailing Address PO Box 1007

City State Zip Code
Española NM 87532-1007

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

Name of Employer Villa Therese Catholic Clinic Occupation Executive Director

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 09 / 2008

Transaction ID: C1811818

Amount of Each Receipt this Period
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Leonard Sanchez
Mailing Address 6100 Uptown Blvd NE

City State Zip Code
Albuquerque NM 87110-4163

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

Name of Employer Moss Adams Occupation CPA

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 22 / 2008

Transaction ID: C2101752

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **1100.00**

TOTAL 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: PAGE 76 / 192
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

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

Mailing Address 626 Camino Del Bosgime, NW

City Albuquerque State NM Zip Code 87114

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

Name of Employer Sanchez, Mowrer, and Desiderio, P.C. Occupation Attorney

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt: 09 / 04 / 2008
Transaction ID: C2079164
 Amount of Each Receipt this Period: 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address HC 69 Box 2

City Rociada State NM Zip Code 87742-9700

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt: 09 / 30 / 2008
Transaction ID: C2120264
 Amount of Each Receipt this Period: 100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address HC 69 Box 2

City Rociada State NM Zip Code 87742-9700

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt: 09 / 30 / 2008
Transaction ID: C2120269
 Amount of Each Receipt this Period: 100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ **700.00**

TOTAL 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: PAGE 77 / 192
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
People for Ben

A. Full Name (Last, First, Middle Initial)
Claire Sandel
Mailing Address 1570 Saguaro Trl
City Farmington State NM Zip Code 87401-6005
FEC ID number of contributing federal political committee. **C**
Name of Employer Housewife Occupation Housewife
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2300.00
Date of Receipt 09 / 30 / 2008
Transaction ID: C2117858
Amount of Each Receipt this Period 2300.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Jason Sandel
Mailing Address 4909 Pinecroft
City Farmington State NM Zip Code 87402-5218
FEC ID number of contributing federal political committee. **C**
Name of Employer Aztec Well Servicing Occupation Businessman
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2300.00
Date of Receipt 09 / 30 / 2008
Transaction ID: C2117859
Amount of Each Receipt this Period 2300.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Jerry W. Sandel
Mailing Address 1570 Saguaro Trl
City Farmington State NM Zip Code 87401-6005
FEC ID number of contributing federal political committee. **C**
Name of Employer Aztec Well Servicing Co. Occupation Oil and Gas Well Services
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 4800.00
Date of Receipt 08 / 09 / 2008
Transaction ID: C2031594
Amount of Each Receipt this Period 2300.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 6900.00
TOTAL 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: PAGE 78 / 192
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
People for Ben

A. Full Name (Last, First, Middle Initial)
Joel E. Scheinberg

Mailing Address PO Box 1185

City State Zip Code
Las Vegas NM 87701-1185

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

Name of Employer Occupation
Natures Accent Cheif Marketing Officer

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
09 / 30 / 2008

Transaction ID: C2116262

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Joseph W. Schepps

Mailing Address 560 Montezuma

City State Zip Code
Santa Fe NM 87501

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

Name of Employer Occupation
Schepps Mgmt Schepps Mgmnt-President

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
07 / 16 / 2008

Transaction ID: C1930391

Amount of Each Receipt this Period
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 22 Vuelta Sabio

City State Zip Code
Santa Fe NM 87506-8563

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

Name of Employer Occupation
Self Investor

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
08 / 09 / 2008

Transaction ID: C2031597

Amount of Each Receipt this Period
2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **2650.00**

TOTAL 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: PAGE 79 / 192
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

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

Mailing Address 347 E Palace Ave

City State Zip Code
Santa Fe NM 87501-2275

FEC ID number of contributing federal political committee. C

Name of Employer Self Occupation
Lawyer

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	9		2	0	0	8

Transaction ID: C2031596

Amount of Each Receipt this Period
2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 44 Eastwood Dr

City State Zip Code
Saint Joseph MO 64506-3169

FEC ID number of contributing federal political committee. C

Name of Employer Herzog Contracting Corp Occupation
Manager

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	4		2	0	0	8

Transaction ID: C2079277

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Andrew B. Setter

Mailing Address 9615 Noche Vista Dr NW

City State Zip Code
Albuquerque NM 87114-4372

FEC ID number of contributing federal political committee. C

Name of Employer Drew Setter & Associates Occupation
Consultant

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	4		2	0	0	8

Transaction ID: C2079134

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	3550.00
TOTAL 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: PAGE 80 / 192

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 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)
People for Ben

A.

Full Name (Last, First, Middle Initial)
Greg owen Shade

Mailing Address PO Box 986

City State Zip Code
Corrales NM 87048-0986

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

Name of Employer Occupation
Self employed Builder

Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 2000.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 03 / 2008

Transaction ID: C2073728

Amount of Each Receipt this Period

1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Marla Shoats

Mailing Address 9631 4th St NW

City State Zip Code
Albuquerque NM 87114-2128

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

Name of Employer Occupation
Shoats & Weeks, Inc. public relations firm

Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 3250.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 04 / 2008

Transaction ID: C2079245

Amount of Each Receipt this Period

2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Domonic Silva

Mailing Address 4047 Demos Ave

City State Zip Code
Las Cruces NM 88011-4210

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

Name of Employer Occupation
Self Consultant

Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 30 / 2008

Transaction ID: C2124156

Amount of Each Receipt this Period

250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

3250.00

TOTAL 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: PAGE 81 / 192
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	11d		
<input type="checkbox"/>	12	<input type="checkbox"/>	13a	<input type="checkbox"/>	13b	<input type="checkbox"/>	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)
People for Ben

A.

Full Name (Last, First, Middle Initial)
Sarah M. Singleton

Mailing Address PO Box 2423

City Santa Fe State NM Zip Code 87504-2423

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

Name of Employer Montgomery & Andrews PA Occupation lawyer

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 07 / 09 / 2008

Transaction ID: C1811784

Amount of Each Receipt this Period 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Gene Sisneros

Mailing Address 126 Highway 72

City Raton State NM Zip Code 87740-2835

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

Name of Employer Retired Occupation Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1300.00

Date of Receipt 09 / 30 / 2008

Transaction ID: C2122223

Amount of Each Receipt this Period 100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Philip M. Smith

Mailing Address 767 Acequia Madre Apt 2

City Santa Fe State NM Zip Code 87505-2868

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

Name of Employer Self-Employed Occupation Science Policy Consultant

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 600.00

Date of Receipt 09 / 15 / 2008

Transaction ID: C2091786

Amount of Each Receipt this Period 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **850.00**

TOTAL 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: PAGE 82 / 192

(check only one)

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

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NAME OF COMMITTEE (In Full)

People for Ben

A.

Full Name (Last, First, Middle Initial)

David S. Smoak

Mailing Address 28 Don Quixote Ct

City State Zip Code
Corrales NM 87048-7906

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

Name of Employer Occupation
Caldwell Banker Commercial Executive

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 04 / 2008

Transaction ID: C2079242

Amount of Each Receipt this Period

500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

William E. Snead

Mailing Address 4148 Dietz Farm Cir NW

City State Zip Code
Albuquerque NM 87107-3126

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

Name of Employer Occupation
Self-Employed lawyer/Business owner

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y
08 / 19 / 2008

Transaction ID: C2045041

Amount of Each Receipt this Period

500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

David M Steinborn

Mailing Address PO Box 936

City State Zip Code
Las Cruces NM 88011

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

Name of Employer Occupation
Steinborn Inc Realtors Real Estate

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y
08 / 12 / 2008

Transaction ID: C2033076

Amount of Each Receipt this Period

250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶

1250.00

TOTAL 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: PAGE 83 / 192
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
Luis G Stelzner

Mailing Address 3521 Campbell CT NW

City Albuquerque State NM Zip Code 87104

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

Name of Employer Self Occupation Attorney

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 08 / 11 / 2008
Transaction ID: C2032831
 Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 128 Grant Ave Ste 301

City Santa Fe State NM Zip Code 87501

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

Name of Employer Self Occupation Attorney

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt 07 / 11 / 2008
Transaction ID: C1917639
 Amount of Each Receipt this Period 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Amanda Storie, Rd

Mailing Address 5529 Vera Cruz Rd NE

City Rio Rancho State NM Zip Code 87144-3289

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

Name of Employer State of New Mexico Occupation State Employee

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt 09 / 04 / 2008
Transaction ID: C2079200
 Amount of Each Receipt this Period 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 1750.00

TOTAL 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: PAGE 84 / 192
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
Patrick W. Sullivan

Mailing Address 6301 Indian School Rd NE
Ste 300

City Albuquerque State NM Zip Code 87110-7177

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

Name of Employer Salazar & Sullivan Occupation attorney

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 08 / 12 / 2008
Transaction ID: C2033081
 Amount of Each Receipt this Period 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Lynda Taylor, Dr

Mailing Address 1071 Governor Dempsey Dr

City Santa Fe State NM Zip Code 87501-1045

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

Name of Employer community activist/Consultant Occupation environmentalist

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2305.00

Date of Receipt 09 / 15 / 2008
Transaction ID: C2091805
 Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Sarima M Taylor

Mailing Address 37 Apache Canyon Trl

City Santa Fe State NM Zip Code 87505-1428

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

Name of Employer Santa Fe Music and Piano Occupation Owner

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 850.00

Date of Receipt 09 / 15 / 2008
Transaction ID: C2091807
 Amount of Each Receipt this Period 350.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **1600.00**

TOTAL 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: PAGE 85 / 192
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
Eugene V. Thaw

Mailing Address 13 Eddy Rd

City Santa Fe State NM Zip Code 87506-0048

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

Name of Employer Retired Occupation retired President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 07 / 09 / 2008

Transaction ID: C1811735

Amount of Each Receipt this Period 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 150 Washington Ave Ste 302

City Santa Fe State NM Zip Code 87501-2038

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

Name of Employer Thornburg Companies Occupation Investments

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4600.00

Date of Receipt 09 / 30 / 2008

Transaction ID: C2124139

Amount of Each Receipt this Period 2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Donald H Tishman

Mailing Address 7770 Jefferson St NE Ste 440

City Albuquerque State NM Zip Code 87109-4386

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

Name of Employer self - retired Occupation developer; artist (Jill)

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 6900.00

Date of Receipt 07 / 09 / 2008

Transaction ID: C1811732

Amount of Each Receipt this Period 2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 5100.00

TOTAL 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:	PAGE 86 / 192
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
<input type="checkbox"/> 14	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
People for Ben

A.	Full Name (Last, First, Middle Initial) Victor A. Titus		Date of Receipt MM / DD / YYYY 08 / 27 / 2008
	Mailing Address 2021 E 20th St		Transaction ID: C2066780
	City Farmington	State NM	Zip Code 87401-2516
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
	Name of Employer Titus and Murphy	Occupation Lawyer	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00		

B.	Full Name (Last, First, Middle Initial) Conception J. Trujillo		Date of Receipt MM / DD / YYYY 09 / 30 / 2008
	Mailing Address PO Box 2615		Transaction ID: C2120265
	City Las Vegas	State NM	Zip Code 87701-2615
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
	Name of Employer Retired	Occupation Retired	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00		

C.	Full Name (Last, First, Middle Initial) L.K. Trujillo		Date of Receipt MM / DD / YYYY 07 / 09 / 2008
	Mailing Address PO Box 3411		Transaction ID: C1811792
	City Pojoaque	State NM	Zip Code 87501-0411
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
	Name of Employer Information Requested	Occupation Information Requested	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 300.00		

SUBTOTAL of Receipts This Page (optional)	950.00
TOTAL 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: PAGE 87 / 192
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
People for Ben

A. Full Name (Last, First, Middle Initial)
John Turner
Mailing Address PO Box 5130
City State Zip Code
Bossier City LA 71171-5130
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Turner & Windham Developer
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2300.00
Date of Receipt
M M / D D / Y Y Y Y
09 / 03 / 2008
Transaction ID: C2073695
Amount of Each Receipt this Period
1300.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Grace Valdez
Mailing Address PO Box 826
City State Zip Code
Alcalde NM 87511-0826
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Information Requested Information Requested
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2000.00
Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2008
Transaction ID: C2121762
Amount of Each Receipt this Period
2000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Fernando Valencia
Mailing Address 2829 Vereda Poniente
City State Zip Code
Santa Fe NM 87507-9235
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Retired Retired
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 9200.00
Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2008
Transaction ID: C2116511
Amount of Each Receipt this Period
2300.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 5600.00
TOTAL 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: PAGE 88 / 192
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
Gilbert Vallejos

Mailing Address 3000 8th St

City Las Vegas State NM Zip Code 87701-5134

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

Name of Employer Vice President Occupation Bank of Las Vegas

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 09 / 30 / 2008

Transaction ID: C2120270

Amount of Each Receipt this Period: 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

250.00

B. Full Name (Last, First, Middle Initial)
Ray M. Vargas, II

Mailing Address 924 Truman St NE

City Albuquerque State NM Zip Code 87110-6450

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

Name of Employer self Occupation Attorney

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 08 / 11 / 2008

Transaction ID: C2032751

Amount of Each Receipt this Period: 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

1500.00

C. Full Name (Last, First, Middle Initial)
J Longino Vigil

Mailing Address PO Box 3241

City Pojoaque State NM Zip Code 87501-0241

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

Name of Employer Retired Occupation Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 09 / 03 / 2008

