

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

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

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

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on 11 02 2010 in the State of NM

5. Covering Period 10 14 2010 through 11 22 2010

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

Type or Print Name of Treasurer Bill Redmond

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

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

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

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
Republican Campaign Committee Of New Mexico

Report Covering the Period: From:

M	M
1	0

D	D
1	4

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	1

D	D
2	2

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>X</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	X	Y	Y	Y	2	0	1	0		100184.75
X	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	242173.35									
(c) Total Receipts (from Line 19)	210550.36	1020383.99								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	452723.71	1120568.74								
7. Total Disbursements (from Line 31)	285019.83	952864.86								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	167703.88	167703.88								
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)	0.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
Republican Campaign Committee Of New Mexico

Report Covering the Period: From:

M	M
1	0

D	D
1	4

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	1

D	D
2	2

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	23620.00	181084.78
(ii) Unitemized	8310.00	147243.05
(iii) TOTAL (add Lines 11(a)(i) and (ii)	31930.00	328327.83
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	3300.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	31930.00	331627.83
12. Transfers From Affiliated/Other Party Committees	153380.00	438871.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	894.86	1101.02
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	1.50	19.14
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	21338.00	208897.00
(b) Levin Funds (from Schedule H5)	3006.00	39868.00
(c) Total Transfer (add 18(a) and 18(b)).	24344.00	248765.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	210550.36	1020383.99
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	186206.36	771618.99

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	3919.52	48802.52
(ii) Non-Federal Share.....	22210.36	202111.91
(b) Other Federal Operating Expenditures.....	160936.67	369917.27
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	187066.55	620831.70
22. Transfers to Affiliated/Other Party Committees.....	7882.67	85120.98
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	0.00	24000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	532.20	7039.63
(ii) "Levin" Share	3015.80	39891.22
(b) Federal Election Activity Paid Entirely With Federal Funds	86522.61	175981.33
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	90070.61	222912.18
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	285019.83	952864.86
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	259793.67	710861.73

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	31930.00	331627.83
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	31930.00	331627.83
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	164856.19	418719.79
37. Offsets to Operating Expenditures (from Line 15, page 3)	894.86	1101.02
38. Net Operating Expenditures (subtract Line 37 from Line 36)	163961.33	417618.77

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 140

(check only one)

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

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

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

A.	Full Name (Last, First, Middle Initial) The Honora Brian Moore		Date of Receipt MM / DD / YYYY 11 / 09 / 2010		
	Mailing Address 724 Walnut Street		Transaction ID: SA11AI-10260-99930-c		
	City Clayton	State NM	Zip Code 88415-2916	Amount of Each Receipt this Period 40.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Ranch market	Occupation President			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 590.00			

B.	Full Name (Last, First, Middle Initial) Mrs. Maxine Melbourne		Date of Receipt MM / DD / YYYY 10 / 25 / 2010		
	Mailing Address 816 Southeast Circle NW		Transaction ID: SA11AI-11406-99489-c		
	City Albuquerque	State NM	Zip Code 87104-1963	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Melbourne Financial Corp.	Occupation Financial Corp.			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 480.00			

C.	Full Name (Last, First, Middle Initial) Mr. Hans Steinhoff		Date of Receipt MM / DD / YYYY 10 / 25 / 2010		
	Mailing Address PO Box 29		Transaction ID: SA11AI-11451-99459-c		
	City Cloudcroft	State NM	Zip Code 88317-0029	Amount of Each Receipt this Period 20.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Retired	Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 280.00			

SUBTOTAL of Receipts This Page (optional) ▶

110.00

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

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

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

FOR LINE NUMBER: PAGE 7 / 140
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Mailing Address PO Box 29

City State Zip Code
Cloudcroft NM 88317-0029

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt: 11 / 09 / 2010
Transaction ID: SA11AI-11451-99888-c
Amount of Each Receipt this Period: 40.00

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

Mailing Address 1325 Cuba Avenue

City State Zip Code
Alamogordo NM 88310-5727

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

Name of Employer None Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 805.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11AI-1268-99495-c
Amount of Each Receipt this Period: 50.00

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

Mailing Address 1325 Cuba Avenue

City State Zip Code
Alamogordo NM 88310-5727

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

Name of Employer None Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 805.00

Date of Receipt: 11 / 01 / 2010
Transaction ID: SA11AI-1268-99656-c
Amount of Each Receipt this Period: 25.00

SUBTOTAL of Receipts This Page (optional) ► 115.00

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

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

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

FOR LINE NUMBER: PAGE 8 / 140
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Mr. Phil Archuletta

Mailing Address PO Box 567

City State Zip Code
Mountainair NM 87036-0567

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

Name of Employer P & M Sign Inc Occupation Owner

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 340.00

Date of Receipt

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

Transaction ID: SA11AI-128-99857-c
 Amount of Each Receipt this Period
 40.00

B. Full Name (Last, First, Middle Initial)
Ms. Susan Marts

Mailing Address 7A Roy Crawford Lane

City State Zip Code
Santa Fe NM 87505-4576

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

Name of Employer Santa Fe Recovery Center Occupation Therapist

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 560.00

Date of Receipt

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

Transaction ID: SA11AI-12982-99575-c
 Amount of Each Receipt this Period
 180.00

C. Full Name (Last, First, Middle Initial)
Mrs. Cathrynn Brown

Mailing Address 1814 N Guadalupe Street

City State Zip Code
Carlsbad NM 88220-8813

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

Name of Employer Brown Law Firm Occupation Attorney

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 550.00

Date of Receipt

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

Transaction ID: SA11AI-1337-99874-c
 Amount of Each Receipt this Period
 40.00

SUBTOTAL of Receipts This Page (optional) ► **260.00**

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 140
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Mr. Kerry Boyd

Mailing Address 1897 Candela Street

City State Zip Code
Santa Fe NM 87505-5646

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

Name of Employer Occupation
Century 21 Land Sun Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt
MM / DD / YYYY
11 / 09 / 2010

Transaction ID: SA11AI-14785-99922-c

Amount of Each Receipt this Period
80.00

B. Full Name (Last, First, Middle Initial)
Mr. Kerry Boyd

Mailing Address 1897 Candela Street

City State Zip Code
Santa Fe NM 87505-5646

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

Name of Employer Occupation
Century 21 Land Sun Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt
MM / DD / YYYY
11 / 10 / 2010

Transaction ID: SA11AI-14785-99955-c

Amount of Each Receipt this Period
180.00

C. Full Name (Last, First, Middle Initial)
Ms. Daureen Dolce

Mailing Address 12 Westlake Drive NE

City State Zip Code
Albuquerque NM 87112-4264

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

Name of Employer Occupation
The Right to Life Committ- Executive Director
ee NM

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 510.00

Date of Receipt
MM / DD / YYYY
11 / 09 / 2010

Transaction ID: SA11AI-1671-99846-c

Amount of Each Receipt this Period
40.00

SUBTOTAL of Receipts This Page (optional) ► 300.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 140
(check only one)

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

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

A.

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

Mailing Address PO Box 1480

City State Zip Code
Mesilla NM 88046-1480

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

Name of Employer Occupation
F & A Dairy Products Inc President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
MM / DD / YYYY
11 / 01 / 2010

Transaction ID: SA11AI-19430-99649-c

Amount of Each Receipt this Period
150.00

B.

Full Name (Last, First, Middle Initial)
The Honora Jimmie Hall

Mailing Address 13008 Gray Hills Road NE

City State Zip Code
Albuquerque NM 87111-4378

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

Name of Employer Occupation
None Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 760.00

Date of Receipt
MM / DD / YYYY
11 / 09 / 2010

Transaction ID: SA11AI-19900-99835-c

Amount of Each Receipt this Period
40.00

C.

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

Mailing Address 2926 La Camila Road NE

City State Zip Code
Albuquerque NM 87111-4510

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

Name of Employer Occupation
Tucumcari Animal Hospital Senior Safety Coordinator

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 705.00

Date of Receipt
MM / DD / YYYY
11 / 22 / 2010

Transaction ID: SA11AI20533100012c

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional) ► 205.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 140
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Mr. Wayne Johnson	Date of Receipt MM / DD / YYYY 10 / 22 / 2010
	Mailing Address 2926 La Camila Road NE	Transaction ID: SA11AI-20533-99420-c
	City State Zip Code Albuquerque NM 87111-4510	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Tucumcari Animal Hospital Senior Safety Coordinator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 705.00	

B.	Full Name (Last, First, Middle Initial) Mr. Charles Coll	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address PO Box 1818	Transaction ID: SA11AI-20950-99471-c
	City State Zip Code Roswell NM 88202-1818	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Self-Employed Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 605.00	

C.	Full Name (Last, First, Middle Initial) Ms. Judith Ledford	Date of Receipt MM / DD / YYYY 10 / 28 / 2010
	Mailing Address 1030 N Alameda Street	Transaction ID: SA11AI-21137-99606-c
	City State Zip Code Carlsbad NM 88220-5104	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Cress Insurance Consultants Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

SUBTOTAL of Receipts This Page (optional)	▶	130.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 140
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Ms. Judith Ledford		Date of Receipt MM / DD / YYYY 11 / 09 / 2010		
	Mailing Address 1030 N Alameda Street		Transaction ID: SA11AI-21137-99876-c		
	City Carlsbad	State NM	Zip Code 88220-5104	Amount of Each Receipt this Period 40.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Cress Insurance Consultants	Occupation Insurance Agent	Aggregate Year-to-Date 360.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

B.	Full Name (Last, First, Middle Initial) Mr. Richard Render		Date of Receipt MM / DD / YYYY 10 / 21 / 2010		
	Mailing Address 1341 Oakhurst Road		Transaction ID: SA11AI-21567-99404-c		
	City Clovis	State NM	Zip Code 88101-4426	Amount of Each Receipt this Period 25.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer None	Occupation Retired	Aggregate Year-to-Date 275.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

C.	Full Name (Last, First, Middle Initial) Mr. Richard Render		Date of Receipt MM / DD / YYYY 11 / 17 / 2010		
	Mailing Address 1341 Oakhurst Road		Transaction ID: SA11AI-21567-99994-c		
	City Clovis	State NM	Zip Code 88101-4426	Amount of Each Receipt this Period 25.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer None	Occupation Retired	Aggregate Year-to-Date 275.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

SUBTOTAL of Receipts This Page (optional)	▶	90.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 140
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Mr. Charles Moran

Mailing Address 1919 Villa Drive

City Artesia State NM Zip Code 88210-1644

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

Name of Employer Yates Petroleum Corporation Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2290.00

Date of Receipt 11 / 02 / 2010

Transaction ID: SA11AI-2180-99685-c

Amount of Each Receipt this Period 500.00

B. Full Name (Last, First, Middle Initial)
Mr. Hoyt Pattison

Mailing Address 2295 Curry Rd. H

City Clovis State NM Zip Code 88101-0900

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

Name of Employer Self-Employed Occupation Farmer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 910.00

Date of Receipt 11 / 02 / 2010

Transaction ID: SA11AI-21922-99683-c

Amount of Each Receipt this Period 0.00

C. Full Name (Last, First, Middle Initial)
Mr. Hoyt Pattison

Mailing Address 2295 Curry Rd. H

City Clovis State NM Zip Code 88101-0900

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

Name of Employer Self-Employed Occupation Farmer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 910.00

Date of Receipt 11 / 02 / 2010

Transaction ID: SA11AI-21922-99684-c

Amount of Each Receipt this Period 180.00

SUBTOTAL of Receipts This Page (optional) ▶ 680.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 140
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A.

