

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

| | | |
|---|------------------------------|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 8 / 326 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 |
| <input type="checkbox"/> 12 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |

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)
Democratic Party of New Mexico

A.

Full Name (Last, First, Middle Initial)
John Hunting

Mailing Address 161 Ottawa Avenue NW Suite 501-H

City State Zip Code
Grand Rapids MI 49503

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

Name of Employer John Hunting & Assoc. Occupation Partner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 10 / 19 / 2010

Transaction ID: 11ai-000027121

Amount of Each Receipt this Period: 2500.00

B.

Full Name (Last, First, Middle Initial)
Pueblo Of Sandia

Mailing Address 481 Sandia Loop

City State Zip Code
Bernalillo NM 87004

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

Name of Employer Pueblo Of Sandia Occupation Native American Organization

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt: 10 / 19 / 2010

Transaction ID: 11ai-000027122

Amount of Each Receipt this Period: 8000.00

C.

Full Name (Last, First, Middle Initial)
Carol L. Kain

Mailing Address 1601 Pennsylvania Street Ne, Apt.

City State Zip Code
Albuquerque NM 87110-7405

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

Name of Employer Presbyterian Hospital Occupation Nurse

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 695.00

Date of Receipt: 10 / 20 / 2010

Transaction ID: 11ai-000027146

Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ► 10600.00

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