Transaction ID: C2073983

Amount of Each Receipt this Period: 250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

500.00

SUBTOTAL of Receipts This Page (optional) ► **1000.00**

TOTAL 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: PAGE 89 / 192
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
Richard L. Virtue
Mailing Address 2118 Plaznela Vista
City Santa Fe State NM Zip Code 87505
FEC ID number of contributing federal political committee. **C**
Name of Employer Virtue, Najjar & Brown, Pc Occupation Attorney
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1500.00
Date of Receipt 07 / 11 / 2008
Transaction ID: C1917648
Amount of Each Receipt this Period 500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Benjamin Warner
Mailing Address 903 Tewa Loop
City Los Alamos State NM Zip Code 87544-3210
FEC ID number of contributing federal political committee. **C**
Name of Employer Caldera Pharmaceuticals Occupation CEO
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 350.00
Date of Receipt 08 / 12 / 2008
Transaction ID: C2033442
Amount of Each Receipt this Period 250.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Dan D. Weaks
Mailing Address 9629 4th St NW
City Albuquerque State NM Zip Code 87114-2128
FEC ID number of contributing federal political committee. **C**
Name of Employer Weaks and Shoats Occupation Government Affairs
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 3300.00
Date of Receipt 09 / 04 / 2008
Transaction ID: C2079246
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 1750.00
TOTAL 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: PAGE 90 / 192
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
James Wechsler
Mailing Address 2520 Avenida De Isidro
City Santa Fe State NM Zip Code 87505-6415
FEC ID number of contributing federal political committee. **C**
Name of Employer State of NM Occupation Judge
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼
Amount of Each Receipt this Period 250.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Linda Wedeen
Mailing Address 9417 Rio Grande Blvd NW
City Los Ranchos State NM Zip Code 87114-1812
FEC ID number of contributing federal political committee. **C**
Name of Employer First Community Bank Occupation Banker
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼
Amount of Each Receipt this Period 500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Claire U. Weiner
Mailing Address 1415 Madrid Pl
City Santa Fe State NM Zip Code 87505-4641
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation retired
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼
Amount of Each Receipt this Period 20.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ **770.00**
TOTAL 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: PAGE 91 / 192
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
Gerald Wendel

Mailing Address 2877 Paradise Rd
Unit 1902

City Las Vegas State NV Zip Code 89109-5252

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

Name of Employer Covington Capital, LLC Occupation Developer

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt: 09 / 30 / 2008
Transaction ID: C2116177
Amount of Each Receipt this Period: 2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address PO Box 2228

City Santa Fe State NM Zip Code 87504-2228

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

Name of Employer The Jones Firm Occupation attorney

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt: 07 / 11 / 2008
Transaction ID: C1917668
Amount of Each Receipt this Period: 2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 1035 Camino De Cruz Blanca

City Santa Fe State NM Zip Code 87505-0390

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

Name of Employer Self Occupation Attorney

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt: 07 / 11 / 2008
Transaction ID: C1917667
Amount of Each Receipt this Period: 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ **5100.00**

TOTAL 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: PAGE 92 / 192
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 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)
People for Ben

A.

Full Name (Last, First, Middle Initial)
Eric Witt

Mailing Address 108 Calle Palomita

City State Zip Code
Santa Fe NM 87505-5719

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

Name of Employer State of NM Occupation Office of the Governor

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
08 / 19 / 2008

Transaction ID: C2045904

Amount of Each Receipt this Period
300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Paul Wood

Mailing Address 2416 Rozinante Dr NW

City State Zip Code
Albuquerque NM 87104-3081

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

Name of Employer WW Construction Inc Occupation Contractor

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
09 / 22 / 2008

Transaction ID: C2101751

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Wendy York

Mailing Address 1604 Camino Rosario NW

City State Zip Code
Albuquerque NM 87107-2618

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

Name of Employer Sheehan Sheehan & Stelzner PA Occupation Attorney

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
09 / 04 / 2008

Transaction ID: C2079208

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **1800.00**

TOTAL 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:		PAGE 93 / 192	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 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)
People for Ben

A.

Full Name (Last, First, Middle Initial) Kurt Young		Date of Receipt MM / DD / YYYY 09 / 28 / 2008
Mailing Address 1413 Paseo De Peralta		Transaction ID: C2154928
City State Zip Code Santa Fe NM 87501-4300	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00
Name of Employer developer	Occupation developer	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	* In-Kind: Food for Event

SUBTOTAL of Receipts This Page (optional)	1000.00
TOTAL This Period (last page this line number only)	231124.89

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 94 / 192
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
AAJ PAC
Mailing Address 1050 31st St NW
City Washington State DC Zip Code 20007-4405
FEC ID number of contributing federal political committee. **C** C00024521
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 10000.00
Date of Receipt 08 / 11 / 2008
Transaction ID: C2032730
Amount of Each Receipt this Period 5000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Action Committee for Rural Electrification
Mailing Address 4301 Wilson Blvd
City Arlington State VA Zip Code 22203
FEC ID number of contributing federal political committee. **C** C00443689
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 5000.00
Date of Receipt 09 / 30 / 2008
Transaction ID: C2124159
Amount of Each Receipt this Period 2500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
AIR LINE PILOTS ASSOCIATION PAC
Mailing Address 1625 Massachusetts Ave. NW
8th Floor
City Washington State DC Zip Code 20036
FEC ID number of contributing federal political committee. **C** C00035451
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 2500.00
Date of Receipt 08 / 19 / 2008
Transaction ID: C2045090
Amount of Each Receipt this Period 2500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 10000.00
TOTAL 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: PAGE 95 / 192
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
American Association of Nurse Anesthetists

Mailing Address 25 Massachusetts Ave NW

City Washington State DC Zip Code 20001-1430

FEC ID number of contributing federal political committee. **C** C00173153

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt 09 / 25 / 2008
Transaction ID: C2111480
 Amount of Each Receipt this Period 2500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
American Bankers Association

Mailing Address 1120 Connecticut Ave NW

City Washington State DC Zip Code 20036-3905

FEC ID number of contributing federal political committee. **C** C00004275

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt 09 / 15 / 2008
Transaction ID: C2091796
 Amount of Each Receipt this Period 2500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
AMERICAN COUNCIL OF ENGINEERING COMPANIES (ACEC/PA)

Mailing Address 1015 15th St. NW Suite 802

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00010868

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt 09 / 30 / 2008
Transaction ID: C2117864
 Amount of Each Receipt this Period 3000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 8000.00

TOTAL 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: PAGE 96 / 192
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
American Dental Association
Mailing Address 1111 14th St NW
City Washington State DC Zip Code 20005-5603
FEC ID number of contributing federal political committee. **C** C00000729
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 5000.00
Date of Receipt 09 / 22 / 2008
Transaction ID: C2101753
Amount of Each Receipt this Period 5000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
American Medical Association
Mailing Address 25 Massachusetts Ave NW
City Washington State DC Zip Code 20001-1430
FEC ID number of contributing federal political committee. **C** C00000422
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 5000.00
Date of Receipt 09 / 15 / 2008
Transaction ID: C2091774
Amount of Each Receipt this Period 5000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
AMERICAN OPTOMETRIC ASSOCIATION POLITICAL ACTION C
Mailing Address 1505 Prince Street Suite 300
City Alexandria State VA Zip Code 22314
FEC ID number of contributing federal political committee. **C** C00024968
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 5000.00
Date of Receipt 07 / 11 / 2008
Transaction ID: C2039363
Amount of Each Receipt this Period 5000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 15000.00
TOTAL 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: PAGE 97 / 192
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
AMERIPAC

Mailing Address 140 COVANT #2

City State Zip Code
MANCHESTER NH 03102

FEC ID number of contributing federal political committee. **C** C00348920

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 09 / 2008

Transaction ID: C2031593

Amount of Each Receipt this Period
5000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Barreras for State Representative

Mailing Address PO Box 267

City State Zip Code
Tome NM 87060-0267

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 22 / 2008

Transaction ID: C2101802

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
BART'S BRIDGE PAC

Mailing Address 817 9th Avenue, Second Floor
PO Box 1021

City State Zip Code
Menominee MI 49858

FEC ID number of contributing federal political committee. **C** C00428045

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 30 / 2008

Transaction ID: C2116231

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **7000.00**

TOTAL 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: PAGE 98 / 192
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
BEEF-PAC (BEEF POLITICAL ACTION COMMITTEE OF TEXAS)
Mailing Address 5501 W I-40

City State Zip Code
AMARILLO TX 79106

FEC ID number of contributing federal political committee. **C** C00015552

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 15 / 2008

Transaction ID: C2091789

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
CACTUS POLITICAL ACTION COMMITTEE (PAC)
Mailing Address PO Box 2069

City State Zip Code
Phoenix AZ 85001

FEC ID number of contributing federal political committee. **C** C00347443

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2008

Transaction ID: C2121777

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Carpenters Legislative Improvement Committee
Mailing Address 101 Constitution Ave NW
FI 10

City State Zip Code
Washington DC 20001-2153

FEC ID number of contributing federal political committee. **C** C00001016

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 10000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 22 / 2008

Transaction ID: C2101755

Amount of Each Receipt this Period
5000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **7000.00**

TOTAL 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: PAGE 99 / 192

(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A.

Full Name (Last, First, Middle Initial)
CHC Bold PAC
Mailing Address 1831 Bay St SE

City State Zip Code
Washington DC 20003-2510

FEC ID number of contributing federal political committee. **C** C00365536

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt

M M / D D / Y Y Y Y
08 / 09 / 2008

Transaction ID: C2031600

Amount of Each Receipt this Period

5000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
COMCAST CORPORATION POLITICAL ACTION COMMITTEE- FE
Mailing Address 1701 JFK Boulevard, 49th Floor
35th Floor

City State Zip Code
Philadelphia PA 19103

FEC ID number of contributing federal political committee. **C** C00248716

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 30 / 2008

Transaction ID: C2124148

Amount of Each Receipt this Period

2500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Committee to Elect Hector Balderas
Mailing Address 4400 Las Crestas Dr NW

City State Zip Code
Albuquerque NM 87120-5024

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y
08 / 09 / 2008

Transaction ID: C2031599

Amount of Each Receipt this Period

1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶

8500.00

TOTAL 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: PAGE 100 / 192

(check only one)

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

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NAME OF COMMITTEE (In Full)
People for Ben

A.

Full Name (Last, First, Middle Initial)
CONOCOPHILLIPS SPIRIT PAC

Mailing Address 1010 Plaza Office Building
1400 B PLAZA OFFICE BUILDING

City State Zip Code
Bartlesville OK 74004

FEC ID number of contributing federal political committee. **C** C00112896

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 30 / 2008

Transaction ID: C2124372

Amount of Each Receipt this Period

500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
CULAC THE PAC OF CREDIT UNION NATIONAL ASSOCIATION

Mailing Address 601 Pennsylvania Avenue, NW
South Building, Suite 600

City State Zip Code
Washington DC 20004

FEC ID number of contributing federal political committee. **C** C00007880

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 15 / 2008

Transaction ID: C2091785

Amount of Each Receipt this Period

5000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
CWA - COPE PCC

Mailing Address 501 3rd St NW

City State Zip Code
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00002089

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
9000.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 30 / 2008

Transaction ID: C2124157

Amount of Each Receipt this Period

5000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶

10500.00

TOTAL 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: PAGE 101 / 192
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
Democratic Women of Bernalillo County

Mailing Address 12409 Appalachian Way NE

City State Zip Code
Albuquerque NM 87111-7283

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 200.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 9 / 3 0 / 2 0 0 8

Transaction ID: C2121482

Amount of Each Receipt this Period
200.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Freeport-McMoRAN Copper & Gold Inc. Citenship Comm

Mailing Address 1615 Poydras Street
23rd Floor

City State Zip Code
New Orleans LA 70112

FEC ID number of contributing federal political committee. **C** C00320101

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 9 / 1 5 / 2 0 0 8

Transaction ID: C2091811

Amount of Each Receipt this Period
2500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Geo Group PAC, Inc.