Full Name (Last, First, Middle Initial)
Ms. Edith Schulz

Mailing Address 125 Smoke Rise Trail

City Belen State NM Zip Code 87002-9543

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

Name of Employer None Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11AI-23013-99354-c
 Amount of Each Receipt this Period: 25.00

B.

Full Name (Last, First, Middle Initial)
Ms. Edith Schulz

Mailing Address 125 Smoke Rise Trail

City Belen State NM Zip Code 87002-9543

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

Name of Employer None Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt: 10 / 26 / 2010
Transaction ID: SA11AI-23013-99563-c
 Amount of Each Receipt this Period: 25.00

C.

Full Name (Last, First, Middle Initial)
Mr. Joel Carson, III

Mailing Address PO Box 3102

City Roswell State NM Zip Code 88202-3102

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

Name of Employer Mack Energy Corporation Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1165.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: SA11AI-23152-99472-c
 Amount of Each Receipt this Period: 15.00

SUBTOTAL of Receipts This Page (optional) ► 65.00

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

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

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

FOR LINE NUMBER: PAGE 15 / 140
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

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

Mailing Address PO Box 400

City Roswell State NM Zip Code 88202-0400

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

Name of Employer Self-Employed Occupation Investments

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11AI-23905-99549-c

Amount of Each Receipt this Period
500.00

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

Mailing Address PO Box 50787

City Albuquerque State NM Zip Code 87181-0787

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

Name of Employer PNM Occupation Engineer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 455.00

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

Transaction ID: SA11AI-25500-99834-c

Amount of Each Receipt this Period
40.00

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

Mailing Address PO Box 50787

City Albuquerque State NM Zip Code 87181-0787

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

Name of Employer PNM Occupation Engineer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 455.00

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

Transaction ID: SA11AI-25500-99970-c

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional) ▶ **555.00**

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

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

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

FOR LINE NUMBER: PAGE 16 / 140
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

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

Mailing Address PO Box 157

City Mora State NM Zip Code 87732-0157

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

Name of Employer Self-Employed Occupation Rancher

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt 10 / 26 / 2010

Transaction ID: SA11AI-2565-99564-c

Amount of Each Receipt this Period 25.00

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

Mailing Address PO Box 157

City Mora State NM Zip Code 87732-0157

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

Name of Employer Self-Employed Occupation Rancher

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt 11 / 17 / 2010

Transaction ID: SA11AI-2565-99996-c

Amount of Each Receipt this Period 15.00

C. Full Name (Last, First, Middle Initial)
Mr. Ben Spencer

Mailing Address 817 Salamanca Street NW

City Los Ranchos State NM Zip Code 87107-5639

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

Name of Employer Argus Development Company Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 28 / 2010

Transaction ID: SA11AI-25704-99603-c

Amount of Each Receipt this Period 5000.00

SUBTOTAL of Receipts This Page (optional) ► 5040.00

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

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

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

FOR LINE NUMBER: PAGE 17 / 140
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

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

Mailing Address 10 Ellis Ranch Loop

City State Zip Code
Santa Fe NM 87505-1472

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

Name of Employer Self-Employed Occupation
Self-Employed Writer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
MM / DD / YYYY
11 / 09 / 2010

Transaction ID: SA11AI-27852-99929-c

Amount of Each Receipt this Period
40.00

B. Full Name (Last, First, Middle Initial)
Mrs. Joanne Morrissey

Mailing Address 3133 Vista Sandia

City State Zip Code
Santa Fe NM 87506-8528

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

Name of Employer Firemark Investments Occupation
Firemark Investments Investment Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt
MM / DD / YYYY
11 / 09 / 2010

Transaction ID: SA11AI-27855-99927-c

Amount of Each Receipt this Period
40.00

C. Full Name (Last, First, Middle Initial)
Mr. Lowell Brown

Mailing Address 800 Garcia Street

City State Zip Code
Santa Fe NM 87505-2862

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

Name of Employer LANL Occupation
LANL Staff Scientist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
10 / 26 / 2010

Transaction ID: SA11AI-29305-99533-c

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **180.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 140
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

A.	Full Name (Last, First, Middle Initial) Mr. Robert Martinez	Date of Receipt MM / DD / YYYY 11 / 09 / 2010
	Mailing Address 1207 Cuatro Cerros Trail SE	Transaction ID: SA11AI-3026-99841-c
	City State Zip Code Albuquerque NM 87123-4151	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer DOJ/FAA Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 330.00	

B.	Full Name (Last, First, Middle Initial) Mr. Mike Tellez	Date of Receipt MM / DD / YYYY 11 / 22 / 2010
	Mailing Address 909 N Alameda Boulevard	Transaction ID: SA11AI31639100009c
	City State Zip Code Las Cruces NM 88005-2124	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Family Restaurant Group LLC Occupation Restaurant Operator Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 265.00	

C.	Full Name (Last, First, Middle Initial) Mr. Mike Tellez	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 909 N Alameda Boulevard	Transaction ID: SA11AI-31639-99346-c
	City State Zip Code Las Cruces NM 88005-2124	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Family Restaurant Group LLC Occupation Restaurant Operator Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 265.00	

SUBTOTAL of Receipts This Page (optional)	70.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 19 / 140
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Colonel Rollie Cook

Mailing Address 4108 Cibola Village Drive NE

City Albuquerque State NM Zip Code 87111-4112

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

Name of Employer None Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 22 / 2010
Transaction ID: SA11AI-3399-99427-c
Amount of Each Receipt this Period 100.00

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

Mailing Address 2916 Maese Lane

City Las Cruces State NM Zip Code 88007-5020

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

Name of Employer Self-Employed Occupation Day Care Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 760.00

Date of Receipt 11 / 09 / 2010
Transaction ID: SA11AI-34584-99871-c
Amount of Each Receipt this Period 40.00

C. Full Name (Last, First, Middle Initial)
Mr. James Duncan, Sr.

Mailing Address 25 Tano Alto

City Santa Fe State NM Zip Code 87506-7503

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

Name of Employer none Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 02 / 2010
Transaction ID: SA11AI-3484-99682-c
Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional) ► 190.00

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

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

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

FOR LINE NUMBER: PAGE 20 / 140
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Mr. Spiro Vassilopoulos

Mailing Address 909 Rio Vista Circle SW

City Albuquerque State NM Zip Code 87105-3323

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

Name of Employer VRI,LC Occupation Geologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1885.00

Date of Receipt 11 / 05 / 2010
Transaction ID: SA11AI-35124-99803-c
 Amount of Each Receipt this Period 60.00

B. Full Name (Last, First, Middle Initial)
Mrs. Marcia Vasquez

Mailing Address 2908 Pueblo Tsankawi

City Santa Fe State NM Zip Code 87507-2530

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

Name of Employer None Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 10 / 27 / 2010
Transaction ID: SA11AI-36787-99587-c
 Amount of Each Receipt this Period 1000.00

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

Mailing Address 3 Painted Horse

City Santa Fe State NM Zip Code 87506-8298

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

Name of Employer None Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 770.00

Date of Receipt 11 / 22 / 2010
Transaction ID: SA11AI39247100028c
 Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional) ► 1110.00

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

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

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

FOR LINE NUMBER: PAGE 21 / 140
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Mr. Jim Bohlander
Mailing Address 3 Painted Horse
City Santa Fe State NM Zip Code 87506-8298
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 770.00
Date of Receipt 10 / 22 / 2010
Transaction ID: SA11AI-39247-99423-c
Amount of Each Receipt this Period 50.00

B. Full Name (Last, First, Middle Initial)
Mr. Roger Allen
Mailing Address 581 Enchanted Forrest Loop
City Alto State NM Zip Code 88312-9589
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed Occupation Consultant
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 205.00
Date of Receipt 11 / 22 / 2010
Transaction ID: SA11AI39280100008c
Amount of Each Receipt this Period 15.00

C. Full Name (Last, First, Middle Initial)
Mr. Roger Allen
Mailing Address 581 Enchanted Forrest Loop
City Alto State NM Zip Code 88312-9589
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed Occupation Consultant
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 205.00
Date of Receipt 10 / 19 / 2010
Transaction ID: SA11AI-39280-99373-c
Amount of Each Receipt this Period 15.00

SUBTOTAL of Receipts This Page (optional) ▶ 80.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 / 140
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Mr. Roger Allen

Mailing Address 581 Enchanted Forrest Loop

City Alto State NM Zip Code 88312-9589

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

Name of Employer Self-Employed Occupation Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt 11 / 09 / 2010

Transaction ID: SA11AI-39280-99884-c

Amount of Each Receipt this Period 40.00

B.

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

Mailing Address 3209 Lazy Day Drive SW

City Albuquerque State NM Zip Code 87121-6701

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

Name of Employer None Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 15 / 2010

Transaction ID: SA11AI-39557-99323-c

Amount of Each Receipt this Period 15.00

C.

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

Mailing Address 3209 Lazy Day Drive SW

City Albuquerque State NM Zip Code 87121-6701

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

Name of Employer None Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt 11 / 17 / 2010

Transaction ID: SA11AI-39557-99995-c

Amount of Each Receipt this Period 15.00

SUBTOTAL of Receipts This Page (optional) ► 70.00

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

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

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

FOR LINE NUMBER: PAGE 23 / 140
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Mr. Randy Kamradt

Mailing Address 608 W Plains Avenue

City Clovis State NM Zip Code 88101-4232

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

Name of Employer DAVTEK Corp Occupation Construction Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt 11 / 10 / 2010

Transaction ID: SA11AI-39564-99951-c

Amount of Each Receipt this Period 50.00

B. Full Name (Last, First, Middle Initial)
Mrs. Marita Noon

Mailing Address PO Box 52103

City Albuquerque State NM Zip Code 87181-2103

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

Name of Employer CARE Occupation Executive Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 265.00

Date of Receipt 10 / 18 / 2010

Transaction ID: SA11AI-39618-99353-c

Amount of Each Receipt this Period 15.00

C. Full Name (Last, First, Middle Initial)
Mrs. Marita Noon

Mailing Address PO Box 52103

City Albuquerque State NM Zip Code 87181-2103

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

Name of Employer CARE Occupation Executive Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 265.00

Date of Receipt 11 / 17 / 2010

Transaction ID: SA11AI-39618-99993-c

Amount of Each Receipt this Period 15.00

SUBTOTAL of Receipts This Page (optional) ► 80.00

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

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

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

FOR LINE NUMBER: PAGE 24 / 140
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Ms. Lesley Akers

Mailing Address 5300 Knight Road NE

City Albuquerque State NM Zip Code 87109-3109

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

Name of Employer Rio Grande Credit Union Occupation Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 22 / 2010
Transaction ID: SA11AI-39653-99747-c
Amount of Each Receipt this Period 15.00

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

Mailing Address PO Box 1037

City Silver City State NM Zip Code 88062-1037

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

Name of Employer None Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt 10 / 22 / 2010
Transaction ID: SA11AI-39750-99748-c
Amount of Each Receipt this Period 15.00

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

Mailing Address PO Box 1037

City Silver City State NM Zip Code 88062-1037

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

Name of Employer None Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 09 / 2010
Transaction ID: SA11AI-39750-99878-c
Amount of Each Receipt this Period 40.00

SUBTOTAL of Receipts This Page (optional) ▶ 70.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 140
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

A.	Full Name (Last, First, Middle Initial) Mrs. Debra White	Date of Receipt MM / DD / YYYY 11 / 12 / 2010
	Mailing Address 985 Shakespeare Lane	Transaction ID: SA11AI-39781-99976-c
	City State Zip Code Las Cruces NM 88007-4885	Amount of Each Receipt this Period 125.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer None Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 525.00	

B.	Full Name (Last, First, Middle Initial) Mr. William Kurth	Date of Receipt MM / DD / YYYY 11 / 10 / 2010
	Mailing Address 1531 Camino Cerrito SE	Transaction ID: SA11AI-39785-99953-c
	City State Zip Code Albuquerque NM 87123-4400	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Self Employed Occupation Real Estate Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 915.00	

C.	Full Name (Last, First, Middle Initial) Mr. Charles Key	Date of Receipt MM / DD / YYYY 10 / 22 / 2010
	Mailing Address 4800 Brookwood Street NE	Transaction ID: SA11AI-40103-99425-c
	City State Zip Code Albuquerque NM 87109-2808	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer UNM Occupation Professor Emeritus Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 600.00	

SUBTOTAL of Receipts This Page (optional)	▶	640.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 / 140
(check only one)

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

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

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

A. Full Name (Last, First, Middle Initial)
Mr. James Houghton

Mailing Address 4128 Dietz Farm Circle NW

City State Zip Code
Los Ranchos NM 87107-3126

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

Name of Employer Self Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 11 / 10 / 2010
Transaction ID: SA11AI-40263-99961-c
Amount of Each Receipt this Period: 100.00

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

Mailing Address 428 Sandoval Street

City State Zip Code
Santa Fe NM 87501-7312

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

Name of Employer Best Efforts Occupation Best Efforts

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 10 / 14 / 2010
Transaction ID: SA11AI-40526-99318-c
Amount of Each Receipt this Period: 5000.00

C. Full Name (Last, First, Middle Initial)
Mr. Bruce Hoover

Mailing Address 5351 Wilshire Avenue NE

City State Zip Code
Albuquerque NM 87113-1934

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

Name of Employer Business Environments Occupation Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 10 / 18 / 2010
Transaction ID: SA11AI-40531-99351-c
Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ▶ 6100.00

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

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

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

FOR LINE NUMBER: PAGE 27 / 140
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

A. Full Name (Last, First, Middle Initial)
Mr. Scott Hoover

Mailing Address 5351 Wilshire Avenue NE

City State Zip Code
Albuquerque NM 87113-1934

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

Name of Employer Business Environments Occupation Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

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

Transaction ID: SA11AI-40532-99352-c

Amount of Each Receipt this Period
1000.00

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

Mailing Address 425 Huehl Road Bldg. 3

City State Zip Code
Northbrook IL 60062-2323

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

Name of Employer Self Occupation Businessman

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

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

Transaction ID: SA11AI-40562-99604-c

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
The Honora Paul Bandy

Mailing Address 388 Road 2900

City State Zip Code
Aztec NM 87410-9712

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

Name of Employer Self-Employed Occupation Rancher

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

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

Transaction ID: SA11AI-4956-99910-c

Amount of Each Receipt this Period
40.00

SUBTOTAL of Receipts This Page (optional) ► 6040.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 140
(check only one)

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

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

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

A.

Full Name (Last, First, Middle Initial)
Mr. Mickey Barnett

Mailing Address 1616 Soplo Road SE

City Albuquerque State NM Zip Code 87123-4455

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

Name of Employer Barnett Law Firm, PA Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt 11 / 09 / 2010

Transaction ID: SA11AI-7262-99829-c

Amount of Each Receipt this Period 40.00

B.

Full Name (Last, First, Middle Initial)
Mr. Thomas O'Hare

Mailing Address PO Box 30243

City Albuquerque State NM Zip Code 87190-0243

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

Name of Employer None Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 11 / 02 / 2010

Transaction ID: SA11AI-7514-99688-c

Amount of Each Receipt this Period 40.00

C.

Full Name (Last, First, Middle Initial)
Ms. Bea Sheridan

Mailing Address 7112 Pan Am E Freeway NE Unit 377

City Albuquerque State NM Zip Code 87109-4226

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

Name of Employer Lovelace Medical Center Occupation RN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 12 / 2010

Transaction ID: SA11AI-7590-99966-c

Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional) ► 100.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 29 / 140
(check only one)

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

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

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

A.

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

Mailing Address 3613 Espejo Street NE

City Albuquerque State NM Zip Code 87111-4762

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

Name of Employer Applied Technology Associates Occupation Scientist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 530.00

Date of Receipt 10 / 22 / 2010

Transaction ID: SA11AI-7630-99745-c

Amount of Each Receipt this Period 30.00

B.

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

Mailing Address 3613 Espejo Street NE

City Albuquerque State NM Zip Code 87111-4762

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

Name of Employer Applied Technology Associates Occupation Scientist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 530.00

Date of Receipt 11 / 09 / 2010

Transaction ID: SA11AI-7630-99852-c

Amount of Each Receipt this Period 40.00

C.

Full Name (Last, First, Middle Initial)
Mrs. Marjorie Teague

Mailing Address 4910 Simon Drive NW

City Albuquerque State NM Zip Code 87114-4329

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

Name of Employer Self-Employed Occupation Lobbyist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 670.00

Date of Receipt 11 / 09 / 2010

Transaction ID: SA11AI-7860-99893-c

Amount of Each Receipt this Period 40.00

SUBTOTAL of Receipts This Page (optional) ► **110.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 30 / 140
(check only one)

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

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

A. Full Name (Last, First, Middle Initial)
Mr. Lawrence Harris

Mailing Address PO Box 1714

City Roswell State NM Zip Code 88202-1714

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

Name of Employer Self-Employed Occupation Investments

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 11 / 01 / 2010
Transaction ID: SA11AI-8210-99643-c
Amount of Each Receipt this Period: 200.00

B. Full Name (Last, First, Middle Initial)
The Honora Patrick Rogers

Mailing Address 5819 Padre Roberto Road NW

City Los Ranchos State NM Zip Code 87107-7115

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

Name of Employer Modrall, Sperling et al, P.A. Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1560.00

Date of Receipt: 11 / 09 / 2010
Transaction ID: SA11AI-8359-99850-c
Amount of Each Receipt this Period: 40.00

C. Full Name (Last, First, Middle Initial)
Mr. Arthur Teague

Mailing Address 4910 Simon Drive NW

City Albuquerque State NM Zip Code 87114-4329

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

Name of Employer Self Employed Occupation Lobbyist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 540.00

Date of Receipt: 11 / 10 / 2010
Transaction ID: SA11AI-8410-99958-c
Amount of Each Receipt this Period: 360.00

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

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 31 / 140
(check only one)

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

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

A. Full Name (Last, First, Middle Initial)
Mr. Herbert Hughes

Mailing Address 7112 Lantern Road NE

City Albuquerque State NM Zip Code 87109-2915

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

Name of Employer None Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt 11 / 09 / 2010
Transaction ID: SA11AI-8626-99837-c
Amount of Each Receipt this Period 40.00

B. Full Name (Last, First, Middle Initial)
The Honora Don Tripp, Jr.

Mailing Address PO Box 1369

City Socorro State NM Zip Code 87801-1369

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

Name of Employer Tripp's Inc Occupation Jeweler

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5630.00

Date of Receipt 11 / 09 / 2010
Transaction ID: SA11AI-8662-99890-c
Amount of Each Receipt this Period 40.00

C. Full Name (Last, First, Middle Initial)
Mr. William Moffett

Mailing Address 29 Chisholm Trail

City Santa Fe State NM Zip Code 87506-9575

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

Name of Employer None Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 26 / 2010
Transaction ID: SA11AI-8676-99552-c
Amount of Each Receipt this Period 200.00

SUBTOTAL of Receipts This Page (optional) ► 280.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 32 / 140
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)

Mr. Holm Bursum, III

Mailing Address PO Box 1457

City State Zip Code
Socorro NM 87801-1457

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

Name of Employer Occupation
First State Bank of Socorro Banker

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1600.00

Date of Receipt

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

Transaction ID: SA11AI-8708-99743-c

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Mrs. Josephine Mitchell

Mailing Address 1432 Stagecoach Road SE

City State Zip Code
Albuquerque NM 87123-4433

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

Name of Employer Occupation
None Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 630.00

Date of Receipt

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

Transaction ID: SA11AI-8710-99845-c

Amount of Each Receipt this Period

40.00

C.

Full Name (Last, First, Middle Initial)

Mrs. Nancy Hobbs

Mailing Address 1415 Catron Avenue SE

City State Zip Code
Albuquerque NM 87123-4215

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

Name of Employer Occupation
None Housewife

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

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11AI-8812-99476-c

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

240.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 33 / 140

(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Dr. James Damron

Mailing Address 31 Eagle Ridge

City State Zip Code
Santa Fe NM 87508-5907

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

Name of Employer Occupation
Santa Fe Radiology Physician

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 625.00

Date of Receipt

M M / D D / Y Y Y Y
11 / 09 / 2010

Transaction ID: SA11AI-8924-99924-c

Amount of Each Receipt this Period
40.00

B.

Full Name (Last, First, Middle Initial)
Mrs. Carol Beckett

Mailing Address 15 Pueblo Trail

City State Zip Code
Alamogordo NM 88310-9757

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

Name of Employer Occupation
None Housewife

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

Date of Receipt

M M / D D / Y Y Y Y
11 / 01 / 2010

Transaction ID: SA11AI-8951-99655-c

Amount of Each Receipt this Period
20.00

C.

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

Mailing Address 7615 Storrie Place NE

City State Zip Code
Albuquerque NM 87109-5378

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

Name of Employer Occupation
None Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 275.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 26 / 2010

Transaction ID: SA11AI-8996-99570-c

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)

110.00

TOTAL This Period (last page this line number only)

23620.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 34 / 140
(check only one)

11a 11b 11c 12
 13 14 15 16 17

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

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

A. Full Name (Last, First, Middle Initial)
Republican National Committee (tsfs)
Mailing Address 310 1st Street SE

City State Zip Code
Washington DC 20003-1885

FEC ID number of contributing federal political committee. **C** C00003418

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 390871.00

Date of Receipt: 10 / 14 / 2010
Transaction ID: SA12-2878-99303-c
Amount of Each Receipt this Period: 60500.00

B. Full Name (Last, First, Middle Initial)
Republican National Committee (tsfs)
Mailing Address 310 1st Street SE

City State Zip Code
Washington DC 20003-1885

FEC ID number of contributing federal political committee. **C** C00003418

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 390871.00

Date of Receipt: 10 / 26 / 2010
Transaction ID: SA12-2878-99810-c
Amount of Each Receipt this Period: 38000.00

C. Full Name (Last, First, Middle Initial)
Republican National Committee (tsfs)
Mailing Address 310 1st Street SE

City State Zip Code
Washington DC 20003-1885

FEC ID number of contributing federal political committee. **C** C00003418

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 390871.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA12-2878-99809-c
Amount of Each Receipt this Period: 52000.00

SUBTOTAL of Receipts This Page (optional) ► 150500.00

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

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

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

FOR LINE NUMBER: PAGE 35 / 140
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

A.

Full Name (Last, First, Middle Initial)
Republican National Committee (tsfs)
Mailing Address 310 1st Street SE
City State Zip Code
Washington DC 20003-1885
FEC ID number of contributing federal political committee. **C** C00003418
Name of Employer Occupation
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
390871.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 1 0
Transaction ID: SA12-2878-99306-c
Amount of Each Receipt this Period
1440.00
In-Kind Transfer

B.