Mailing Address 621 NW 53rd St
Ste 700

City State Zip Code
Boca Raton FL 33487-8242

FEC ID number of contributing federal political committee. **C** C00382150

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4600.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 9 / 3 0 / 2 0 0 8

Transaction ID: C2124367

Amount of Each Receipt this Period
2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **5000.00**

TOTAL 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: PAGE 102 / 192
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
Henry Kiki Saavedra State Representative
Mailing Address 2838 2nd St SW

City State Zip Code
Albuquerque NM 87102-5002

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 9 / 0 4 / 2 0 0 8

Transaction ID: C2079244

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Hoyer for Congress
Mailing Address 7905 Malcolm Rd

City State Zip Code
Clinton MD 20735-1734

FEC ID number of contributing federal political committee. **C** C00140715

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 8 / 0 9 / 2 0 0 8

Transaction ID: C2031591

Amount of Each Receipt this Period
2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
HUMAN RIGHTS CAMPAIGN PAC
Mailing Address 1640 Rhode Island Avenue NW

City State Zip Code
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00235853

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 9 / 3 0 / 2 0 0 8

Transaction ID: C2124145

Amount of Each Receipt this Period
3000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **5500.00**

TOTAL 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: PAGE 103 / 192
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
INDEPENDENT COMMUNITY BANKERS OF AMERICA POLITICAL

Mailing Address 1615 L Street NW
Suite 900

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00032698

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt: 09 / 30 / 2008
Transaction ID: C2124151
 Amount of Each Receipt this Period: 1500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
INTEL CORPORATION POLITICAL ACTION COMMITTEE

Mailing Address 1634 I Street N.W.
Suite 300

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00125641

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt: 09 / 30 / 2008
Transaction ID: C2116277
 Amount of Each Receipt this Period: 2500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Ironworkers Political Action League

Mailing Address 1750 New York Ave NW

City Washington State DC Zip Code 20006-5305

FEC ID number of contributing federal political committee. **C** C00027359

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 10000.00

Date of Receipt: 08 / 22 / 2008
Transaction ID: C2049089
 Amount of Each Receipt this Period: 5000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 9000.00

TOTAL 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: PAGE 104 / 192
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
Jim R. Trujillo State Representative Campaign Acco
Mailing Address 1901 Morris Pl

City State Zip Code
Santa Fe NM 87505-5466

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 9 / 3 0 / 2 0 0 8

Transaction ID: C2116296

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Laborers' Political League
Mailing Address 905 16th St., N.W.
Second Floor

City State Zip Code
Washington DC 20006

FEC ID number of contributing federal political committee. **C** C00007922

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 7500.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 9 / 1 5 / 2 0 0 8

Transaction ID: C2091781

Amount of Each Receipt this Period
2500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Leadership Empowerment and Development PAC
Mailing Address PO Box 12073

City State Zip Code
San Antonio TX 78212-0073

FEC ID number of contributing federal political committee. **C** C00410241

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 9 / 2 2 / 2 0 0 8

Transaction ID: C2101770

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **4000.00**

TOTAL 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: PAGE 105 / 192
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
Machinists Non Partisan Political League

Mailing Address 9000 Machinists PI

City State Zip Code
Upper Marlboro MD 20772-2675

FEC ID number of contributing federal political committee. **C** C00002469

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 8 / 0 9 / 2 0 0 8

Transaction ID: C2031588

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF REALTORS POLITICAL ACTION

Mailing Address 430 North Michigan Avenue

City State Zip Code
Chicago IL 60611

FEC ID number of contributing federal political committee. **C** C00030718

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 9 / 3 0 / 2 0 0 8

Transaction ID: C2124209

Amount of Each Receipt this Period
5000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
National Rural Letter Carriers

Mailing Address 1630 Duke St
Fl 2

City State Zip Code
Alexandria VA 22314-3467

FEC ID number of contributing federal political committee. **C** C00072025

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 8 / 0 4 / 2 0 0 8

Transaction ID: C2019268

Amount of Each Receipt this Period
2500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **8500.00**

TOTAL 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: PAGE 106 / 192
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
National Rural Letter Carriers

Mailing Address 1630 Duke St
Fl 2

City State Zip Code
Alexandria VA 22314-3467

FEC ID number of contributing federal political committee. **C** C00072025

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	3	0	/	2	0	0	8

Transaction ID: C2124230

Amount of Each Receipt this Period
2500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
NATIONAL VENTURE CAPITAL ASSOCIATION VENTUREPAC

Mailing Address 1655 N. Fort Myer Dr.
Suite 850

City State Zip Code
Arlington VA 22209

FEC ID number of contributing federal political committee. **C** C00150367

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	9	/	2	0	0	8

Transaction ID: C2045070

Amount of Each Receipt this Period
1500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 10899 Wilshire Blvd

City State Zip Code
Los Angeles CA 90024-4343

FEC ID number of contributing federal political committee. **C** C00083857

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	5	/	2	0	0	8

Transaction ID: C2111490

Amount of Each Receipt this Period
2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **6000.00**

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 107 / 192
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
Pepsico Concerned Citizens Fund

Mailing Address 101 Constitution Ave NW

City Washington State DC Zip Code 20001-2133

FEC ID number of contributing federal political committee. **C** C00039321

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 07 / 11 / 2008
Transaction ID: C1917691
 Amount of Each Receipt this Period: 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
President Pro-Tem Account

Mailing Address 1123 N Santa Rita St

City Silver City State NM Zip Code 88061-5156

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt: 09 / 15 / 2008
Transaction ID: C2091794
 Amount of Each Receipt this Period: 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Progress, Vision and Commitment PAC

Mailing Address 500 Marquette Ave NW

City Albuquerque State NM Zip Code 87102-5340

FEC ID number of contributing federal political committee. **C** C00436139

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt: 09 / 25 / 2008
Transaction ID: C2111481
 Amount of Each Receipt this Period: 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 2000.00

TOTAL 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: PAGE 108 / 192
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
Rep. John Pena Campaign Fund

Mailing Address 908 S Country Club Dr

City State Zip Code
Gallup NM 87301-5927

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	0	8	/	2	0	0	8

Transaction ID: C2143250

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
SEAFARERS POLITICAL ACTIVITY DONATION-SEAFARERS IN

Mailing Address 5201 Auth Way

City State Zip Code
Camp Springs MD 20746

FEC ID number of contributing federal political committee. **C** C00004325

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	0	3	/	2	0	0	8

Transaction ID: C2073708

Amount of Each Receipt this Period
2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
SHEET METAL WORKERS' INTERNATIONAL ASSOCIATION POL

Mailing Address 1750 New York Avenue NW

City State Zip Code
Washington DC 20006

FEC ID number of contributing federal political committee. **C** C00007542

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	5	/	2	0	0	8

Transaction ID: C2111484

Amount of Each Receipt this Period
5000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **7250.00**

TOTAL 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: PAGE 109 / 192
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
Sierra Club Political Committee

Mailing Address 85 2nd St
Fl 2

City San Francisco State CA Zip Code 94105-3456

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 20.00

Date of Receipt
M M / D D / Y Y Y Y
0 7 / 2 4 / 2 0 0 8

Transaction ID: C1994823

Amount of Each Receipt this Period
10.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

* In-Kind: Website Endorsment

B. Full Name (Last, First, Middle Initial)
Speaker Ben Lujan

Mailing Address 05 Entrada Celedon Y Nestora

City Santa Fe State NM Zip Code 87506-9740

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y
0 9 / 3 0 / 2 0 0 8

Transaction ID: C2124207

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
State Representative Gail Chasey Account

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 Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
0 9 / 0 4 / 2 0 0 8

Transaction ID: C2079160

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 1510.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 110 / 192
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
The NEA Fund

Mailing Address 1201 16th St NW Ste 420

City Washington State DC Zip Code 20036

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 10000.00

Date of Receipt 09 / 30 / 2008
Transaction ID: C2116282

Amount of Each Receipt this Period 5000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Transport Workers Union of America

Mailing Address 10 G St NE

City Washington State DC Zip Code 20002-4213

FEC ID number of contributing federal political committee. **C** C00135475

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt 09 / 30 / 2008
Transaction ID: C2124205

Amount of Each Receipt this Period 5000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
UDALL FOR US ALL

Mailing Address 3311 CANDELARIA NE SUITE A

City ALBUQUERQUE State NM Zip Code 87107

FEC ID number of contributing federal political committee. **C** C00329896

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 09 / 15 / 2008
Transaction ID: C2091787

Amount of Each Receipt this Period 2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 12000.00

TOTAL 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: PAGE 111 / 192
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
UNION PACIFIC CORP. FUND FOR EFFECTIVE GOVERNMENT

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	3		2	0	0	8

Mailing Address 600 13th St. NW
Suite 340

City Washington State DC Zip Code 20005

Transaction ID: C2073712

Amount of Each Receipt this Period
5000.00

FEC ID number of contributing federal political committee. **C** C00010470

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
United Mine Workers

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	9		2	0	0	8

Mailing Address 8315 LEE HIGHWAY FIFTH FLOOR

City FAIRFAX State VA Zip Code 22031

Transaction ID: C2031590

Amount of Each Receipt this Period
1000.00

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
UNITED TRANSPORTATION UNION POLITICAL ACTION COMMI

Date of Receipt

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

Mailing Address 14600 Detroit Ave

City Cleveland State OH Zip Code 44107-4207

Transaction ID: C2032859

Amount of Each Receipt this Period
2500.00

FEC ID number of contributing federal political committee. **C** C00001636

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **8500.00**

TOTAL 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: PAGE 112 / 192
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial)
UNITED TRANSPORTATION UNION POLITICAL ACTION COMMI

Mailing Address 14600 Detroit Ave

City Cleveland State OH Zip Code 44107-4207

FEC ID number of contributing federal political committee. **C** C00001636

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt 09 / 15 / 2008
Transaction ID: C2091791
 Amount of Each Receipt this Period 2500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
US Team PAC

Mailing Address 100 W Putnam Ave

City Greenwich State CT Zip Code 06830-5342

FEC ID number of contributing federal political committee. **C** C00104851

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 08 / 19 / 2008
Transaction ID: C2045066
 Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 3500.00

TOTAL This Period (last page this line number only) ► 138760.00

**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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
People for Ben

A.	Full Name (Last, First, Middle Initial) Afterword Cafe	Transaction ID: D134677 Date of Disbursement 07 / 30 / 2008
	Mailing Address 1517 Connecticut Ave NW	Amount of Each Disbursement this Period 61.19
	City Washington State DC Zip Code 20036-1103	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Meals Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Albertsons	Transaction ID: D134647 Date of Disbursement 08 / 20 / 2008
	Mailing Address 199 Paseo De Peralta	Amount of Each Disbursement this Period 42.00
	City Santa Fe State NM Zip Code 87501-1857	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Food for Volunteers Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Albertsons	Transaction ID: D134648 Date of Disbursement 08 / 20 / 2008
	Mailing Address 199 Paseo De Peralta	Amount of Each Disbursement this Period 25.20
	City Santa Fe State NM Zip Code 87501-1857	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Food for volunteers Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	128.39
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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
People for Ben

A.	Full Name (Last, First, Middle Initial) Albertsons	Transaction ID: D134649 Date of Disbursement 08 / 20 / 2008
	Mailing Address 199 Paseo De Peralta	Amount of Each Disbursement this Period 16.80
	City Santa Fe State NM Zip Code 87501-1857	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Food for Volunteers Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Allsups	Transaction ID: D134446 Date of Disbursement 08 / 17 / 2008
	Mailing Address 3000 Cerrillos Rd	Amount of Each Disbursement this Period 39.50
	City Santa Fe State NM Zip Code 87507-2305	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Gas Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Allsups	Transaction ID: D135593 Date of Disbursement 09 / 29 / 2008
	Mailing Address 3000 Cerrillos Rd	Amount of Each Disbursement this Period 10.42
	City Santa Fe State NM Zip Code 87507-2305	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Gas Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	66.72
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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
People for Ben

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Auburn Quad, Inc</p> <p>Mailing Address PO Box 390728</p> <p>City Cambridge State MA Zip Code 02139-0008</p> <p>Purpose of Disbursement Credit Card Service Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D123371</p> <p>Date of Disbursement 07 / 13 / 2008</p> <p>Amount of Each Disbursement this Period 187.63</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Auburn Quad, Inc</p> <p>Mailing Address PO Box 390728</p> <p>City Cambridge State MA Zip Code 02139-0008</p> <p>Purpose of Disbursement Credit Card Service Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D123372</p> <p>Date of Disbursement 07 / 06 / 2008</p> <p>Amount of Each Disbursement this Period 27.88</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Auburn Quad, Inc</p> <p>Mailing Address PO Box 390728</p> <p>City Cambridge State MA Zip Code 02139-0008</p> <p>Purpose of Disbursement Credit Service Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D124281</p> <p>Date of Disbursement 08 / 12 / 2008</p> <p>Amount of Each Disbursement this Period 18.19</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

233.70

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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
People for Ben

A.

Full Name (Last, First, Middle Initial)
Auburn Quad, Inc

Mailing Address PO Box 390728

City Cambridge State MA Zip Code 02139-0008

Purpose of Disbursement
Credit Card Service Fee

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D124282
Date of Disbursement

08 / 12 / 2008

Amount of Each Disbursement this Period

1.98

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)
Auburn Quad, Inc

Mailing Address PO Box 390728

City Cambridge State MA Zip Code 02139-0008

Purpose of Disbursement
Credit Card Service Fee

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D124284
Date of Disbursement

08 / 12 / 2008

Amount of Each Disbursement this Period

15.69

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)
Auburn Quad, Inc

Mailing Address PO Box 390728

City Cambridge State MA Zip Code 02139-0008

Purpose of Disbursement
Credit Card Service Fee

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D124852
Date of Disbursement

08 / 19 / 2008

Amount of Each Disbursement this Period

69.53

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

87.20

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
People for Ben

A.	Full Name (Last, First, Middle Initial) Auburn Quad, Inc	Transaction ID: D126588 Date of Disbursement 08 / 24 / 2008
	Mailing Address PO Box 390728	Amount of Each Disbursement this Period 29.63
	City Cambridge State MA Zip Code 02139-0008	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Credit Card Service Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Auburn Quad, Inc	Transaction ID: D127373 Date of Disbursement 09 / 03 / 2008
	Mailing Address PO Box 390728	Amount of Each Disbursement this Period 110.61
	City Cambridge State MA Zip Code 02139-0008	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Credit Card Service Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Auburn Quad, Inc	Transaction ID: D134094 Date of Disbursement 09 / 07 / 2008
	Mailing Address PO Box 390728	Amount of Each Disbursement this Period 40.53
	City Cambridge State MA Zip Code 02139-0008	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Credit Card Service Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	180.77
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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
People for Ben

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Auburn Quad, Inc</p> <p>Mailing Address PO Box 390728</p> <p>City Cambridge State MA Zip Code 02139-0008</p> <p>Purpose of Disbursement Credit Card Service Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D134099</p> <p>Date of Disbursement 09 / 22 / 2008</p> <p>Amount of Each Disbursement this Period 4.36</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Auburn Quad, Inc</p> <p>Mailing Address PO Box 390728</p> <p>City Cambridge State MA Zip Code 02139-0008</p> <p>Purpose of Disbursement Credit Card Service Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D123324</p> <p>Date of Disbursement 07 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 23.92</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Auburn Quad, Inc</p> <p>Mailing Address PO Box 390728</p> <p>City Cambridge State MA Zip Code 02139-0008</p> <p>Purpose of Disbursement Credit Card Service Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D135044</p> <p>Date of Disbursement 09 / 18 / 2008</p> <p>Amount of Each Disbursement this Period 88.92</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional)	117.20
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
People for Ben

A.