Full Name (Last, First, Middle Initial)
Republican National Committee (tsfs)
Mailing Address 310 1st Street SE
City State Zip Code
Washington DC 20003-1885
FEC ID number of contributing federal political committee. **C** C00003418
Name of Employer Occupation
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
390871.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 1 0
Transaction ID: SA12-2878-99940-c
Amount of Each Receipt this Period
1440.00
In-Kind Transfer

SUBTOTAL of Receipts This Page (optional)	▶	2880.00
TOTAL This Period (last page this line number only)	▶	153380.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 36 / 140
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Alicia Pompa

Mailing Address 4913 Northridge Place NE

City State Zip Code
Albuquerque NM 87111-2105

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
875.86

Date of Receipt

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

Transaction ID: SA15-40326-100010-e

Amount of Each Receipt this Period
875.86

Refund of Unused Staff Expenses

SUBTOTAL of Receipts This Page (optional)	▶	875.86
TOTAL This Period (last page this line number only)	▶	875.86

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

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

A. Full Name (Last, First, Middle Initial) Targeted Creative Communications, Inc. <hr/> Mailing Address 106 S Columbus Street <hr/> City Alexandria State VA Zip Code 22314-3036 <hr/> Purpose of Disbursement Printing/Postage: Non-Alloc Mail Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-272-99578-e Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 1 0
	Amount of Each Disbursement this Period 22993.75
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) EFTPS <hr/> Mailing Address Internal Revenue Serv Center <hr/> City Ogden State UT Zip Code 84201-0001 <hr/> Purpose of Disbursement 941 Taxes: FEA Employees Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-20457-99335-e Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 1 0
	Amount of Each Disbursement this Period 2606.14
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Mrs. Marjorie Teague <hr/> Mailing Address 4910 Simon Drive NW <hr/> City Albuquerque State NM Zip Code 87114-4329 <hr/> Purpose of Disbursement Reimbursement: meals and postage for meeting Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-7860-99439-e Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 1 0
	Amount of Each Disbursement this Period 309.04
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

25908.93

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

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

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

FOR LINE NUMBER: (check only one)

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

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

<p>A. Full Name (Last, First, Middle Initial) Perennials</p> <p>Mailing Address 6001 San Mateo Boulevard NE</p> <p>City Albuquerque State NM Zip Code 87109-3397</p> <p>Purpose of Disbursement Meals for County Chair meeting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-40541-96740-V</p> <p>Date of Disbursement 10 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 285.37</p> <p>[MEMO ITEM] Subitemization of Marjorie Teague (10/22/10)</p>
<p>B. Full Name (Last, First, Middle Initial) Ms. Ana Maria Salazar</p> <p>Mailing Address 2948 Missouri Avenue</p> <p>City Las Cruces State NM Zip Code 88011-4814</p> <p>Purpose of Disbursement Political Consulting-FEA</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-40432-99742-e</p> <p>Date of Disbursement 10 / 31 / 2010</p> <p>Amount of Each Disbursement this Period 2000.00</p>
<p>C. Full Name (Last, First, Middle Initial) Taxation & Revenue Department</p> <p>Mailing Address PO Box 25128</p> <p>City Santa Fe State NM Zip Code 87504-5128</p> <p>Purpose of Disbursement CRS - September (FEA Employees)</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-18771-99988-e</p> <p>Date of Disbursement 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 473.78</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2473.78

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

<p>A. Full Name (Last, First, Middle Initial) Linda Bartelsmeyer</p> <p>Mailing Address 5983 Moon View Drive</p> <p>City Las Cruces State NM Zip Code 88012-7164</p> <p>Purpose of Disbursement Administrative/Salary/Overhead: 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-40324-100016-e</p> <p>Date of Disbursement</p> <p>11 / 15 / 2010</p> <p>Amount of Each Disbursement this Period</p> <p>1046.64</p> <p>001 Category/Type</p>
<p>B. Full Name (Last, First, Middle Initial) Linda Bartelsmeyer</p> <p>Mailing Address 5983 Moon View Drive</p> <p>City Las Cruces State NM Zip Code 88012-7164</p> <p>Purpose of Disbursement Salary- FEA</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-40324-99737-e</p> <p>Date of Disbursement</p> <p>10 / 31 / 2010</p> <p>Amount of Each Disbursement this Period</p> <p>1046.63</p> <p>001 Category/Type</p>
<p>C. Full Name (Last, First, Middle Initial) EFTPS</p> <p>Mailing Address Internal Revenue Serv Center</p> <p>City Ogden State UT Zip Code 84201-0001</p> <p>Purpose of Disbursement 941 Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-20457-100021-e</p> <p>Date of Disbursement</p> <p>11 / 15 / 2010</p> <p>Amount of Each Disbursement this Period</p> <p>2606.14</p> <p>001 Category/Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

4699.41

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

<p>A. Full Name (Last, First, Middle Initial) Alicia Pompa</p> <p>Mailing Address 4913 Northridge Place NE</p> <p>City Albuquerque State NM Zip Code 87111-2105</p> <p>Purpose of Disbursement Salary- FEA</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-40326-99738-e</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="998.64"/></p> <p>Category/Type: <input type="text" value="001"/></p>
<p>B. Full Name (Last, First, Middle Initial) Ms. Ana Maria Salazar</p> <p>Mailing Address 2948 Missouri Avenue</p> <p>City Las Cruces State NM Zip Code 88011-4814</p> <p>Purpose of Disbursement Reimbursements: under \$200</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-40432-99355-e</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="567.96"/></p> <p>Category/Type: <input type="text" value="001"/></p>
<p>C. Full Name (Last, First, Middle Initial) Fiesta Del Norte One, LLC</p> <p>Mailing Address C/0 NAI Horizon Real Estate Group 2944 North 44th St, Ste 200</p> <p>City Phoenix State AZ Zip Code 85018</p> <p>Purpose of Disbursement Administrative/Salary/Overhead: Rent</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-25551-99629-e</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2174.76"/></p> <p>Category/Type: <input type="text" value="001"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

<p>A. Full Name (Last, First, Middle Initial) Comcast Cable</p> <p>Mailing Address PO Box 34744</p> <p>City Seattle State WA Zip Code 98124-1744</p> <p>Purpose of Disbursement Administrative/Salary/Overhead: Internet</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-40385-99866-e</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="102.07"/></p> <p><input type="text" value="001"/> Category/Type</p>
<p>B. Full Name (Last, First, Middle Initial) Partida & Associates</p> <p>Mailing Address 3212 Smith Street Suite 206</p> <p>City Houston State TX Zip Code 77006-6622</p> <p>Purpose of Disbursement Printing and Production: Non-Alloc Mail</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-40543-99456-e</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="29528.02"/></p> <p><input type="text" value="001"/> Category/Type</p>
<p>C. Full Name (Last, First, Middle Initial) Scott Zacheus</p> <p>Mailing Address 406 E Arriba Drive</p> <p>City Hobbs State NM Zip Code 88240-3433</p> <p>Purpose of Disbursement Staff 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-40377-99508-e</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1500.00"/></p> <p><input type="text" value="001"/> Category/Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 42 / 140

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

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

A. Full Name (Last, First, Middle Initial) Linda Bartelsmeyer <hr/> Mailing Address 5983 Moon View Drive <hr/> City Las Cruces State NM Zip Code 88012-7164 <hr/> Purpose of Disbursement Reimbursements: under \$200 Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-40324-99616-e Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 1 0
	Amount of Each Disbursement this Period 363.61
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Postmaster <hr/> Mailing Address 6255 San Antonio Drive NE <hr/> City Albuquerque State NM Zip Code 87109-9211 <hr/> Purpose of Disbursement Administrative/Salary/Overhead: Stamps Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-7798-99945-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 1 0
	Amount of Each Disbursement this Period 440.00
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Scott Zacheus <hr/> Mailing Address 406 E Arriba Drive <hr/> City Hobbs State NM Zip Code 88240-3433 <hr/> Purpose of Disbursement Administrative/Salary/Overhead: Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-40377-100020-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 1 0
	Amount of Each Disbursement this Period 1028.91
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

1832.52

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

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

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

FOR LINE NUMBER: (check only one)

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

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

<p>A. Full Name (Last, First, Middle Initial) Ms. Kial Vidic</p> <p>Mailing Address 1230 Mahood Road</p> <p>City West Sunbury State PA Zip Code 16061-2020</p> <p>Purpose of Disbursement Salary- FEA Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-40334-99740-e Date of Disbursement 10 / 31 / 2010</p> <p>Amount of Each Disbursement this Period 1149.51</p> <p>Category/Type 001</p>
<p>B. Full Name (Last, First, Middle Initial) Robert Salazar</p> <p>Mailing Address PO Box 59</p> <p>City Youngsville State NM Zip Code 87064-0059</p> <p>Purpose of Disbursement Staff Expenses: under \$200 and mileage Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-40333-99511-e Date of Disbursement 10 / 25 / 2010</p> <p>Amount of Each Disbursement this Period 1500.00</p> <p>Category/Type 001</p>
<p>C. Full Name (Last, First, Middle Initial) Walmart</p> <p>Mailing Address 4500 N Main Street</p> <p>City Roswell State NM Zip Code 88201-0305</p> <p>Purpose of Disbursement Check Cashing Fee Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-40411-96768-V Date of Disbursement 10 / 27 / 2010</p> <p>Amount of Each Disbursement this Period 6.43</p> <p>Category/Type 001</p> <p>[MEMO ITEM] Subitemization of Robert Salazar (10/25/10)</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2649.51

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Roman's Quality Movers	Transaction ID: SB21B-40315-96764-V
	Mailing Address 1909 Golf Course Road SE	Date of Disbursement MM / DD / YYYY 11 / 07 / 2010
	City State Zip Code Rio Rancho NM 87124-1611	Amount of Each Disbursement this Period 195.27
	Purpose of Disbursement: Moving Expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Category/Type: 001	[MEMO ITEM] Subitemization of Robert Salazar (10/25/10)
B.	Full Name (Last, First, Middle Initial) Sigma Chi	Transaction ID: SB21B-40640-99821-e
	Mailing Address 1855 Sigma Chi Road NE	Date of Disbursement MM / DD / YYYY 11 / 08 / 2010
	City State Zip Code Albuquerque NM 87106-3816	Amount of Each Disbursement this Period 2000.00
	Purpose of Disbursement: Paid volunteer Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Category/Type: 001	
C.	Full Name (Last, First, Middle Initial) Scott Zacheus	Transaction ID: SB21B-40377-99741-e
	Mailing Address 406 E Arriba Drive	Date of Disbursement MM / DD / YYYY 10 / 31 / 2010
	City State Zip Code Hobbs NM 88240-3433	Amount of Each Disbursement this Period 1028.92
	Purpose of Disbursement: Salary- FEA Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Category/Type: 001	

SUBTOTAL of Disbursements This Page (optional) ▶

3028.92

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 45 / 140

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

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

A. Full Name (Last, First, Middle Initial) Qwest <hr/> Mailing Address PO Box 29039 <hr/> City Phoenix State AZ Zip Code 85038-9039 <hr/> Purpose of Disbursement Administrative/Salary/Overhead: Phones Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-19150-99789-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 4 / 2 0 1 0
	Amount of Each Disbursement this Period 514.46
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B. Full Name (Last, First, Middle Initial) Ms. Ana Maria Salazar <hr/> Mailing Address 2948 Missouri Avenue <hr/> City Las Cruces State NM Zip Code 88011-4814 <hr/> Purpose of Disbursement Staff Expenses Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-40432-99512-e Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 1 0
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C. Full Name (Last, First, Middle Initial) PNM <hr/> Mailing Address PO Box 17970 <hr/> City Denver State CO Zip Code 80217-0970 <hr/> Purpose of Disbursement Utilities: Electric Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-23373-99869-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 9 / 2 0 1 0
	Amount of Each Disbursement this Period 194.48
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	1708.94
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 46 / 140

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

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

A.	Full Name (Last, First, Middle Initial) Lincoln Strategy Group LLC Mailing Address 80 E Rio Salado Parkway Suite 814 City Tempe State AZ Zip Code 85281-9111 Purpose of Disbursement Consulting: Non-Alloc Mail Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-39383-99636-e Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>0</td><td>1</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: center;">440.00</td> </tr> </table> Category/Type <table border="1"> <tr> <td style="text-align: center;">001</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	1	/	2	0	1	0	440.00	001
M	M	/	D	D	/	Y	Y	Y	Y															
1	1	/	0	1	/	2	0	1	0															
440.00																								
001																								
B.	Full Name (Last, First, Middle Initial) North Rim International, Inc. dba Southwest Mail Center Mailing Address 2527 Comanche Road NE City Albuquerque State NM Zip Code 87107-4720 Purpose of Disbursement Printing/processing: Non-Alloc Mail Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-40503-99627-e Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td>/</td><td>2</td><td>9</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: center;">628.92</td> </tr> </table> Category/Type <table border="1"> <tr> <td style="text-align: center;">001</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	2	9	/	2	0	1	0	628.92	001
M	M	/	D	D	/	Y	Y	Y	Y															
1	0	/	2	9	/	2	0	1	0															
628.92																								
001																								
C.	Full Name (Last, First, Middle Initial) Secretary of State Mailing Address 325 Don Gaspar Avenue Suite 300 City Santa Fe State NM Zip Code 87503-0001 Purpose of Disbursement Voter Lists Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-2880-99414-e Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td>/</td><td>2</td><td>1</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: center;">125.00</td> </tr> </table> Category/Type <table border="1"> <tr> <td style="text-align: center;">001</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	2	1	/	2	0	1	0	125.00	001
M	M	/	D	D	/	Y	Y	Y	Y															
1	0	/	2	1	/	2	0	1	0															
125.00																								
001																								

SUBTOTAL of Disbursements This Page (optional) ▶

1193.92

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

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

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

FOR LINE NUMBER: (check only one)

PAGE 47 / 140

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

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

<p>A. Full Name (Last, First, Middle Initial) Ms. Julia Ruetten</p> <p>Mailing Address 6110 Academy Road NE Apt. 86</p> <p>City Albuquerque State NM Zip Code 87109-2800</p> <p>Purpose of Disbursement Administrative/Salary/Overhead: 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-40307-100014-e Date of Disbursement 11 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 1620.18</p> <p>001 Category/Type</p>
<p>B. Full Name (Last, First, Middle Initial) Wells Fargo Bank, NA</p> <p>Mailing Address 7412 Jefferson Street NE</p> <p>City Albuquerque State NM Zip Code 87109-4336</p> <p>Purpose of Disbursement Bank Fees Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-39724-100045-e Date of Disbursement 11 / 05 / 2010</p> <p>Amount of Each Disbursement this Period 22.47</p> <p>001 Category/Type</p>
<p>C. Full Name (Last, First, Middle Initial) EFTPS</p> <p>Mailing Address Internal Revenue Serv Center</p> <p>City Ogden State UT Zip Code 84201-0001</p> <p>Purpose of Disbursement 941 Taxes- FEA Employees Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-20457-99811-e Date of Disbursement 10 / 31 / 2010</p> <p>Amount of Each Disbursement this Period 2606.16</p> <p>001 Category/Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

4248.81

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

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

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

FOR LINE NUMBER: (check only one)

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

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

A. Full Name (Last, First, Middle Initial) Ms. Kial Vidic <hr/> Mailing Address 1230 Mahood Road <hr/> City West Sunbury State PA Zip Code 16061-2020 <hr/> Purpose of Disbursement Reimbursement: Mileage Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-40334-100006-e Date of Disbursement 11 / 19 / 2010 <hr/> Amount of Each Disbursement this Period 300.00
	001 Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:
B. Full Name (Last, First, Middle Initial) Alicia Pompa <hr/> Mailing Address 4913 Northridge Place NE <hr/> City Albuquerque State NM Zip Code 87111-2105 <hr/> Purpose of Disbursement Staff Expenses: under \$200 and mileage (875.86 returned) Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-40326-99509-e Date of Disbursement 10 / 25 / 2010 <hr/> Amount of Each Disbursement this Period 1500.00
	001 Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:
C. Full Name (Last, First, Middle Initial) Joshua Weber <hr/> Mailing Address 1241 Orchard Park Circle <hr/> City Pflugerville State TX Zip Code 78660-2431 <hr/> Purpose of Disbursement Salary- FEA Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-40308-99736-e Date of Disbursement 10 / 31 / 2010 <hr/> Amount of Each Disbursement this Period 1461.97
	001 Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

3261.97

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Scott Zacheus</p> <p>Mailing Address 406 E Arriba Drive</p> <p>City Hobbs State NM Zip Code 88240-3433</p> <p>Purpose of Disbursement Reimbursements: Under \$200</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-40377-99358-e</p> <p>Date of Disbursement 10 / 18 / 2010</p> <p>Amount of Each Disbursement this Period 281.05</p> <p>001 Category/Type</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Scott Zacheus</p> <p>Mailing Address 406 E Arriba Drive</p> <p>City Hobbs State NM Zip Code 88240-3433</p> <p>Purpose of Disbursement Reimbursement: Hotel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-40377-99800-e</p> <p>Date of Disbursement 11 / 05 / 2010</p> <p>Amount of Each Disbursement this Period 244.74</p> <p>001 Category/Type</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Comfort Suites</p> <p>Mailing Address 3348 Cerrillos Road</p> <p>City Santa Fe State NM Zip Code 87507-2902</p> <p>Purpose of Disbursement Hotel Room</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-40639-96751-V</p> <p>Date of Disbursement 11 / 03 / 2010</p> <p>Amount of Each Disbursement this Period 244.74</p> <p>[MEMO ITEM] Subitemization of Scott Zacheus (11/05/10)</p>

SUBTOTAL of Disbursements This Page (optional) ▶

525.79

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

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

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

FOR LINE NUMBER: (check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Wells Fargo Bank, NA	Transaction ID: SB21B-39724-99808-e
	Mailing Address 7412 Jefferson Street NE	Date of Disbursement 10 / 31 / 2010
	City Albuquerque State NM Zip Code 87109-4336	Amount of Each Disbursement this Period 62.57
	Purpose of Disbursement Bank Fees Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) NM Department of Workforce Solutions	Transaction ID: SB21B-2868-99444-e
	Mailing Address PO Box 2281	Date of Disbursement 10 / 22 / 2010
	City Albuquerque State NM Zip Code 87103-2281	Amount of Each Disbursement this Period 1138.50
	Purpose of Disbursement SUTA 3Q 2010 Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Comfort Suites	Transaction ID: SB21B-40639-96752-V
	Mailing Address 3348 Cerrillos Road	Date of Disbursement 10 / 28 / 2010
	City Santa Fe State NM Zip Code 87507-2902	Amount of Each Disbursement this Period 407.90
	Purpose of Disbursement Hotel Room Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]
Subitemization of Scott Zacheus (10/29/10)

SUBTOTAL of Disbursements This Page (optional) ▶

1201.07

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

A. Full Name (Last, First, Middle Initial) Scott Zacheus <hr/> Mailing Address 406 E Arriba Drive <hr/> City Hobbs State NM Zip Code 88240-3433 <hr/> Purpose of Disbursement Reimbursement: Hotel Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-40377-99625-e Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 1 0
	Amount of Each Disbursement this Period 407.90
	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Verizon Wireless <hr/> Mailing Address PO Box 660108 <hr/> City Dallas State TX Zip Code 75266-0108 <hr/> Purpose of Disbursement Cell Phones Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-6914-99662-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 207.32
	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Postmaster <hr/> Mailing Address 6255 San Antonio Drive NE <hr/> City Albuquerque State NM Zip Code 87109-9211 <hr/> Purpose of Disbursement Administrative/Salary/Overhead: Stamps Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-7798-99981-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 6 / 2 0 1 0
	Amount of Each Disbursement this Period 308.00
	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

923.22

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 52 / 140

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

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

A.	Full Name (Last, First, Middle Initial) Hilton Albuquerque Mailing Address 1901 University Boulevard NE City Albuquerque State NM Zip Code 87102-1713 Purpose of Disbursement Election Night Returns watch Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-23477-99666-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 1 0	Amount of Each Disbursement this Period 6459.64 Category/Type 001
B.	Full Name (Last, First, Middle Initial) FedEx Kinko's Mailing Address 6220 San Mateo Boulevard NE Suite E City Albuquerque State NM Zip Code 87109-3314 Purpose of Disbursement Administrative/Salary/Overhead: Postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-24806-96739-V Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 1 0	Amount of Each Disbursement this Period 28.35 Category/Type 001
C.	Full Name (Last, First, Middle Initial) Miss Tiffany Kardeen Mailing Address 11804 Palo Duro Avenue NE City Albuquerque State NM Zip Code 87111-4145 Purpose of Disbursement Reimbursement: Shipping Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-34571-99430-e Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 1 0	Amount of Each Disbursement this Period 28.35 Category/Type 001

[MEMO ITEM]
Subitemization of Tiffany Kardeen (10/22/10)

SUBTOTAL of Disbursements This Page (optional) ▶

6487.99

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 53 / 140

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

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

<p>A. Full Name (Last, First, Middle Initial) Mr. Ash Wright</p> <p>Mailing Address 6001 San Mateo Boulevard NE Suite 1B</p> <p>City Albuquerque State NM Zip Code 87109-3447</p> <p>Purpose of Disbursement Reimbursements: under \$200 and itemized</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-40310-99612-e Date of Disbursement 10 / 28 / 2010</p> <p>Amount of Each Disbursement this Period 1373.89</p> <p>001 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) FedEx Kinko's</p> <p>Mailing Address 6220 San Mateo Boulevard NE Suite E</p> <p>City Albuquerque State NM Zip Code 87109-3314</p> <p>Purpose of Disbursement Administrative/Salary/Overhead: Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-24806-96745-V Date of Disbursement 10 / 25 / 2010</p> <p>Amount of Each Disbursement this Period 25.00</p> <p>001 Category/ Type</p> <p>[MEMO ITEM] Subitemization of Ash Wright (10/28/10)</p>
<p>C. Full Name (Last, First, Middle Initial) Sam's Club</p> <p>Mailing Address 1421 N Renaissance Boulevard NE</p> <p>City Albuquerque State NM Zip Code 87107-7018</p> <p>Purpose of Disbursement Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-39091-96741-V Date of Disbursement 10 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 42.80</p> <p>001 Category/ Type</p> <p>[MEMO ITEM] Subitemization of Ash Wright (10/28/10)</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1373.89

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Sam's Club	Transaction ID: SB21B-39091-96742-V
	Mailing Address 1421 N Renaissance Boulevard NE	Date of Disbursement 10 / 23 / 2010
	City Albuquerque State NM Zip Code 87107-7018	Amount of Each Disbursement this Period 76.15
	Purpose of Disbursement Volunteer Food	[MEMO ITEM] Subitemization of Ash Wright (10/28/10)
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Sam's Club	Transaction ID: SB21B-39091-96743-V
	Mailing Address 1421 N Renaissance Boulevard NE	Date of Disbursement 10 / 25 / 2010
	City Albuquerque State NM Zip Code 87107-7018	Amount of Each Disbursement this Period 275.90
	Purpose of Disbursement Volunteer prizes and office supplies	[MEMO ITEM] Subitemization of Ash Wright (10/28/10)
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Hotwire	Transaction ID: SB21B-40564-96746-V
	Mailing Address 655 Montgomery Street Suite 600	Date of Disbursement 10 / 28 / 2010
	City San Francisco State CA Zip Code 94111-2627	Amount of Each Disbursement this Period 536.63
	Purpose of Disbursement Hotel Rooms	[MEMO ITEM] Subitemization of Ash Wright (10/28/10)
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional) ► **0.00**