Full Name (Last, First, Middle Initial)
Auburn Quad, Inc

Mailing Address PO Box 390728

City Cambridge State MA Zip Code 02139-0008

Purpose of Disbursement
Credit Card Service Fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D135045
Date of Disbursement

09 / 30 / 2008

Amount of Each Disbursement this Period

54.23

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)
Auburn Quad, Inc

Mailing Address PO Box 390728

City Cambridge State MA Zip Code 02139-0008

Purpose of Disbursement
Credit Card Service Fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D135046
Date of Disbursement

09 / 30 / 2008

Amount of Each Disbursement this Period

275.52

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)
Terri Nikole Nikole Baca

Mailing Address 5125 Northern Trl NW

City Albuquerque State NM Zip Code 87120-2025

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D135306
Date of Disbursement

09 / 15 / 2008

Amount of Each Disbursement this Period

2000.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

2329.75

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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
People for Ben

A.	Full Name (Last, First, Middle Initial) Terri Nikole Nikole Baca <hr/> Mailing Address 5125 Northern Trl NW <hr/> City Albuquerque State NM Zip Code 87120-2025 <hr/> Purpose of Disbursement Reimbursed expense - Farmington Parade Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D134698 Date of Disbursement 08 / 15 / 2008 <hr/> Amount of Each Disbursement this Period 77.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Bean Day <hr/> Mailing Address 600 Catron Ave <hr/> City Wagon Mound State NM Zip Code 87522 <hr/> Purpose of Disbursement Campaign Event Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D137446 Date of Disbursement 08 / 21 / 2008 <hr/> Amount of Each Disbursement this Period 50.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Best Buy <hr/> Mailing Address 3533 Zafarano Dr <hr/> City Santa Fe State NM Zip Code 87507-2618 <hr/> Purpose of Disbursement Office Equipment Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D134645 Date of Disbursement 07 / 02 / 2008 <hr/> Amount of Each Disbursement this Period 161.90 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

288.90

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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
People for Ben

A.	Full Name (Last, First, Middle Initial) Best Buy	Transaction ID: D134646 Date of Disbursement 07 / 15 / 2008
	Mailing Address 3533 Zafarano Dr	Amount of Each Disbursement this Period 94.49
	City Santa Fe State NM Zip Code 87507-2618	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Office Equipment Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Bien Mur Travel Center	Transaction ID: D135297 Date of Disbursement 07 / 21 / 2008
	Mailing Address 100 Bien Mur Dr NE	Amount of Each Disbursement this Period 47.20
	City Albuquerque State NM Zip Code 87113-2154	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Gas Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Ramona Blaber	Transaction ID: D134360 Date of Disbursement 07 / 03 / 2008
	Mailing Address 31 Camino Costadino	Amount of Each Disbursement this Period 700.00
	City Santa Fe State NM Zip Code 87508-9141	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Salary Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	841.69
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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
People for Ben

A.	Full Name (Last, First, Middle Initial) Ramona Blaber <hr/> Mailing Address 31 Camino Costadino <hr/> City Santa Fe State NM Zip Code 87508-9141 <hr/> Purpose of Disbursement Stationary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D134361 Date of Disbursement 08 / 07 / 2008 <hr/> Amount of Each Disbursement this Period 130.45 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Campaign Spark <hr/> Mailing Address 605 W Main St <hr/> City Carrboro State NC Zip Code 27510-1666 <hr/> Purpose of Disbursement Website Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D134701 Date of Disbursement 08 / 18 / 2008 <hr/> Amount of Each Disbursement this Period 4414.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) San Felipe Travel Center <hr/> Mailing Address 25 Hagon Rd <hr/> City Algodones State NM Zip Code 87001-8021 <hr/> Purpose of Disbursement Gas Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D134447 Date of Disbursement 08 / 17 / 2008 <hr/> Amount of Each Disbursement this Period 47.01 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

4591.46

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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
People for Ben

A.	Full Name (Last, First, Middle Initial) Century Bank	Transaction ID: D134448 Date of Disbursement 07 / 14 / 2008
	Mailing Address PO Box 1507	Amount of Each Disbursement this Period 5.00
	City Santa Fe State NM Zip Code 87504-1507	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Bank Charges Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Century Bank	Transaction ID: D134449 Date of Disbursement 08 / 19 / 2008
	Mailing Address PO Box 1507	Amount of Each Disbursement this Period 5.00
	City Santa Fe State NM Zip Code 87504-1507	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Bank Charges Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Century Bank	Transaction ID: D134450 Date of Disbursement 08 / 20 / 2008
	Mailing Address PO Box 1507	Amount of Each Disbursement this Period 5.00
	City Santa Fe State NM Zip Code 87504-1507	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Bank Charges Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	15.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
People for Ben

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Century Bank</p> <p>Mailing Address PO Box 1507</p> <p>City Santa Fe State NM Zip Code 87504-1507</p> <p>Purpose of Disbursement Bank Charges</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D134451</p> <p>Date of Disbursement 08 / 20 / 2008</p> <p>Amount of Each Disbursement this Period 5.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Century Bank</p> <p>Mailing Address PO Box 1507</p> <p>City Santa Fe State NM Zip Code 87504-1507</p> <p>Purpose of Disbursement Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D134351</p> <p>Date of Disbursement 07 / 15 / 2008</p> <p>Amount of Each Disbursement this Period 3978.50</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Century Bank</p> <p>Mailing Address PO Box 1507</p> <p>City Santa Fe State NM Zip Code 87504-1507</p> <p>Purpose of Disbursement Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D134699</p> <p>Date of Disbursement 07 / 15 / 2008</p> <p>Amount of Each Disbursement this Period 1224.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

5207.50

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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
People for Ben

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Century Bank</p> <p>Mailing Address PO Box 1507</p> <p>City Santa Fe State NM Zip Code 87504-1507</p> <p>Purpose of Disbursement Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D134700</p> <p>Date of Disbursement 08 / 15 / 2008</p> <p>Amount of Each Disbursement this Period 2445.45</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Century Bank</p> <p>Mailing Address PO Box 1507</p> <p>City Santa Fe State NM Zip Code 87504-1507</p> <p>Purpose of Disbursement Bank Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D134660</p> <p>Date of Disbursement 08 / 18 / 2008</p> <p>Amount of Each Disbursement this Period 8.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Century Bank</p> <p>Mailing Address PO Box 1507</p> <p>City Santa Fe State NM Zip Code 87504-1507</p> <p>Purpose of Disbursement Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D137437</p> <p>Date of Disbursement 07 / 22 / 2008</p> <p>Amount of Each Disbursement this Period 2901.60</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

5355.05

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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
People for Ben

<p>A. Full Name (Last, First, Middle Initial) Century Bank</p> <p>Mailing Address PO Box 1507</p> <p>City Santa Fe State NM Zip Code 87504-1507</p> <p>Purpose of Disbursement Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D135573 Date of Disbursement 09 / 15 / 2008</p> <p>Amount of Each Disbursement this Period 4120.73</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Derek Chacon</p> <p>Mailing Address PO Box 1595</p> <p>City Las Cruces State NM Zip Code 88004</p> <p>Purpose of Disbursement Labor</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D134693 Date of Disbursement 07 / 02 / 2008</p> <p>Amount of Each Disbursement this Period 500.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Eric Chavez</p> <p>Mailing Address 1516 Paseo De Peralta</p> <p>City Santa Fe State NM Zip Code 87501-3722</p> <p>Purpose of Disbursement Labor</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D134702 Date of Disbursement 07 / 02 / 2008</p> <p>Amount of Each Disbursement this Period 500.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

5120.73

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)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
People for Ben

A.	Full Name (Last, First, Middle Initial) Eric Chavez Mailing Address 1516 Paseo De Peralta City Santa Fe State NM Zip Code 87501-3722 Purpose of Disbursement Labor Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D134703 Date of Disbursement 07 / 15 / 2008 Amount of Each Disbursement this Period 800.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Eric Chavez Mailing Address 1516 Paseo De Peralta City Santa Fe State NM Zip Code 87501-3722 Purpose of Disbursement Labor Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D134704 Date of Disbursement 08 / 31 / 2008 Amount of Each Disbursement this Period 654.90 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Eric Chavez Mailing Address 1516 Paseo De Peralta City Santa Fe State NM Zip Code 87501-3722 Purpose of Disbursement Labor Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D134705 Date of Disbursement 08 / 01 / 2008 Amount of Each Disbursement this Period 654.90 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)	2109.80
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
People for Ben

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Eric Chavez</p> <p>Mailing Address 1516 Paseo De Peralta</p> <p>City Santa Fe State NM Zip Code 87501-3722</p> <p>Purpose of Disbursement Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D135304</p> <p>Date of Disbursement 09 / 14 / 2008</p> <p>Amount of Each Disbursement this Period 654.90</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Chevron</p> <p>Mailing Address 1700 Saint Michaels Dr</p> <p>City Santa Fe State NM Zip Code 87505-7617</p> <p>Purpose of Disbursement Misc Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D135332</p> <p>Date of Disbursement 09 / 08 / 2008</p> <p>Amount of Each Disbursement this Period 3.72</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Chevron</p> <p>Mailing Address 1700 Saint Michaels Dr</p> <p>City Santa Fe State NM Zip Code 87505-7617</p> <p>Purpose of Disbursement Gas</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D135333</p> <p>Date of Disbursement 09 / 12 / 2008</p> <p>Amount of Each Disbursement this Period 37.50</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

696.12

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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
People for Ben

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Chevron</p> <p>Mailing Address 1700 Saint Michaels Dr</p> <p>City Santa Fe State NM Zip Code 87505-7617</p> <p>Purpose of Disbursement Gas</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D135334</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="1"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="55.00"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Chevron</p> <p>Mailing Address 1700 Saint Michaels Dr</p> <p>City Santa Fe State NM Zip Code 87505-7617</p> <p>Purpose of Disbursement Gas</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D135335</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="28.39"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Chevron</p> <p>Mailing Address 1700 Saint Michaels Dr</p> <p>City Santa Fe State NM Zip Code 87505-7617</p> <p>Purpose of Disbursement Gas</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D134443</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="47.81"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="131.20"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

**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 131 / 192

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
People for Ben

A.	Full Name (Last, First, Middle Initial) City of Santa Fe	Transaction ID: D135307 Date of Disbursement 08 / 17 / 2008
	Mailing Address 2515 Camino Entrada	Amount of Each Disbursement this Period 20.00
	City Santa Fe State NM Zip Code 87507-4808	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Event Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Comcast Cable	Transaction ID: D134668 Date of Disbursement 08 / 07 / 2008
	Mailing Address 2534 Camino Entrada	Amount of Each Disbursement this Period 240.90
	City Santa Fe State NM Zip Code 87507	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Internet and Cable Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Constant Contact	Transaction ID: D135300 Date of Disbursement 09 / 02 / 2008
	Mailing Address 1601 Trapelo Rd Ste 329	Amount of Each Disbursement this Period 55.00
	City Waltham State MA Zip Code 02451-7357	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Voter Outreach Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	315.90
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)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
People for Ben

A.	Full Name (Last, First, Middle Initial) Constant Contact	Transaction ID: D134458 Date of Disbursement 07 / 30 / 2008
	Mailing Address 1601 Trapelo Rd Ste 329	Amount of Each Disbursement this Period 55.00
	City Waltham State MA Zip Code 02451-7357	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Voter Outreach Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Corwin Research	Transaction ID: D134352 Date of Disbursement 07 / 02 / 2008
	Mailing Address 11024 Montgomery Blvd. NE #128	Amount of Each Disbursement this Period 2810.17
	City Albuquerque State NM Zip Code 87111	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Research Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Cottonwood 66	Transaction ID: D137462 Date of Disbursement 09 / 15 / 2008
	Mailing Address 3622 State Highway 528 NW	Amount of Each Disbursement this Period 46.53
	City Albuquerque State NM Zip Code 87114-8900	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Gas Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	2911.70
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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
People for Ben

<p>A. Full Name (Last, First, Middle Initial) Cricket</p> <p>Mailing Address 4250 Cerrillos Road,</p> <p>City Santa Fe State NM Zip Code 87505</p> <p>Purpose of Disbursement Cell Phone</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D134462 Date of Disbursement 09 / 10 / 2008</p> <p>Amount of Each Disbursement this Period 113.52</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Democratic Party of New Mexico</p> <p>Mailing Address 1301 San Pedro Dr NE</p> <p>City Albuquerque State NM Zip Code 87110-6727</p> <p>Purpose of Disbursement Event</p> <p>Candidate Name Democratic Party of New Mexico</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D134452 Date of Disbursement 08 / 18 / 2008</p> <p>Amount of Each Disbursement this Period 375.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Dominos Pizza</p> <p>Mailing Address 559 W Cordova Rd</p> <p>City Santa Fe State NM Zip Code 87505-1851</p> <p>Purpose of Disbursement Meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D135600 Date of Disbursement 08 / 18 / 2008</p> <p>Amount of Each Disbursement this Period 24.81</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

513.33

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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
People for Ben

A.

Full Name (Last, First, Middle Initial)
El Rancho Hotel

Mailing Address 1000 E Historic Highway 66

City State Zip Code
Gallup NM 87301-5559

Purpose of Disbursement
Lodging

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D137458
Date of Disbursement

09 / 08 / 2008

Amount of Each Disbursement this Period

194.26

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)
Elections in Motion

Mailing Address 1019 Don Diego Ave

City State Zip Code
Santa Fe NM 87505-1626

Purpose of Disbursement
Fundraising Consulting

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D135325
Date of Disbursement

09 / 01 / 2008

Amount of Each Disbursement this Period

6573.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)
Elections in Motion

Mailing Address 1019 Don Diego Ave

City State Zip Code
Santa Fe NM 87505-1626

Purpose of Disbursement
Fundraising Consulting

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D134453
Date of Disbursement

08 / 01 / 2008

Amount of Each Disbursement this Period

6405.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

13172.26

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)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
People for Ben

A.	Full Name (Last, First, Middle Initial) Enterprise Rent A Car Mailing Address 23330 Autopilot Dr City Sterling State VA Zip Code 20166-7705 Purpose of Disbursement Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D134687 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 1 / 2 0 0 8 Amount of Each Disbursement this Period 169.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Expedia.Com Mailing Address 3150 139th Ave SE City Bellevue State WA Zip Code 98005 Purpose of Disbursement Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D135590 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 8 Amount of Each Disbursement this Period 135.71 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Fairfield Inn and Suites Mailing Address 4305 N Prince St City Clovis State NM Zip Code 88101-9711 Purpose of Disbursement Lodging Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D135299 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 7 / 2 0 0 8 Amount of Each Disbursement this Period 111.31 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

416.02

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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial) Federal Express Mailing Address 460 Saint Michaels Dr City Santa Fe State NM Zip Code 87505-7619 Purpose of Disbursement Postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D134654 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 2 / 2 0 0 8
	Amount of Each Disbursement this Period 79.24 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial) Federal Express Mailing Address 460 Saint Michaels Dr City Santa Fe State NM Zip Code 87505-7619 Purpose of Disbursement Postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D134655 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 2 / 2 0 0 8
	Amount of Each Disbursement this Period 41.02 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial) Fiestas de Taos Mailing Address 400 Camino De La Placita City Taos State NM Zip Code 87571-6071 Purpose of Disbursement Event Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D135298 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 5 / 2 0 0 8
	Amount of Each Disbursement this Period 50.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	170.26
TOTAL This Period (last page this line number only) ▶	(Empty box)

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 137 / 192

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
People for Ben

A.

Full Name (Last, First, Middle Initial)
First Impressions Inc.

Mailing Address 3401 Girard Blvd NE

City Albuquerque State NM Zip Code 87107-1928

Purpose of Disbursement
Printing

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D134353
Date of Disbursement

08 / 07 / 2008

Amount of Each Disbursement this Period

2108.65

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)
Chris Garcia

Mailing Address 6230 Saint Josephs Ct NW

City Albuquerque State NM Zip Code 87120-3708

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D134713
Date of Disbursement

08 / 15 / 2008

Amount of Each Disbursement this Period

1480.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)
Chris Garcia

Mailing Address 6230 Saint Josephs Ct NW

City Albuquerque State NM Zip Code 87120-3708

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D134714
Date of Disbursement

08 / 18 / 2008

Amount of Each Disbursement this Period

230.88

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

3819.53

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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
People for Ben

A.	Full Name (Last, First, Middle Initial) Chris Garcia	Transaction ID: D134715 Date of Disbursement 09 / 01 / 2008
	Mailing Address 6230 Saint Josephs Ct NW	Amount of Each Disbursement this Period 1594.61
	City Albuquerque State NM Zip Code 87120-3708	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Salary Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Chris Garcia	Transaction ID: D135305 Date of Disbursement 09 / 14 / 2008
	Mailing Address 6230 Saint Josephs Ct NW	Amount of Each Disbursement this Period 1594.61
	City Albuquerque State NM Zip Code 87120-3708	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Salary Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Mr. LeRoy H. Garcia	Transaction ID: D135020 Date of Disbursement 09 / 30 / 2008
	Mailing Address PO Box 95	Amount of Each Disbursement this Period 100.00
	City Montezuma State NM Zip Code 87731-0095	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Food for Event Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	3289.22
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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
People for Ben

A.	Full Name (Last, First, Middle Initial) Giant	Transaction ID: D134444 Date of Disbursement 08 / 12 / 2008
	Mailing Address 3730 Cerrillos Rd	Amount of Each Disbursement this Period 42.23
	City Santa Fe State NM Zip Code 87507-2911	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Gas Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Giant	Transaction ID: D134445 Date of Disbursement 08 / 15 / 2008
	Mailing Address 3730 Cerrillos Rd	Amount of Each Disbursement this Period 28.48
	City Santa Fe State NM Zip Code 87507-2911	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement gas Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Giant	Transaction ID: D135327 Date of Disbursement 09 / 02 / 2008
	Mailing Address 3730 Cerrillos Rd	Amount of Each Disbursement this Period 30.01
	City Santa Fe State NM Zip Code 87507-2911	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Gas Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	100.72
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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
People for Ben

A.

Full Name (Last, First, Middle Initial)
Giant

Mailing Address 3730 Cerrillos Rd

City State Zip Code
Santa Fe NM 87507-2911

Purpose of Disbursement
Gas

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D135328
Date of Disbursement

09 / 08 / 2008

Amount of Each Disbursement this Period

26.87

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)
Mr. Gary J Giron, Rd

Mailing Address 5436 Tecamec Rd NE

City State Zip Code
Rio Rancho NM 87144-3297

Purpose of Disbursement
Catering for Event

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D135021
Date of Disbursement

09 / 30 / 2008

Amount of Each Disbursement this Period

100.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

* in-kind received

C.

Full Name (Last, First, Middle Initial)
Google Adwords

Mailing Address 1600 Amphitheatre Pkwy

City State Zip Code
Mountain View CA 94043-1351

Purpose of Disbursement
Advertising

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D134454
Date of Disbursement

07 / 17 / 2008

Amount of Each Disbursement this Period

300.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

426.87

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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
People for Ben

<p>A. Full Name (Last, First, Middle Initial) Google Adwords</p> <p>Mailing Address 1600 Amphitheatre Pkwy</p> <p>City Mountain View State CA Zip Code 94043-1351</p> <p>Purpose of Disbursement Internet Advertising</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D135329</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="300.00"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Google Adwords</p> <p>Mailing Address 1600 Amphitheatre Pkwy</p> <p>City Mountain View State CA Zip Code 94043-1351</p> <p>Purpose of Disbursement Internet Advertising</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D135330</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="300.00"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Google Adwords</p> <p>Mailing Address 1600 Amphitheatre Pkwy</p> <p>City Mountain View State CA Zip Code 94043-1351</p> <p>Purpose of Disbursement Internet Advertising</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D135310</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="300.00"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="900.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
People for Ben

A.	Full Name (Last, First, Middle Initial) Hampton Inn and Suites	Transaction ID: D137456 Date of Disbursement 09 / 02 / 2008
	Mailing Address 19010 E Cottonwood Dr	Amount of Each Disbursement this Period 1216.78
	City Parker State CO Zip Code 80138-8808	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Lodging Democratic Convention Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Hampton Inn and Suites	Transaction ID: D137457 Date of Disbursement 09 / 02 / 2008
	Mailing Address 19010 E Cottonwood Dr	Amount of Each Disbursement this Period 133.28
	City Parker State CO Zip Code 80138-8808	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Lodging Democratic Convention Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Hotel Santa Fe	Transaction ID: D135588 Date of Disbursement 09 / 16 / 2008
	Mailing Address 1501 Paseo De Peralta	Amount of Each Disbursement this Period 647.84
	City Santa Fe State NM Zip Code 87501-3721	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Event Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	1997.90
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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
People for Ben

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Iron Works BBQ</p> <p>Mailing Address 100 Red River Street</p> <p>City Austin State TX Zip Code 78701</p> <p>Purpose of Disbursement Meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D134674</p> <p>Date of Disbursement 07 / 21 / 2008</p> <p>Amount of Each Disbursement this Period 216.97</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Siri Trang Khalsa</p> <p>Mailing Address 39 A Lee St. Apt #22</p> <p>City Cambridge State MA Zip Code 02139</p> <p>Purpose of Disbursement Labor</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D134707</p> <p>Date of Disbursement 07 / 21 / 2008</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Siri Trang Khalsa</p> <p>Mailing Address 39 A Lee St. Apt #22</p> <p>City Cambridge State MA Zip Code 02139</p> <p>Purpose of Disbursement Labor</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D134708</p> <p>Date of Disbursement 08 / 22 / 2008</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

5216.97

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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
People for Ben

A.	Full Name (Last, First, Middle Initial) Kicks 66 Travel Center Mailing Address 57 Ogo Wi City Santa Fe State NM Zip Code 87506 Purpose of Disbursement Gas Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D135604 Date of Disbursement 09 / 18 / 2008 Amount of Each Disbursement this Period 48.84 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Hunter Lewis Mailing Address 5909 Papaya PI NE City Albuquerque State NM Zip Code 87111-6275 Purpose of Disbursement Labor Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D134694 Date of Disbursement 07 / 02 / 2008 Amount of Each Disbursement this Period 500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Carmen Lieberman Mailing Address 1516 Paseo De Peralta City Santa Fe State NM Zip Code 87501-3722 Purpose of Disbursement Labor Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D134706 Date of Disbursement 07 / 02 / 2008 Amount of Each Disbursement this Period 500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

1048.84

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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
People for Ben

A.	Full Name (Last, First, Middle Initial) Jason Loera	Transaction ID: D134354 Date of Disbursement 07 / 15 / 2008
	Mailing Address 640 Bradshawe Ave	Amount of Each Disbursement this Period 1500.00
	City Los Angeles State CA Zip Code 90022-3403	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Contract Services Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B.	Full Name (Last, First, Middle Initial) Jason Loera	Transaction ID: D134637 Date of Disbursement 09 / 01 / 2008
	Mailing Address 640 Bradshawe Ave	Amount of Each Disbursement this Period 1500.00
	City Los Angeles State CA Zip Code 90022-3403	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Salary Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C.	Full Name (Last, First, Middle Initial) Jason Loera	Transaction ID: D134638 Date of Disbursement 08 / 15 / 2008
	Mailing Address 640 Bradshawe Ave	Amount of Each Disbursement this Period 1500.00
	City Los Angeles State CA Zip Code 90022-3403	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Salary Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶

4500.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
People for Ben

A.	Full Name (Last, First, Middle Initial) Jason Loera Mailing Address 640 Bradshawe Ave City Los Angeles State CA Zip Code 90022-3403 Purpose of Disbursement Labor Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D13572 Date of Disbursement 09 / 15 / 2008 Amount of Each Disbursement this Period 1500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Leondro Lovato Mailing Address 1516 Paseo De Peralta City Santa Fe State NM Zip Code 87501-3722 Purpose of Disbursement Labor Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D134709 Date of Disbursement 07 / 21 / 2008 Amount of Each Disbursement this Period 500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Bernie Lujan Mailing Address 6453 Main Street City Cuba State NM Zip Code 87013 Purpose of Disbursement Catering for Event Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D135042 Date of Disbursement 09 / 30 / 2008 Amount of Each Disbursement this Period 254.89 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 * in-kind received

SUBTOTAL of Disbursements This Page (optional) ▶	2254.89
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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
People for Ben

A.

Full Name (Last, First, Middle Initial)
Eric Lujan

Mailing Address 1929 Arroyo De Las Cruces Rd

City Santa Fe State NM Zip Code 87505-0984

Purpose of Disbursement
Event Expenses
Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: D137565
Date of Disbursement

09 / 28 / 2008

Amount of Each Disbursement this Period

225.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

* in-kind received

B.