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

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

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

FOR LINE NUMBER: (check only one)

PAGE 55 / 140

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

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

A. Full Name (Last, First, Middle Initial) Hotwire <hr/> Mailing Address 655 Montgomery Street Suite 600 <hr/> City San Francisco State CA Zip Code 94111-2627 <hr/> Purpose of Disbursement Hotel Room Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-40564-96750-V Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 1 0
	Amount of Each Disbursement this Period 241.73
	[MEMO ITEM] Subitemization of Ash Wright (11/03/10)
	Category/Type 001
B. Full Name (Last, First, Middle Initial) Mr. Ash Wright <hr/> Mailing Address 6001 San Mateo Boulevard NE Suite 1B <hr/> City Albuquerque State NM Zip Code 87109-3447 <hr/> Purpose of Disbursement Reimbursements: Hotel and under \$200 Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-40310-99771-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 1 0
	Amount of Each Disbursement this Period 616.77
	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Direct Mail Systems, Inc. <hr/> Mailing Address 12450 Automobile Boulevard <hr/> City Clearwater State FL Zip Code 33762-4427 <hr/> Purpose of Disbursement Postage and Mail Services Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-13349-99982-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 6 / 2 0 1 0
	Amount of Each Disbursement this Period 2124.32
	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

2741.09

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 56 / 140

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

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

<p>A. Full Name (Last, First, Middle Initial) All Type Printing</p> <p>Mailing Address 4835 Erin Street NE</p> <p>City Albuquerque State NM Zip Code 87109-3063</p> <p>Purpose of Disbursement Postage: Non-Allocable Mail</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-20812-99302-e</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="8416.17"/></p>
<p>B. Full Name (Last, First, Middle Initial) Santa Fe County Clerk</p> <p>Mailing Address 102 Grant Avenue</p> <p>City Santa Fe State NM Zip Code 87501-2061</p> <p>Purpose of Disbursement Voter Lists</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-340-99389-e</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="200.00"/></p>
<p>C. Full Name (Last, First, Middle Initial) NM Department of Finance and Administration</p> <p>Mailing Address Battan Memorial Building</p> <p>City Santa Fe State NM Zip Code 87503-0001</p> <p>Purpose of Disbursement Reimbursement: Records Request Information</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-40536-96794-V</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="750.25"/></p> <p>[MEMO ITEM] Subitemization of Marco Gonzales (10/22/10)</p>

SUBTOTAL of Disbursements This Page (optional) ▶

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

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

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

FOR LINE NUMBER: (check only one)

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

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

A. Full Name (Last, First, Middle Initial) Mr. Marco Gonzales <hr/> Mailing Address 1201 Bishops Lodge Road <hr/> City Santa Fe State NM Zip Code 87501-6900 <hr/> Purpose of Disbursement Reimbursement: Records Request Information Candidate Name	Transaction ID: SB21B-23389-99448-e Date of Disbursement 10 / 22 / 2010 <hr/> Amount of Each Disbursement this Period 750.25		
		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type: 001	
		Full Name (Last, First, Middle Initial) Ms. Kial Vidic <hr/> Mailing Address 1230 Mahood Road <hr/> City West Sunbury State PA Zip Code 16061-2020 <hr/> Purpose of Disbursement Reimbursements: under \$200 Candidate Name	
B. Full Name (Last, First, Middle Initial) Ms. Kial Vidic <hr/> Mailing Address 1230 Mahood Road <hr/> City West Sunbury State PA Zip Code 16061-2020 <hr/> Purpose of Disbursement Reimbursements: under \$200 Candidate Name	Transaction ID: SB21B-40334-99623-e Date of Disbursement 10 / 29 / 2010 <hr/> Amount of Each Disbursement this Period 556.30		
		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type: 001	
		Full Name (Last, First, Middle Initial) Robert Salazar <hr/> Mailing Address PO Box 59 <hr/> City Youngsville State NM Zip Code 87064-0059 <hr/> Purpose of Disbursement Reimbursements: itemized or below \$200 Candidate Name	
C. Full Name (Last, First, Middle Initial) Robert Salazar <hr/> Mailing Address PO Box 59 <hr/> City Youngsville State NM Zip Code 87064-0059 <hr/> Purpose of Disbursement Reimbursements: itemized or below \$200 Candidate Name	Transaction ID: SB21B-40333-99615-e Date of Disbursement 10 / 28 / 2010 <hr/> Amount of Each Disbursement this Period 815.08		
		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type: 001	

SUBTOTAL of Disbursements This Page (optional) ▶

2121.63

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

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

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

FOR LINE NUMBER: (check only one)

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

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

<p>A. Full Name (Last, First, Middle Initial) Walmart</p> <p>Mailing Address 4500 N Main Street</p> <p>City Roswell State NM Zip Code 88201-0305</p> <p>Purpose of Disbursement Volunteer food</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-40411-96747-V</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="17"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="283.33"/></p> <p>[MEMO ITEM] Subitemization of Robert Salazar (10/28/10)</p>
<p>B. Full Name (Last, First, Middle Initial) Hampton Inn</p> <p>Mailing Address 2350 E Griggs Avenue</p> <p>City Las Cruces State NM Zip Code 88001-2641</p> <p>Purpose of Disbursement Volunteer Hotel Rooms</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-40542-99455-e</p> <p>Date of Disbursement</p> <p><input type="text" value="10"/> <input type="text" value="25"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3611.64"/></p>
<p>C. Full Name (Last, First, Middle Initial) Linda Bartelsmeyer</p> <p>Mailing Address 5983 Moon View Drive</p> <p>City Las Cruces State NM Zip Code 88012-7164</p> <p>Purpose of Disbursement Staff 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-40324-99510-e</p> <p>Date of Disbursement</p> <p><input type="text" value="10"/> <input type="text" value="25"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1500.00"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

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

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

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

FOR LINE NUMBER: (check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Ms. Ana Maria Salazar	Transaction ID: SB21B-40432-99773-e
	Mailing Address 2948 Missouri Avenue	Date of Disbursement MM / DD / YYYY 11 / 03 / 2010
	City Las Cruces State NM Zip Code 88011-4814	Amount of Each Disbursement this Period 575.99
	Purpose of Disbursement Reimbursements: Mileage and under \$200 Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Fiesta Del Norte One, LLC	Transaction ID: SB21B-25551-99824-e
	Mailing Address C/O NAI Horizon Real Estate Group 2944 North 44th St, Ste 200	Date of Disbursement MM / DD / YYYY 11 / 09 / 2010
	City Phoenix State AZ Zip Code 85018	Amount of Each Disbursement this Period 100.58
	Purpose of Disbursement Administrative/Salary/Overhead: Key Fee Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Joshua Weber	Transaction ID: SB21B-40308-100015-e
	Mailing Address 1241 Orchard Park Circle	Date of Disbursement MM / DD / YYYY 11 / 15 / 2010
	City Pflugerville State TX Zip Code 78660-2431	Amount of Each Disbursement this Period 1461.97
	Purpose of Disbursement Administrative/Salary/Overhead: Salary Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	2138.54
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

PAGE 60 / 140

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

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

A.	Full Name (Last, First, Middle Initial) Colfax County Clerk Mailing Address PO Box 159 City Raton State NM Zip Code 87740-0159 Purpose of Disbursement Voter Lists Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB21B-6920-99386-e Date of Disbursement 10 / 20 / 2010 Amount of Each Disbursement this Period 40.00 001 Category/ Type	
B.	Full Name (Last, First, Middle Initial) Targeted Creative Communications, Inc. Mailing Address 106 S Columbus Street City Alexandria State VA Zip Code 22314-3036 Purpose of Disbursement Printing and Postage: Non-Alloc Mail Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB21B-272-99451-e Date of Disbursement 10 / 25 / 2010 Amount of Each Disbursement this Period 12003.14 001 Category/ Type	
C.	Full Name (Last, First, Middle Initial) Ms. Julia Ruetten Mailing Address 6110 Academy Road NE Apt. 86 City Albuquerque State NM Zip Code 87109-2800 Purpose of Disbursement Reimbursement: Office Supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB21B-40307-99359-e Date of Disbursement 10 / 18 / 2010 Amount of Each Disbursement this Period 41.30 001 Category/ Type	

SUBTOTAL of Disbursements This Page (optional)	12084.44
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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

A. Full Name (Last, First, Middle Initial) Mesa Detection Agency, Inc. <hr/> Mailing Address PO Box 27561 <hr/> City Albuquerque State NM Zip Code 87125-7561 <hr/> Purpose of Disbursement Administrative/Salary/Overhead: Security Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-40567-99639-e Date of Disbursement 11 / 01 / 2010
	Amount of Each Disbursement this Period 2047.98
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Hampton Inn <hr/> Mailing Address 2350 E Griggs Avenue <hr/> City Las Cruces State NM Zip Code 88001-2641 <hr/> Purpose of Disbursement Volunteer Hotel Rooms Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-40542-99614-e Date of Disbursement 10 / 28 / 2010
	Amount of Each Disbursement this Period 1203.88
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Robert Salazar <hr/> Mailing Address PO Box 59 <hr/> City Youngsville State NM Zip Code 87064-0059 <hr/> Purpose of Disbursement Salary- FEA Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-40333-99739-e Date of Disbursement 10 / 31 / 2010
	Amount of Each Disbursement this Period 1154.37
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

4406.23

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 62 / 140

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

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

A.	Full Name (Last, First, Middle Initial) Qwest Business Services <hr/> Mailing Address PO Box 52187 <hr/> City Phoenix State AZ Zip Code 85072-2187 <hr/> Purpose of Disbursement Administrative/Salary/Overhead: Phones Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-39854-99659-e Date of Disbursement 11 / 02 / 2010 <hr/> Amount of Each Disbursement this Period 653.38
B.	Full Name (Last, First, Middle Initial) McMillan New Mexico Heritage Foundation <hr/> Mailing Address 500 4th Street NW Suite 1000 <hr/> City Albuquerque State NM Zip Code 87102-2186 <hr/> Purpose of Disbursement Rent- November Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-22986-99667-e Date of Disbursement 11 / 02 / 2010 <hr/> Amount of Each Disbursement this Period 2150.00
C.	Full Name (Last, First, Middle Initial) Targeted Creative Communications, Inc. <hr/> Mailing Address 106 S Columbus Street <hr/> City Alexandria State VA Zip Code 22314-3036 <hr/> Purpose of Disbursement Printing/Postage: Non-Alloc Mail Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-272-99596-e Date of Disbursement 10 / 28 / 2010 <hr/> Amount of Each Disbursement this Period 7495.70

SUBTOTAL of Disbursements This Page (optional) ▶

10299.08

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

A. Full Name (Last, First, Middle Initial) Ms. Julia Ruetten <hr/> Mailing Address 6110 Academy Road NE Apt. 86 <hr/> City Albuquerque State NM Zip Code 87109-2800 <hr/> Purpose of Disbursement Salary- FEA Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-40307-99735-e Date of Disbursement 10 / 31 / 2010
	Amount of Each Disbursement this Period 1620.18
	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) EFTPS <hr/> Mailing Address Internal Revenue Serv Center <hr/> City Ogden State UT Zip Code 84201-0001 <hr/> Purpose of Disbursement 940 taxes 3Q 2010 (FEA Employees) Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-20457-99985-e Date of Disbursement 10 / 15 / 2010
	Amount of Each Disbursement this Period 288.00
	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Alicia Pompa <hr/> Mailing Address 4913 Northridge Place NE <hr/> City Albuquerque State NM Zip Code 87111-2105 <hr/> Purpose of Disbursement Reimbursement: Under \$200 Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-40326-99356-e Date of Disbursement 10 / 18 / 2010
	Amount of Each Disbursement this Period 91.28
	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