Full Name (Last, First, Middle Initial)
Mr. Daniel Maki

Mailing Address 900 N Stuart St

City Arlington State VA Zip Code 22203-4101

Purpose of Disbursement
Labor
Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: D135585
Date of Disbursement

09 / 15 / 2008

Amount of Each Disbursement this Period

1000.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)
Mr. Daniel Maki

Mailing Address 900 N Stuart St

City Arlington State VA Zip Code 22203-4101

Purpose of Disbursement
Labor
Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: D134688
Date of Disbursement

07 / 21 / 2008

Amount of Each Disbursement this Period

1000.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

2225.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
People for Ben

A.	Full Name (Last, First, Middle Initial) Mr. Daniel Maki	Transaction ID: D134689 Date of Disbursement 08 / 12 / 2008
	Mailing Address 900 N Stuart St	Amount of Each Disbursement this Period 1000.00
	City Arlington State VA Zip Code 22203-4101	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Labor Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Mr. Daniel Maki	Transaction ID: D134690 Date of Disbursement 08 / 15 / 2008
	Mailing Address 900 N Stuart St	Amount of Each Disbursement this Period 1000.00
	City Arlington State VA Zip Code 22203-4101	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Labor Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Mr. Daniel Maki	Transaction ID: D134691 Date of Disbursement 09 / 01 / 2008
	Mailing Address 900 N Stuart St	Amount of Each Disbursement this Period 1000.00
	City Arlington State VA Zip Code 22203-4101	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Labor Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	3000.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
People for Ben

A.	Full Name (Last, First, Middle Initial) Patty Maki <hr/> Mailing Address 118 W San Mateo Rd <hr/> City Santa Fe State NM Zip Code 87505-4732 <hr/> Purpose of Disbursement Returns and Refunds Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D13574 Date of Disbursement 09 / 18 / 2008 <hr/> Amount of Each Disbursement this Period 100.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Greg McBride <hr/> Mailing Address 307 Pino Rd <hr/> City Santa Fe State NM Zip Code 87505-0312 <hr/> Purpose of Disbursement Food for Event Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D137564 Date of Disbursement 09 / 28 / 2008 <hr/> Amount of Each Disbursement this Period 2000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 * in-kind received
C.	Full Name (Last, First, Middle Initial) Cordy Medina <hr/> Mailing Address PO Box 491 <hr/> City Tesuque State NM Zip Code 87574-0491 <hr/> Purpose of Disbursement Event Expenses Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D137568 Date of Disbursement 09 / 28 / 2008 <hr/> Amount of Each Disbursement this Period 400.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 * in-kind received

SUBTOTAL of Disbursements This Page (optional) ▶

2500.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 150 / 192

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
People for Ben

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Monahan Marketing</p> <p>Mailing Address 1331 Park Ave SW</p> <p>City Albuquerque State NM Zip Code 87102-2847</p> <p>Purpose of Disbursement Advertising</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D134455</p> <p>Date of Disbursement 09 / 04 / 2008</p> <p>Amount of Each Disbursement this Period 1040.81</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Paul Montoya</p> <p>Mailing Address 21 Paseo De Aguila</p> <p>City Santa Fe State NM Zip Code 87506-7905</p> <p>Purpose of Disbursement Event Expenses</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D137567</p> <p>Date of Disbursement 09 / 28 / 2008</p> <p>Amount of Each Disbursement this Period 225.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>* in-kind received</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Justin Mount</p> <p>Mailing Address 3289 Agua Fria St</p> <p>City Santa Fe State NM Zip Code 87507-8474</p> <p>Purpose of Disbursement Contract Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D134356</p> <p>Date of Disbursement 07 / 20 / 2008</p> <p>Amount of Each Disbursement this Period 800.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2065.81

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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
People for Ben

A.

Full Name (Last, First, Middle Initial)
Justin Mount

Mailing Address 3289 Agua Fria St

City Santa Fe State NM Zip Code 87507-8474

Purpose of Disbursement
Contract Services

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D134639
Date of Disbursement

09 / 01 / 2008

Amount of Each Disbursement this Period

800.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)
My Campaign Store

Mailing Address PO Box 596

City Jeffersonville State IN Zip Code 47131-0596

Purpose of Disbursement
Campaign Signs

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D135569
Date of Disbursement

09 / 11 / 2008

Amount of Each Disbursement this Period

5423.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)
Nambe Falls Travel Center

Mailing Address Highway 84/285

City Cuyamunga State NM Zip Code 87501

Purpose of Disbursement
Gas

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D134663
Date of Disbursement

08 / 11 / 2008

Amount of Each Disbursement this Period

34.50

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

6257.50

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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
People for Ben

A.	Full Name (Last, First, Middle Initial) Nambe Falls Travel Center	Transaction ID: D134664 Date of Disbursement 08 / 01 / 2008
	Mailing Address Highway 84/285	Amount of Each Disbursement this Period 40.00
	City Cuyamunga State NM Zip Code 87501	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Gas	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) National Democratic Club	Transaction ID: D134676 Date of Disbursement 07 / 25 / 2008
	Mailing Address 30 Ivy St SE	Amount of Each Disbursement this Period 687.03
	City Washington State DC Zip Code 20003-4006	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Meals	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Net Roots Nation	Transaction ID: D134666 Date of Disbursement 07 / 09 / 2008
	Mailing Address 5758 Geary Blvd	Amount of Each Disbursement this Period 450.00
	City San Francisco State CA Zip Code 94121-2112	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Labor Convention	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	1177.03
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)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
People for Ben

A.	Full Name (Last, First, Middle Initial) New Mexico Department of Workforce Solutions	Transaction ID: D134363
	Mailing Address 401 Broadway Blvd NE	Date of Disbursement 07 / 27 / 2008
	City Albuquerque State NM Zip Code 87102-2330	Amount of Each Disbursement this Period 1130.00
	Purpose of Disbursement SUTA Tax	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Category/Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) New Mexico Department of Workforce Solutions	Transaction ID: D134364
	Mailing Address 401 Broadway Blvd NE	Date of Disbursement 07 / 27 / 2008
	City Albuquerque State NM Zip Code 87102-2330	Amount of Each Disbursement this Period 1130.00
	Purpose of Disbursement Workman's Comp Fee	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Category/Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) New Mexico Taxation and Revenue Department	Transaction ID: D134362
	Mailing Address 1100 S Saint Francis Dr	Date of Disbursement 07 / 27 / 2008
	City Santa Fe State NM Zip Code 87505-4147	Amount of Each Disbursement this Period 34.40
	Purpose of Disbursement Workman's Comp	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Category/Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	2294.40
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial) NGP Software <hr/> Mailing Address 1225 I St NW Ste 1225 <hr/> City Washington State DC Zip Code 20005-5918 <hr/> Purpose of Disbursement Fundraising Software Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D137459 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 8 / 2 0 0 8
	Amount of Each Disbursement this Period 3600.00
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Category/ Type
	Category/ Type

B. Full Name (Last, First, Middle Initial) Mark Nicastré <hr/> Mailing Address 2794 Via Caballero Del Sur <hr/> City Santa Fe State NM Zip Code 87505-5359 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D134650 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 1 / 2 0 0 8
	Amount of Each Disbursement this Period 1552.12
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Category/ Type
	Category/ Type

C. Full Name (Last, First, Middle Initial) Mark Nicastré <hr/> Mailing Address 2794 Via Caballero Del Sur <hr/> City Santa Fe State NM Zip Code 87505-5359 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D134651 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 5 / 2 0 0 8
	Amount of Each Disbursement this Period 1480.00
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	6632.12
TOTAL This Period (last page this line number only) ▶	(Empty box)

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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
People for Ben

A.	Full Name (Last, First, Middle Initial) Mark Nicastre <hr/> Mailing Address 2794 Via Caballero Del Sur <hr/> City Santa Fe State NM Zip Code 87505-5359 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D134652 Date of Disbursement 08 / 31 / 2008 <hr/> Amount of Each Disbursement this Period 1480.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Mark Nicastre <hr/> Mailing Address 2794 Via Caballero Del Sur <hr/> City Santa Fe State NM Zip Code 87505-5359 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D134358 Date of Disbursement 07 / 14 / 2008 <hr/> Amount of Each Disbursement this Period 1326.13 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Mark Nicastre <hr/> Mailing Address 2794 Via Caballero Del Sur <hr/> City Santa Fe State NM Zip Code 87505-5359 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D134359 Date of Disbursement 07 / 15 / 2008 <hr/> Amount of Each Disbursement this Period 1552.12 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

4358.25

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 156 / 192

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
People for Ben

A.	Full Name (Last, First, Middle Initial) Mark Nicastre	Transaction ID: D135295 Date of Disbursement 09 / 14 / 2008
	Mailing Address 2794 Via Caballero Del Sur	Amount of Each Disbursement this Period 1480.00
	City Santa Fe State NM Zip Code 87505-5359	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Salary Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Octopus Car Wash	Transaction ID: D135603 Date of Disbursement 09 / 11 / 2008
	Mailing Address 5308 Central Ave SE	Amount of Each Disbursement this Period 18.14
	City Albuquerque State NM Zip Code 87108-1512	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Automobile Expense Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Office Depot	Transaction ID: D135589 Date of Disbursement 09 / 22 / 2008
	Mailing Address COLLEGE PLAZA SHOPPING CENTER	Amount of Each Disbursement this Period 508.31
	City Santa Fe State NM Zip Code 87505	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Office Supplies Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	2006.45
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)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
People for Ben

A.	Full Name (Last, First, Middle Initial) Office Depot	Transaction ID: D135319
	Mailing Address COLLEGE PLAZA SHOPPING CENTER	Date of Disbursement 08 / 22 / 2008
	City Santa Fe State NM Zip Code 87505	Amount of Each Disbursement this Period 29.13
	Purpose of Disbursement Office Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.	Full Name (Last, First, Middle Initial) Office Depot	Transaction ID: D134657
	Mailing Address COLLEGE PLAZA SHOPPING CENTER	Date of Disbursement 08 / 06 / 2008
	City Santa Fe State NM Zip Code 87505	Amount of Each Disbursement this Period 113.33
	Purpose of Disbursement Office Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.	Full Name (Last, First, Middle Initial) Office Depot	Transaction ID: D134658
	Mailing Address COLLEGE PLAZA SHOPPING CENTER	Date of Disbursement 08 / 15 / 2008
	City Santa Fe State NM Zip Code 87505	Amount of Each Disbursement this Period 497.82
	Purpose of Disbursement Office Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)	640.28
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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
People for Ben

<p>A. Full Name (Last, First, Middle Initial) Office Depot</p> <p>Mailing Address COLLEGE PLAZA SHOPPING CENTER</p> <p>City Santa Fe State NM Zip Code 87505</p> <p>Purpose of Disbursement Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D134659</p> <p>Date of Disbursement 08 / 20 / 2008</p> <p>Amount of Each Disbursement this Period 104.68</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Office Max</p> <p>Mailing Address 3003 S Saint Francis Dr</p> <p>City Santa Fe State NM Zip Code 87505-6970</p> <p>Purpose of Disbursement Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D135601</p> <p>Date of Disbursement 08 / 22 / 2008</p> <p>Amount of Each Disbursement this Period 58.27</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Office Max</p> <p>Mailing Address 3003 S Saint Francis Dr</p> <p>City Santa Fe State NM Zip Code 87505-6970</p> <p>Purpose of Disbursement Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D135602</p> <p>Date of Disbursement 09 / 11 / 2008</p> <p>Amount of Each Disbursement this Period 307.50</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

470.45

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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
People for Ben

<p>A. Full Name (Last, First, Middle Initial) Andrew J. Perkins</p> <p>Mailing Address 117 Mateo Cir N</p> <p>City Santa Fe State NM Zip Code 87505-4029</p> <p>Purpose of Disbursement Accounting Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D134469</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="450.00"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Positive Contacts Consulting</p> <p>Mailing Address 400 Gold Ave SW</p> <p>City Albuquerque State NM Zip Code 87102</p> <p>Purpose of Disbursement Voter Outreach</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D134457</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="10865.46"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Print Runner, Inc</p> <p>Mailing Address 9673 Topanga Canyon Pl</p> <p>City Chatsworth State CA Zip Code 91311-4118</p> <p>Purpose of Disbursement Printing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D134673</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1611.47"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>12926.93</p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
People for Ben

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Qwest</p> <p>Mailing Address 1801 California St FI 51</p> <p>City Denver State CO Zip Code 80202-2605</p> <p>Purpose of Disbursement Phone Service</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D134463</p> <p>Date of Disbursement 07 / 25 / 2008</p> <p>Amount of Each Disbursement this Period 815.08</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Qwest</p> <p>Mailing Address 1801 California St FI 51</p> <p>City Denver State CO Zip Code 80202-2605</p> <p>Purpose of Disbursement Phone Service</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D134464</p> <p>Date of Disbursement 08 / 22 / 2008</p> <p>Amount of Each Disbursement this Period 417.09</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Real Deal Productions</p> <p>Mailing Address 1516 Paseo De Peralta</p> <p>City Santa Fe State NM Zip Code 87501-3722</p> <p>Purpose of Disbursement Utilities</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D134640</p> <p>Date of Disbursement 07 / 17 / 2008</p> <p>Amount of Each Disbursement this Period 350.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ►

1582.17

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)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial) Real Deal Productions <hr/> Mailing Address 1516 Paseo De Peralta <hr/> City Santa Fe State NM Zip Code 87501-3722 <hr/> Purpose of Disbursement Rent Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D134641 Date of Disbursement 08 / 01 / 2008
	Amount of Each Disbursement this Period 2250.00
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Category/ Type
	Category/ Type

B. Full Name (Last, First, Middle Initial) Real Deal Productions <hr/> Mailing Address 1516 Paseo De Peralta <hr/> City Santa Fe State NM Zip Code 87501-3722 <hr/> Purpose of Disbursement Utilities Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D134642 Date of Disbursement 08 / 22 / 2008
	Amount of Each Disbursement this Period 400.00
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Category/ Type
	Category/ Type

C. Full Name (Last, First, Middle Initial) Real Deal Productions <hr/> Mailing Address 1516 Paseo De Peralta <hr/> City Santa Fe State NM Zip Code 87501-3722 <hr/> Purpose of Disbursement Rent Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D134643 Date of Disbursement 09 / 01 / 2008
	Amount of Each Disbursement this Period 2250.00
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	4900.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
People for Ben

A.

Full Name (Last, First, Middle Initial)
Real Deal Productions

Mailing Address 1516 Paseo De Peralta

City Santa Fe State NM Zip Code 87501-3722

Purpose of Disbursement
Rent

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D134365
Date of Disbursement

07 / 10 / 2008

Amount of Each Disbursement this Period

2250.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)
Renaissance Hotel

Mailing Address 999 9th St NW

City Washington State DC Zip Code 20001

Purpose of Disbursement
Travel

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D134661
Date of Disbursement

07 / 02 / 2008

Amount of Each Disbursement this Period

1028.35

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)
Reservation Rewards

Mailing Address P.O.Box 855

City Shelton State CT Zip Code 06484

Purpose of Disbursement
Travel

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D134670
Date of Disbursement

07 / 17 / 2008

Amount of Each Disbursement this Period

12.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

3290.35

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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
People for Ben

A. Reservation Rewards	Full Name (Last, First, Middle Initial)	Transaction ID: D134671	
	Mailing Address P.O.Box 855	Date of Disbursement 08 / 17 / 2008	
	City Shelton State CT Zip Code 06484	Amount of Each Disbursement this Period 12.00	
	Purpose of Disbursement Travel	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
	Candidate Name	Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:		

B. Reservation Rewards	Full Name (Last, First, Middle Initial)	Transaction ID: D135302	
	Mailing Address P.O.Box 855	Date of Disbursement 09 / 17 / 2008	
	City Shelton State CT Zip Code 06484	Amount of Each Disbursement this Period 12.00	
	Purpose of Disbursement Travel	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
	Candidate Name	Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:		

C. Residence Inn	Full Name (Last, First, Middle Initial)	Transaction ID: D134716	
	Mailing Address 300 E 4th St	Date of Disbursement 07 / 21 / 2008	
	City Austin State TX Zip Code 78701-3612	Amount of Each Disbursement this Period 323.90	
	Purpose of Disbursement Hotel	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
	Candidate Name	Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:		

SUBTOTAL of Disbursements This Page (optional)	347.90
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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
People for Ben

A.

Full Name (Last, First, Middle Initial)
Residence Inn

Mailing Address 300 E 4th St

City State Zip Code
Austin TX 78701-3612

Purpose of Disbursement
Hotel

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D134717
Date of Disbursement

07 / 21 / 2008

Amount of Each Disbursement this Period

303.60

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)
Yvette Rodarte

Mailing Address PO Box 1966

City State Zip Code
Albuquerque NM 87103-1966

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D134367
Date of Disbursement

07 / 01 / 2008

Amount of Each Disbursement this Period

800.70

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)
Yvette Rodarte

Mailing Address PO Box 1966

City State Zip Code
Albuquerque NM 87103-1966

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D134368
Date of Disbursement

07 / 15 / 2008

Amount of Each Disbursement this Period

1354.30

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

2458.60

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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
People for Ben

A.	Full Name (Last, First, Middle Initial) Yvette Rodarte	Transaction ID: D134369 Date of Disbursement 07 / 21 / 2008
	Mailing Address PO Box 1966	Amount of Each Disbursement this Period 455.70
	City Albuquerque State NM Zip Code 87103-1966	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Gas Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Safeguard Business Systems	Transaction ID: D134366 Date of Disbursement 08 / 07 / 2008
	Mailing Address 8585 N. Stemmons, Suite 600 N	Amount of Each Disbursement this Period 101.04
	City Dallas State TX Zip Code 75247	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Stationary Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Santa Fe Reporter	Transaction ID: D134667 Date of Disbursement 08 / 07 / 2008
	Mailing Address 132 E. Marcy Street	Amount of Each Disbursement this Period 444.71
	City Santa Fe State NM Zip Code 87501	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Advertising Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	1001.45
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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
People for Ben

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Shell Gasoline</p> <p>Mailing Address 2631 Cerrillos Rd</p> <p>City Santa Fe State NM Zip Code 87505-3257</p> <p>Purpose of Disbursement Gas</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D135296</p> <p>Date of Disbursement 07 / 17 / 2008</p> <p>Amount of Each Disbursement this Period 52.75</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Shell Gasoline</p> <p>Mailing Address 2631 Cerrillos Rd</p> <p>City Santa Fe State NM Zip Code 87505-3257</p> <p>Purpose of Disbursement GAS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D137467</p> <p>Date of Disbursement 09 / 29 / 2008</p> <p>Amount of Each Disbursement this Period 43.05</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Shell Gasoline</p> <p>Mailing Address 2631 Cerrillos Rd</p> <p>City Santa Fe State NM Zip Code 87505-3257</p> <p>Purpose of Disbursement Gas</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D135313</p> <p>Date of Disbursement 08 / 22 / 2008</p> <p>Amount of Each Disbursement this Period 75.01</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

170.81

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)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
People for Ben

A.	Full Name (Last, First, Middle Initial) Shell Gasoline	Transaction ID: D135314 Date of Disbursement 08 / 25 / 2008
	Mailing Address 2631 Cerrillos Rd	Amount of Each Disbursement this Period 44.27
	City Santa Fe State NM Zip Code 87505-3257	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Gas Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Shell Gasoline	Transaction ID: D135315 Date of Disbursement 09 / 02 / 2008
	Mailing Address 2631 Cerrillos Rd	Amount of Each Disbursement this Period 35.62
	City Santa Fe State NM Zip Code 87505-3257	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Gas Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Shell Gasoline	Transaction ID: D135316 Date of Disbursement 09 / 02 / 2008
	Mailing Address 2631 Cerrillos Rd	Amount of Each Disbursement this Period 26.69
	City Santa Fe State NM Zip Code 87505-3257	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Gas Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	106.58
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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
People for Ben

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Shell Gasoline</p> <p>Mailing Address 2631 Cerrillos Rd</p> <p>City Santa Fe State NM Zip Code 87505-3257</p> <p>Purpose of Disbursement Gas</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D135317</p> <p>Date of Disbursement 09 / 11 / 2008</p> <p>Amount of Each Disbursement this Period 48.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Shell Gasoline</p> <p>Mailing Address 2631 Cerrillos Rd</p> <p>City Santa Fe State NM Zip Code 87505-3257</p> <p>Purpose of Disbursement Gas</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D135318</p> <p>Date of Disbursement 09 / 22 / 2008</p> <p>Amount of Each Disbursement this Period 53.77</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Shiprock Navajo Fair Inc.</p> <p>Mailing Address PO Box 1903</p> <p>City Shiprock State NM Zip Code 87420-1903</p> <p>Purpose of Disbursement Event Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D137464</p> <p>Date of Disbursement 09 / 18 / 2008</p> <p>Amount of Each Disbursement this Period 500.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

601.77

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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
People for Ben

A.	Full Name (Last, First, Middle Initial) Sierra Club Political Committee Mailing Address 85 2nd St FI 2 City San Francisco State CA Zip Code 94105-3456 Purpose of Disbursement Website Endorsment Candidate Name Sierra Club Political Committee Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D123370 Date of Disbursement 07 / 24 / 2008 Amount of Each Disbursement this Period 10.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 * in-kind received
B.	Full Name (Last, First, Middle Initial) Southwest Airlines Mailing Address P.O. Box 36647-1CR City Dallas State TX Zip Code 75235 Purpose of Disbursement Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D134678 Date of Disbursement 07 / 09 / 2008 Amount of Each Disbursement this Period 450.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Southwest Airlines Mailing Address P.O. Box 36647-1CR City Dallas State TX Zip Code 75235 Purpose of Disbursement Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D134679 Date of Disbursement 07 / 09 / 2008 Amount of Each Disbursement this Period 450.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

910.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
People for Ben

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Southwest Airlines</p> <p>Mailing Address P.O. Box 36647-1CR</p> <p>City Dallas State TX Zip Code 75235</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D134680</p> <p>Date of Disbursement 07 / 16 / 2008</p> <p>Amount of Each Disbursement this Period 516.50</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Southwest Airlines</p> <p>Mailing Address P.O. Box 36647-1CR</p> <p>City Dallas State TX Zip Code 75235</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D134681</p> <p>Date of Disbursement 07 / 16 / 2008</p> <p>Amount of Each Disbursement this Period 516.50</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Southwest Airlines</p> <p>Mailing Address P.O. Box 36647-1CR</p> <p>City Dallas State TX Zip Code 75235</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D134682</p> <p>Date of Disbursement 07 / 16 / 2008</p> <p>Amount of Each Disbursement this Period 516.50</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1549.50

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)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
People for Ben

A.	Full Name (Last, First, Middle Initial) Southwest Airlines Mailing Address P.O. Box 36647-1CR City Dallas State TX Zip Code 75235 Purpose of Disbursement Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D134683 Date of Disbursement 08 / 04 / 2008 Amount of Each Disbursement this Period 246.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Southwest Airlines Mailing Address P.O. Box 36647-1CR City Dallas State TX Zip Code 75235 Purpose of Disbursement Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D134684 Date of Disbursement 08 / 04 / 2008 Amount of Each Disbursement this Period 159.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Southwest Airlines Mailing Address P.O. Box 36647-1CR City Dallas State TX Zip Code 75235 Purpose of Disbursement Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D134685 Date of Disbursement 08 / 04 / 2008 Amount of Each Disbursement this Period 112.50 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

517.50

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)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
People for Ben

A.	Full Name (Last, First, Middle Initial) Southwest Airlines Mailing Address P.O. Box 36647-1CR City Dallas State TX Zip Code 75235 Purpose of Disbursement Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D134686 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 8 Amount of Each Disbursement this Period 112.50 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Southwest Airlines Mailing Address P.O. Box 36647-1CR City Dallas State TX Zip Code 75235 Purpose of Disbursement Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D135311 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 2 / 2 0 0 8 Amount of Each Disbursement this Period 252.50 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Southwest Airlines Mailing Address P.O. Box 36647-1CR City Dallas State TX Zip Code 75235 Purpose of Disbursement Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D135312 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 2 / 2 0 0 8 Amount of Each Disbursement this Period 252.50 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)	617.50
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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
People for Ben

A.	Full Name (Last, First, Middle Initial) Southwest Cash and Carry <hr/> Mailing Address 518 W Cordova Rd # A <hr/> City Santa Fe State NM Zip Code 87505 <hr/> Purpose of Disbursement Event Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D135571 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 2 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 614.56 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Startlogic Inc. <hr/> Mailing Address 919 East Jefferson Street Ste. 100 <hr/> City Phoenix State AZ Zip Code 85034 <hr/> Purpose of Disbursement Website Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D135301 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 1 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 3.95 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Startlogic Inc. <hr/> Mailing Address 919 East Jefferson Street Ste. 100 <hr/> City Phoenix State AZ Zip Code 85034 <hr/> Purpose of Disbursement Website Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D134465 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 1 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 3.95 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	622.46
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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
People for Ben

A. Full Name (Last, First, Middle Initial) Startlogic Inc. <hr/> Mailing Address 919 East Jefferson Street Ste. 100 <hr/> City Phoenix State AZ Zip Code 85034 <hr/> Purpose of Disbursement Website Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D134466 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 8
	Amount of Each Disbursement this Period 3.95
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Category/Type
	Category/Type
	Category/Type

B. Full Name (Last, First, Middle Initial) Sheena Suavo <hr/> Mailing Address 1516 Paseo De Peralta <hr/> City Santa Fe State NM Zip Code 87501-3722 <hr/> Purpose of Disbursement Contract Services Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D137461 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 2 / 2 0 0 8
	Amount of Each Disbursement this Period 982.48
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Category/Type
	Category/Type
	Category/Type

C. Full Name (Last, First, Middle Initial) Sundial Stores <hr/> Mailing Address 2654 E Historic Highway 66 <hr/> City Gallup State NM Zip Code 87301-4765 <hr/> Purpose of Disbursement Gas Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D135326 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 2 / 2 0 0 8
	Amount of Each Disbursement this Period 45.01
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Category/Type
	Category/Type
	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	1031.44
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 176 / 192

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
People for Ben

A.	Full Name (Last, First, Middle Initial) The Apple Store Mailing Address 2240 Q St NE Ste D City Albuquerque State NM Zip Code 87110-2072 Purpose of Disbursement Computer Equipment Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D134662 Date of Disbursement 07 / 20 / 2008 Amount of Each Disbursement this Period 1995.05 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) The UPS Store Mailing Address 223 N Guadalupe St City Santa Fe State NM Zip Code 87501-1868 Purpose of Disbursement Mailing Service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D134672 Date of Disbursement 07 / 17 / 2008 Amount of Each Disbursement this Period 262.23 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Tiwa, Inc Mailing Address 1660 Roy Ave NE City Albuquerque State NM Zip Code 87113-2448 Purpose of Disbursement Gas Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D134665 Date of Disbursement 08 / 15 / 2008 Amount of Each Disbursement this Period 50.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

2307.28

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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
People for Ben

A.	Full Name (Last, First, Middle Initial) Tiwa, Inc Mailing Address 1660 Roy Ave NE City Albuquerque State NM Zip Code 87113-2448 Purpose of Disbursement Gas Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D135308 Date of Disbursement 08 / 19 / 2008 Amount of Each Disbursement this Period 38.73 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Tiwa, Inc Mailing Address 1660 Roy Ave NE City Albuquerque State NM Zip Code 87113-2448 Purpose of Disbursement Gas Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D135331 Date of Disbursement 09 / 08 / 2008 Amount of Each Disbursement this Period 35.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Tortilla Coast Mailing Address 400 1st St SE City Washington State DC Zip Code 20003-1826 Purpose of Disbursement Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D134675 Date of Disbursement 07 / 24 / 2008 Amount of Each Disbursement this Period 720.39 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	794.12
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)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
People for Ben