1999.46

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

<p>A. Full Name (Last, First, Middle Initial) Mr. Ash Wright</p> <p>Mailing Address 6001 San Mateo Boulevard NE Suite 1B</p> <p>City Albuquerque State NM Zip Code 87109-3447</p> <p>Purpose of Disbursement Reimbursement: Office Depot (see below) and other under \$200</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-40310-99360-e Date of Disbursement 10 / 18 / 2010</p> <p>Amount of Each Disbursement this Period 235.44</p> <p>001 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Office Depot</p> <p>Mailing Address 1405 N Renaissance Boulevard NE</p> <p>City Albuquerque State NM Zip Code 87107-7006</p> <p>Purpose of Disbursement Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-40410-96738-V Date of Disbursement 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 216.22</p> <p>001 Category/ Type</p> <p>[MEMO ITEM] Subitemization of Ash Wright (10/18/10)</p>
<p>C. Full Name (Last, First, Middle Initial) Robert Salazar</p> <p>Mailing Address PO Box 59</p> <p>City Youngsville State NM Zip Code 87064-0059</p> <p>Purpose of Disbursement Reimbursements: Under \$200</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-40333-99357-e Date of Disbursement 10 / 18 / 2010</p> <p>Amount of Each Disbursement this Period 31.95</p> <p>001 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

267.39

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

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

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

FOR LINE NUMBER: (check only one)

PAGE 65 / 140

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

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

A.	Full Name (Last, First, Middle Initial) Joshua Weber Mailing Address 1241 Orchard Park Circle City Pflugerville State TX Zip Code 78660-2431 Purpose of Disbursement Reimbursements: mileage and phone use Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-40308-99622-e Date of Disbursement 10 / 29 / 2010 Amount of Each Disbursement this Period 188.50 001 Category/Type
B.	Full Name (Last, First, Middle Initial) Ms. Julia Ruetten Mailing Address 6110 Academy Road NE Apt. 86 City Albuquerque State NM Zip Code 87109-2800 Purpose of Disbursement Reimbursement: Postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-40307-99984-e Date of Disbursement 11 / 16 / 2010 Amount of Each Disbursement this Period 36.68 001 Category/Type
C.	Full Name (Last, First, Middle Initial) Wells Fargo Bank, NA Mailing Address 7412 Jefferson Street NE City Albuquerque State NM Zip Code 87109-4336 Purpose of Disbursement Bank Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-39724-100044-e Date of Disbursement 10 / 21 / 2010 Amount of Each Disbursement this Period 3.00 001 Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶

228.18

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

<p>A. Full Name (Last, First, Middle Initial) PNM</p> <p>Mailing Address PO Box 17970</p> <p>City Denver State CO Zip Code 80217-0970</p> <p>Purpose of Disbursement Utilities: Electricity</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-23373-100007-e Date of Disbursement 11 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 16.86</p> <p>001 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) US Airways</p> <p>Mailing Address 799 Hanes Mall Boulevard</p> <p>City Winston Salem State NC Zip Code 27103-5637</p> <p>Purpose of Disbursement Flights for deployments</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-38899-99399-e Date of Disbursement 10 / 21 / 2010</p> <p>Amount of Each Disbursement this Period 4876.80</p> <p>001 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Colfax County Clerk</p> <p>Mailing Address PO Box 159</p> <p>City Raton State NM Zip Code 87740-0159</p> <p>Purpose of Disbursement Voter Lists</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-6920-99388-e Date of Disbursement 10 / 20 / 2010</p> <p>Amount of Each Disbursement this Period 60.00</p> <p>001 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

4953.66

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 67 / 140

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

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

<p>A. Full Name (Last, First, Middle Initial) Robert Salazar</p> <p>Mailing Address PO Box 59</p> <p>City Youngsville State NM Zip Code 87064-0059</p> <p>Purpose of Disbursement Administrative/Salary/Overhead: 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-40333-100018-e</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1154.38"/></p> <p>Category/Type: <input type="text" value="001"/></p>
<p>B. Full Name (Last, First, Middle Initial) Ms. Ana Maria Salazar</p> <p>Mailing Address 2948 Missouri Avenue</p> <p>City Las Cruces State NM Zip Code 88011-4814</p> <p>Purpose of Disbursement Political Consulting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-40432-100013-e</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2000.00"/></p> <p>Category/Type: <input type="text" value="001"/></p>
<p>C. Full Name (Last, First, Middle Initial) Alicia Pompa</p> <p>Mailing Address 4913 Northridge Place NE</p> <p>City Albuquerque State NM Zip Code 87111-2105</p> <p>Purpose of Disbursement Administrative/Salary/Overhead: 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-40326-100017-e</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="998.65"/></p> <p>Category/Type: <input type="text" value="001"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Miss Tiffany Kardeen Mailing Address 11804 Palo Duro Avenue NE City Albuquerque State NM Zip Code 87111-4145 Purpose of Disbursement Reimbursement: Insurance(Non FEA) Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-34571-99660-e Date of Disbursement 11 / 02 / 2010 Amount of Each Disbursement this Period 136.62 001 Category/ Type
B.	Full Name (Last, First, Middle Initial) Presbyterian Insurance Company Mailing Address 1600 PO Box City Denver State CO Zip Code 80291-0001 Purpose of Disbursement Health Insurance Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-22713-96749-V Date of Disbursement 10 / 13 / 2010 Amount of Each Disbursement this Period 136.62 001 Category/ Type [MEMO ITEM] Subitemization of Tiffany Kardeen (11/02/10)
C.	Full Name (Last, First, Middle Initial) Ms. Julia Ruetten Mailing Address 6110 Academy Road NE Apt. 86 City Albuquerque State NM Zip Code 87109-2800 Purpose of Disbursement Reimbursements: Under \$200 Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-40307-99613-e Date of Disbursement 10 / 28 / 2010 Amount of Each Disbursement this Period 92.87 001 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

229.49

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

<p>A. Full Name (Last, First, Middle Initial) Taxation & Revenue Department</p> <p>Mailing Address PO Box 25128</p> <p>City Santa Fe State NM Zip Code 87504-5128</p> <p>Purpose of Disbursement WC 3Q 2010</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-18771-99446-e</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="30.10"/></p> <p>Category/Type: <input type="text" value="001"/></p>
<p>B. Full Name (Last, First, Middle Initial) Ms. Kial Vidic</p> <p>Mailing Address 1230 Mahood Road</p> <p>City West Sunbury State PA Zip Code 16061-2020</p> <p>Purpose of Disbursement Administrative/Salary/Overhead: 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-40334-100019-e</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1149.51"/></p> <p>Category/Type: <input type="text" value="001"/></p>
<p>C. Full Name (Last, First, Middle Initial) Colfax County Clerk</p> <p>Mailing Address PO Box 159</p> <p>City Raton State NM Zip Code 87740-0159</p> <p>Purpose of Disbursement Voter Lists</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-6920-99426-e</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="100.00"/></p> <p>Category/Type: <input type="text" value="001"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

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

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

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

FOR LINE NUMBER: (check only one)

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

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

A. Full Name (Last, First, Middle Initial) Scott Zacheus <hr/> Mailing Address 406 E Arriba Drive <hr/> City Hobbs State NM Zip Code 88240-3433 <hr/> Purpose of Disbursement Reimbursements: Mileage and under \$200 Candidate Name	Transaction ID: SB21B-40377-99617-e Date of Disbursement 10 / 29 / 2010
	Amount of Each Disbursement this Period 784.64 <hr/> Purpose of Disbursement Reimbursements: Mileage and under \$200 Candidate Name
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) Ms. Ana Maria Salazar <hr/> Mailing Address 2948 Missouri Avenue <hr/> City Las Cruces State NM Zip Code 88011-4814 <hr/> Purpose of Disbursement Reimbursements: under \$200 Candidate Name	Transaction ID: SB21B-40432-99431-e Date of Disbursement 10 / 22 / 2010
	Amount of Each Disbursement this Period 236.59 <hr/> Purpose of Disbursement Reimbursements: under \$200 Candidate Name
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) Linda Bartelsmeyer <hr/> Mailing Address 5983 Moon View Drive <hr/> City Las Cruces State NM Zip Code 88012-7164 <hr/> Purpose of Disbursement Reimbursement: Vans Candidate Name	Transaction ID: SB21B-40324-99514-e Date of Disbursement 10 / 25 / 2010
	Amount of Each Disbursement this Period 1089.77 <hr/> Purpose of Disbursement Reimbursement: Vans Candidate Name
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶

2111.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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

A. Full Name (Last, First, Middle Initial) Wells Fargo Bank, NA <hr/> Mailing Address 7412 Jefferson Street NE <hr/> City Albuquerque State NM Zip Code 87109-4336 Purpose of Disbursement Bank Fees Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-39724-100046-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 5 / 2 0 1 0
	Amount of Each Disbursement this Period 333.90
	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Cable One <hr/> Mailing Address PO Box 78407 <hr/> City Phoenix State AZ Zip Code 85062-8407 Purpose of Disbursement Administrative/Salary/Overhead: Internet Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-40389-100053-e Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 1 0
	Amount of Each Disbursement this Period 169.92
	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Postmaster <hr/> Mailing Address 6255 San Antonio Drive NE <hr/> City Albuquerque State NM Zip Code 87109-9211 Purpose of Disbursement PO Box Fee-6mo Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-7798-99788-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 4 / 2 0 1 0
	Amount of Each Disbursement this Period 35.00
	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

538.82

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 72 / 140

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

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

A.

Full Name (Last, First, Middle Initial)
Qwest Business Services

Transaction ID: SB21B-39854-99304-e
Date of Disbursement

Mailing Address PO Box 52187

^M	^M	/	^D	^D	/	^Y	^Y	^Y	^Y
1	0		1	4		2	0	1	0

City State Zip Code
Phoenix AZ 85072-2187

Amount of Each Disbursement this Period

460.00

Purpose of Disbursement
Administrative/Salary/Overhead: Phones

001
Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

460.00

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

160129.58

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

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

FOR LINE NUMBER: (check only one)

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

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

<p>A. Full Name (Last, First, Middle Initial) Republican Party of Dona Ana County</p> <p>Mailing Address 121 Wyatt Drive Suite 16</p> <p>City Las Cruces State NM Zip Code 88005-2960</p> <p>Purpose of Disbursement Administrative/Salary/Overhead: Rent</p> <p>Candidate Name Republican Party of Dona Ana County</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB22-17208-99631-e Date of Disbursement 10 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 1500.00</p> <p>Category/Type 001</p>
<p>B. Full Name (Last, First, Middle Initial) Republican Party of Santa Fe County</p> <p>Mailing Address PO Box 31995</p> <p>City Santa Fe State NM Zip Code 87594-1995</p> <p>Purpose of Disbursement Reimbursement: Internet bill</p> <p>Candidate Name Republican Party of Santa Fe County</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB22-2313-99624-e Date of Disbursement 10 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 102.67</p> <p>Category/Type 001</p>
<p>C. Full Name (Last, First, Middle Initial) Republican Party of Sandoval County</p> <p>Mailing Address PO Box 1064</p> <p>City Bernalillo State NM Zip Code 87004-1064</p> <p>Purpose of Disbursement Administrative/Salary/Overhead: Rent</p> <p>Candidate Name Republican Party of Sandoval County</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB22-2312-99632-e Date of Disbursement 10 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 600.00</p> <p>Category/Type 001</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2202.67

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

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

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

FOR LINE NUMBER: (check only one)

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

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

A. Full Name (Last, First, Middle Initial) Republican Party of Lea County <hr/> Mailing Address PO Box 1934 <hr/> City Hobbs State NM Zip Code 88241-1934 <hr/> Purpose of Disbursement Administrative/Salary/Overhead: Rent Candidate Name Republican Party of Lea County <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB22-16223-99630-e Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 1 0
	Amount of Each Disbursement this Period 1300.00
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Republican National Committee (tsfs) <hr/> Mailing Address 310 1st Street SE <hr/> City Washington State DC Zip Code 20003-1885 <hr/> Purpose of Disbursement See line 12- In-Kind Transfer Candidate Name Republican National Committee (tsfs) <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB22-2878-99941-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 9 / 2 0 1 0
	Amount of Each Disbursement this Period 1440.00
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Republican National Committee (tsfs) <hr/> Mailing Address 310 1st Street SE <hr/> City Washington State DC Zip Code 20003-1885 <hr/> Purpose of Disbursement See Line 12- In-Kind Transfer Candidate Name Republican National Committee (tsfs) <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB22-2878-99307-e Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 1 0
	Amount of Each Disbursement this Period 1440.00
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	4180.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 75 / 140

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

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

A.