A.	Full Name (Last, First, Middle Initial) Totavi 66 <hr/> Mailing Address 2007 State HWY 502 <hr/> City Totavi State NM Zip Code 87544 <hr/> Purpose of Disbursement Gas Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D135591 Date of Disbursement <table border="1" style="width: 100%;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> <hr/> Amount of Each Disbursement this Period <table border="1" style="width: 100%;"> <tr> <td style="text-align: right;">26.31</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	4		2	0	0	8	26.31
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		2	4		2	0	0	8														
26.31																							
B.	Full Name (Last, First, Middle Initial) Town of Taos <hr/> Mailing Address 400 Camino De La Placita <hr/> City Taos State NM Zip Code 87571-6071 <hr/> Purpose of Disbursement Campaign Event Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D137452 Date of Disbursement <table border="1" style="width: 100%;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> <hr/> Amount of Each Disbursement this Period <table border="1" style="width: 100%;"> <tr> <td style="text-align: right;">75.00</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	1		2	0	0	8	75.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	8		2	1		2	0	0	8														
75.00																							
C.	Full Name (Last, First, Middle Initial) Trails West <hr/> Mailing Address 24 Highway 334 <hr/> City Edgewood State NM Zip Code 87015 <hr/> Purpose of Disbursement Gas Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D137444 Date of Disbursement <table border="1" style="width: 100%;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> <hr/> Amount of Each Disbursement this Period <table border="1" style="width: 100%;"> <tr> <td style="text-align: right;">49.49</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	0		2	0	0	8	49.49
M	M	/	D	D	/	Y	Y	Y	Y														
0	8		2	0		2	0	0	8														
49.49																							

SUBTOTAL of Disbursements This Page (optional)	150.80
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
People for Ben

A.	Full Name (Last, First, Middle Initial) Aaron Trujillo <hr/> Mailing Address 6804 Toratolla Ct NW <hr/> City Albuquerque State NM Zip Code 87120-6098 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D135303 Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2008 <hr/> Amount of Each Disbursement this Period 1480.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Aaron Trujillo <hr/> Mailing Address 6804 Toratolla Ct NW <hr/> City Albuquerque State NM Zip Code 87120-6098 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D134710 Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2008 <hr/> Amount of Each Disbursement this Period 1480.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Aaron Trujillo <hr/> Mailing Address 6804 Toratolla Ct NW <hr/> City Albuquerque State NM Zip Code 87120-6098 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D134711 Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2008 <hr/> Amount of Each Disbursement this Period 1480.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

4440.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
People for Ben

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Aaron Trujillo</p> <p>Mailing Address 6804 Toratolla Ct NW</p> <p>City Albuquerque State NM Zip Code 87120-6098</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D134712</p> <p>Date of Disbursement 08 / 31 / 2008</p> <p>Amount of Each Disbursement this Period 1610.10</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Aaron Trujillo</p> <p>Mailing Address 6804 Toratolla Ct NW</p> <p>City Albuquerque State NM Zip Code 87120-6098</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D134264</p> <p>Date of Disbursement 07 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 1617.50</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Aaron Trujillo</p> <p>Mailing Address 6804 Toratolla Ct NW</p> <p>City Albuquerque State NM Zip Code 87120-6098</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D134265</p> <p>Date of Disbursement 07 / 17 / 2008</p> <p>Amount of Each Disbursement this Period 1617.50</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ►

4845.10

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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
People for Ben

A.	Full Name (Last, First, Middle Initial) Carlos Trujillo <hr/> Mailing Address 309 Rio Grande #4 <hr/> City Albuquerque State NM Zip Code 87104 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D134349 Date of Disbursement 07 / 07 / 2008 <hr/> Amount of Each Disbursement this Period 2827.05 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Carlos Trujillo <hr/> Mailing Address 309 Rio Grande #4 <hr/> City Albuquerque State NM Zip Code 87104 <hr/> Purpose of Disbursement Contract Services Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D134350 Date of Disbursement 07 / 15 / 2008 <hr/> Amount of Each Disbursement this Period 1396.23 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Carlos Trujillo <hr/> Mailing Address 309 Rio Grande #4 <hr/> City Albuquerque State NM Zip Code 87104 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D134471 Date of Disbursement 08 / 01 / 2008 <hr/> Amount of Each Disbursement this Period 5000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

9223.28

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)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
People for Ben

A.

Full Name (Last, First, Middle Initial)
Carlos Trujillo

Mailing Address 309 Rio Grande #4

City Albuquerque State NM Zip Code 87104

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D134472
Date of Disbursement

08 / 15 / 2008

Amount of Each Disbursement this Period

2000.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)
Carlos Trujillo

Mailing Address 309 Rio Grande #4

City Albuquerque State NM Zip Code 87104

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D134473
Date of Disbursement

09 / 01 / 2008

Amount of Each Disbursement this Period

2000.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)
Carlos Trujillo

Mailing Address 309 Rio Grande #4

City Albuquerque State NM Zip Code 87104

Purpose of Disbursement
Salary Advance

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D135320
Date of Disbursement

08 / 25 / 2008

Amount of Each Disbursement this Period

5000.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

9000.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
People for Ben

A.	Full Name (Last, First, Middle Initial) Carlos Trujillo <hr/> Mailing Address 309 Rio Grande #4 <hr/> City Albuquerque State NM Zip Code 87104 <hr/> Purpose of Disbursement Salary Advance Candidate Name _____ <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D135321 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 1 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 750.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Carlos Trujillo <hr/> Mailing Address 309 Rio Grande #4 <hr/> City Albuquerque State NM Zip Code 87104 <hr/> Purpose of Disbursement Salary Candidate Name _____ <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D135322 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 2750.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Carlos Trujillo <hr/> Mailing Address 309 Rio Grande #4 <hr/> City Albuquerque State NM Zip Code 87104 <hr/> Purpose of Disbursement Cell Phone Candidate Name _____ <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D135323 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 3 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 323.06 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

3823.06

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

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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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
People for Ben

A.

Full Name (Last, First, Middle Initial)
Jonathan Valdez

Mailing Address PO Box 4031

City Espanola State NM Zip Code 87533-4031

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D134474
Date of Disbursement

07 / 11 / 2008

Amount of Each Disbursement this Period

1461.60

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)
Jonathan Valdez

Mailing Address PO Box 4031

City Espanola State NM Zip Code 87533-4031

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D134355
Date of Disbursement

07 / 01 / 2008

Amount of Each Disbursement this Period

1461.60

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)
Katie Valdez

Mailing Address 15 Paseo De La Joya

City Santa Fe State NM Zip Code 87506-7108

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D134357
Date of Disbursement

07 / 01 / 2008

Amount of Each Disbursement this Period

461.75

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

3384.95

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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
People for Ben

A.	Full Name (Last, First, Middle Initial) Verizon Wireless Mailing Address PO Box 2167 City Folsom State CA Zip Code 95763-2167 Purpose of Disbursement Cell Phone Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D134459 Date of Disbursement 07 / 16 / 2008 Amount of Each Disbursement this Period 175.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Verizon Wireless Mailing Address PO Box 2167 City Folsom State CA Zip Code 95763-2167 Purpose of Disbursement Cell Phone Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D134460 Date of Disbursement 07 / 19 / 2008 Amount of Each Disbursement this Period 170.52 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Verizon Wireless Mailing Address PO Box 2167 City Folsom State CA Zip Code 95763-2167 Purpose of Disbursement Cell Phone Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D134461 Date of Disbursement 07 / 31 / 2008 Amount of Each Disbursement this Period 27.17 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

372.69

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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
People for Ben

A.	Full Name (Last, First, Middle Initial) Verizon Wireless Mailing Address PO Box 2167 City Folsom State CA Zip Code 95763-2167 Purpose of Disbursement Transfer Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D134644 Date of Disbursement 07 / 31 / 2008 Amount of Each Disbursement this Period 5.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Verizon Wireless Mailing Address PO Box 2167 City Folsom State CA Zip Code 95763-2167 Purpose of Disbursement Cell Phone Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D135309 Date of Disbursement 08 / 21 / 2008 Amount of Each Disbursement this Period 173.91 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Verizon Wireless Mailing Address PO Box 2167 City Folsom State CA Zip Code 95763-2167 Purpose of Disbursement Cell Phone Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D135587 Date of Disbursement 09 / 16 / 2008 Amount of Each Disbursement this Period 165.52 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	344.43
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 188 / 192

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
People for Ben

A.	Full Name (Last, First, Middle Initial) Verizon Wireless Mailing Address PO Box 2167 City Folsom State CA Zip Code 95763-2167 Purpose of Disbursement Cell Phone Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D135592 Date of Disbursement 09 / 25 / 2008 Amount of Each Disbursement this Period 165.52 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Wal Mart Mailing Address 3251 Cerrillos Rd City Santa Fe State NM Zip Code 87507-2924 Purpose of Disbursement Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D134656 Date of Disbursement 07 / 17 / 2008 Amount of Each Disbursement this Period 91.51 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Water Boyz Mailing Address 36 Bisbee Ct City Santa Fe State NM Zip Code 87508-1338 Purpose of Disbursement Water Service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D135570 Date of Disbursement 09 / 11 / 2008 Amount of Each Disbursement this Period 53.97 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

311.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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)
People for Ben

A.

Full Name (Last, First, Middle Initial)
Ms. Barbara Wold

Mailing Address 8522 Flower PI NE

City Albuquerque State NM Zip Code 87112-1137

Purpose of Disbursement
Internet Advertising

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D134692
Date of Disbursement

09 / 10 / 2008

Amount of Each Disbursement this Period

342.80

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)
Yahoo Flicker

Mailing Address 701 First Ave

City Sunnyvale State CA Zip Code 94089

Purpose of Disbursement
Internet

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D134669
Date of Disbursement

07 / 08 / 2008

Amount of Each Disbursement this Period

24.95

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)
Kurt Young

Mailing Address 1413 Paseo De Peralta

City Santa Fe State NM Zip Code 87501-4300

Purpose of Disbursement
Food for Event

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D137570
Date of Disbursement

09 / 28 / 2008

Amount of Each Disbursement this Period

1000.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

* in-kind received

SUBTOTAL of Disbursements This Page (optional)

1367.75

TOTAL This Period (last page this line number only)

181442.33

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 190 / 192

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
People for Ben

A.	Full Name (Last, First, Middle Initial) Mr. Esteban Aguilar, Sr. Mailing Address 24011 Calle De Panza NW City Albuquerque State NM Zip Code 87104 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D137441 Date of Disbursement 08 / 21 / 2008 Amount of Each Disbursement this Period 250.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Eddie M. Gilbert Mailing Address 503 Camino Del Monte Sol City Santa Fe State NM Zip Code 87505-2827 Purpose of Disbursement Refunded CONTRIBUTION Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D137440 Date of Disbursement 08 / 19 / 2008 Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Daniel James Mailing Address 3262 Nizhoni Dr City Santa Fe State NM Zip Code 87507-2555 Purpose of Disbursement Contribution Refund Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D137442 Date of Disbursement 08 / 21 / 2008 Amount of Each Disbursement this Period 50.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	1300.00
TOTAL This Period (last page this line number only) ▶	1300.00

SCHEDULE C (FEC Form 3)

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

FOR LINE NUMBER:
(check only one) 13a
 13b

LOANS

NAME OF COMMITTEE (In Full)
People for Ben

Transaction ID: L167

LOAN SOURCE Full Name (Last, First, Middle Initial) Mr. Ben Ray Lujan	Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 05 Entrada Celedon Y Nestora	
City Santa Fe State NM ZIP Code 87506-9740	

Original Amount of Loan 150000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 150000.00
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TERMS

Date Incurred MM DD YY YY 05 19 2008	Date Due 05/16/2009	Interest Rate One Year % (apr)	Secured: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial) Mr. Ben Ray Lujan	Name of Employer State of New Mexico
Mailing Address 05 Entrada Celedon Y Nestora	Occupation PRC
City Santa Fe State NM ZIP Code 87506-9740	Amount Guaranteed Outstanding: 150000.00
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)	150000.00
TOTALS This Period (last page in this line only)00

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

SCHEDULE C (FEC Form 3)

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

PAGE 192 / 192

FOR LINE NUMBER: (check only one) 13a 13b

LOANS

NAME OF COMMITTEE (In Full)
People for Ben

Transaction ID: L168

LOAN SOURCE Full Name (Last, First, Middle Initial)
Mr. Ben Ray Lujan

Election: Primary General Other (specify) ▼

Mailing Address 05 Entrada Celedon Y Nestora

City Santa Fe State NM ZIP Code 87506-9740

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
50000.00	49993.06	6.94

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M M 1 2 D D 0 6 Y Y Y Y 2 0 0 7	12/06/2008	5.00 % (apr)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

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

Full Name (Last, First, Middle Initial) Mr. Ben Ray Lujan	Name of Employer State of New Mexico
Mailing Address 05 Entrada Celedon Y Nestora	Occupation PRC
City Santa Fe State NM ZIP Code 87506-9740	Amount Guaranteed Outstanding: 50000.00
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)	6.94
TOTALS This Period (last page in this line only)	150006.94

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