Full Name (Last, First, Middle Initial)
Republican Party of San Juan County

Mailing Address PO Box 5417

City Farmington State NM Zip Code 87499-5417

Purpose of Disbursement
Contribution

Candidate Name
Republican Party of San Juan County

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Transaction ID: SB22-16065-99513-e
Date of Disbursement

10 / 25 / 2010

Amount of Each Disbursement this Period

1500.00

001
Category/
Type

SUBTOTAL of Disbursements This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

7882.67

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

A.	Full Name (Last, First, Middle Initial) FLS Connect, LLC	Transaction ID: SB30b-12697-99657-e Date of Disbursement
	Mailing Address 7300 Hudson Boulevard N Suite 270	<input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2010"/>
	City Saint Paul State MN Zip Code 55128-7143	Amount of Each Disbursement this Period
	Purpose of Disbursement GOTV Autodial: State Candidate only	<input type="text" value="300.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Joe Hicks	Transaction ID: SB30b-40596-99708-e Date of Disbursement
	Mailing Address 5104 East 19th	<input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2010"/>
	City Roswell State NM Zip Code 88201	Amount of Each Disbursement this Period
	Purpose of Disbursement FEA 100% Federal: Paid Volunteer	<input type="text" value="150.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Campaign Marketing Strategies	Transaction ID: SB30b-40538-99638-e Date of Disbursement
	Mailing Address 125 N Oakland Street	<input type="text" value="11"/> / <input type="text" value="01"/> / <input type="text" value="2010"/>
	City Arlington State VA Zip Code 22203-3510	Amount of Each Disbursement this Period
	Purpose of Disbursement GOTV autodials: No Fed Candidates	<input type="text" value="2271.06"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="2721.06"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

PAGE 77 / 140

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

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

<p>A. Full Name (Last, First, Middle Initial) Mr. Jacob Clements</p> <p>Mailing Address 500 1/2 S Kentucky Avenue</p> <p>City Roswell State NM Zip Code 88203-4527</p> <p>Purpose of Disbursement FEA 100% Federal: Paid Volunteer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30b-36251-99710-e Date of Disbursement 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 180.00</p>
<p>B. Full Name (Last, First, Middle Initial) Chris Cardillo</p> <p>Mailing Address 1320 Penasco Road NE</p> <p>City Rio Rancho State NM Zip Code 87144-6317</p> <p>Purpose of Disbursement FEA 100% Federal: Paid Volunteer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30b-40581-99694-e Date of Disbursement 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 150.00</p>
<p>C. Full Name (Last, First, Middle Initial) Nathan Rael Sanchez</p> <p>Mailing Address PO Box 2332</p> <p>City Roswell State NM Zip Code 88202-2332</p> <p>Purpose of Disbursement FEA 100% Federal: Paid Volunteer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30b-40604-99717-e Date of Disbursement 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 210.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

540.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 79 / 140

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

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

A. Full Name (Last, First, Middle Initial) Margaret Whelan <hr/> Mailing Address 1708 Sequoia Avenue <hr/> City Las Cruces State NM Zip Code 88005-3066 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40626-99760-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 125.00
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) Lazarus Graphics <hr/> Mailing Address 2011 Shadowbrook Circle <hr/> City Round Rock State TX Zip Code 78681-7140 <hr/> Purpose of Disbursement Door Hangers: NM Slate with 1 Federal Candidate (Non-Alloc) Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40540-99432-e Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 1 0
	Amount of Each Disbursement this Period 28834.55
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) Alexander Bohlin <hr/> Mailing Address 22 Loma Vista Road <hr/> City Roswell State NM Zip Code 88201-8803 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40606-99719-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 30.00
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	28989.55
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER: (check only one)

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

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

A. Full Name (Last, First, Middle Initial) Ms. Janie Lyn Ott <hr/> Mailing Address 3509 Alaska Place NE <hr/> City Albuquerque State NM Zip Code 87111-5201 <hr/> Purpose of Disbursement FEA 100% Federal: EDO Consulting Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-7523-99786-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 4 / 2 0 1 0
	Amount of Each Disbursement this Period 1040.45
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Joshua Weber <hr/> Mailing Address 1241 Orchard Park Circle <hr/> City Pflugerville State TX Zip Code 78660-2431 <hr/> Purpose of Disbursement FEA 100% Federal: Salary: FEA Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40308-99338-e Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 1 0
	Amount of Each Disbursement this Period 1461.97
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Mr. Shane Maier <hr/> Mailing Address 3348 N Hoisington Road <hr/> City Winnebago State IL Zip Code 61088-8638 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40450-99798-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 5 / 2 0 1 0
	Amount of Each Disbursement this Period 220.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	2722.42
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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

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

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

A. Full Name (Last, First, Middle Initial) Christina King <hr/> Mailing Address 3204 Delicado Drive <hr/> City Roswell State NM Zip Code 88201-6632 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40609-99722-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 240.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Cathy Alling <hr/> Mailing Address 5905 Prenda De Oro NW <hr/> City Albuquerque State NM Zip Code 87120-1337 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40443-99571-e Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 1 0
	Amount of Each Disbursement this Period 110.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Justin Kirby <hr/> Mailing Address 605 La Fonda Drive <hr/> City Roswell State NM Zip Code 88201-6655 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40590-99702-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 40.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	390.00
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER:
(check only one)

PAGE 82 / 140

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

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

<p>A. Full Name (Last, First, Middle Initial) Terri Giron</p> <p>Mailing Address 265 Pedro Madrid</p> <p>City Las Cruces State Nm Zip Code 88007</p> <p>Purpose of Disbursement FEA 100% Federal: Paid Volunteer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30b-40631-99767-e Date of Disbursement 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 90.00</p>
<p>B. Full Name (Last, First, Middle Initial) Alexander Tenski</p> <p>Mailing Address 1201 Madeira Drive SE Apt. 202</p> <p>City Albuquerque State NM Zip Code 87108-6603</p> <p>Purpose of Disbursement FEA 100% Federal: Paid Volunteer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30b-40585-99698-e Date of Disbursement 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 340.00</p>
<p>C. Full Name (Last, First, Middle Initial) Melissa Wells</p> <p>Mailing Address 1501 Tramway Boulevard NE Apt. 137C</p> <p>City Albuquerque State NM Zip Code 87112-6146</p> <p>Purpose of Disbursement FEA 100% Federal: Paid Volunteer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30b-40584-99697-e Date of Disbursement 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 280.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

710.00

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

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

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

FOR LINE NUMBER: (check only one)

PAGE 83 / 140

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

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

<p>A. Full Name (Last, First, Middle Initial) Alexandro Olivas</p> <p>Mailing Address 3102 Barcelona Drive</p> <p>City Roswell State NM Zip Code 88201-8337</p> <p>Purpose of Disbursement FEA 100% Federal: Paid Volunteer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30b-40589-99701-e Date of Disbursement 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 40.00</p>
<p>B. Full Name (Last, First, Middle Initial) Ms. Kial Vidic</p> <p>Mailing Address 1230 Mahood Road</p> <p>City West Sunbury State PA Zip Code 16061-2020</p> <p>Purpose of Disbursement FEA 100% Federal: Salary: FEA</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30b-40334-99342-e Date of Disbursement 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 1149.51</p>
<p>C. Full Name (Last, First, Middle Initial) Dora Luchini-Lucero</p> <p>Mailing Address 2051 Mass Ave</p> <p>City Las Cruces State NM Zip Code 88012</p> <p>Purpose of Disbursement FEA 100% Federal: Paid Volunteer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30b-40619-99753-e Date of Disbursement 10 / 31 / 2010</p> <p>Amount of Each Disbursement this Period 405.00</p>

SUBTOTAL of Disbursements This Page (optional)	1594.51
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

PAGE 84 / 140

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

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

A.	Full Name (Last, First, Middle Initial) Christine Padilla <hr/> Mailing Address PO Box 302 <hr/> City Pecos State NM Zip Code 87552-0302 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40576-99675-e Date of Disbursement <table border="1" style="width: 100%;"> <tr> <td style="text-align: center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">1 1 / 0 2 / 2 0 1 0</td> </tr> </table> Amount of Each Disbursement this Period <table border="1" style="width: 100%; text-align: center;"> <tr> <td>247.50</td> </tr> </table>	M M / D D / Y Y Y Y	1 1 / 0 2 / 2 0 1 0	247.50
M M / D D / Y Y Y Y					
1 1 / 0 2 / 2 0 1 0					
247.50					
B.	Full Name (Last, First, Middle Initial) Zanoni Contreras <hr/> Mailing Address PO Box 417 <hr/> City Mesilla State NM Zip Code 88046-0417 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40628-99762-e Date of Disbursement <table border="1" style="width: 100%;"> <tr> <td style="text-align: center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">1 1 / 0 2 / 2 0 1 0</td> </tr> </table> Amount of Each Disbursement this Period <table border="1" style="width: 100%; text-align: center;"> <tr> <td>115.00</td> </tr> </table>	M M / D D / Y Y Y Y	1 1 / 0 2 / 2 0 1 0	115.00
M M / D D / Y Y Y Y					
1 1 / 0 2 / 2 0 1 0					
115.00					
C.	Full Name (Last, First, Middle Initial) Ms. Pamela Navarette <hr/> Mailing Address 5320 San Mateo Boulevard NE Apt. F75 <hr/> City Albuquerque State NM Zip Code 87109-6319 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40464-99362-e Date of Disbursement <table border="1" style="width: 100%;"> <tr> <td style="text-align: center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">1 0 / 1 8 / 2 0 1 0</td> </tr> </table> Amount of Each Disbursement this Period <table border="1" style="width: 100%; text-align: center;"> <tr> <td>110.00</td> </tr> </table>	M M / D D / Y Y Y Y	1 0 / 1 8 / 2 0 1 0	110.00
M M / D D / Y Y Y Y					
1 0 / 1 8 / 2 0 1 0					
110.00					

SUBTOTAL of Disbursements This Page (optional) ▶	<table border="1" style="width: 100%;"> <tr> <td>472.50</td> </tr> </table>	472.50
472.50		
TOTAL This Period (last page this line number only) ▶	<table border="1" style="width: 100%; height: 20px;"> <tr> <td> </td> </tr> </table>	

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

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

FOR LINE NUMBER:
(check only one)

PAGE 85 / 140

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

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

A. Full Name (Last, First, Middle Initial) Joe Trujillo <hr/> Mailing Address 506 S Cypress Avenue <hr/> City Roswell State NM Zip Code 88203-1570 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40592-99704-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 40.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Terri Price <hr/> Mailing Address 210 Dorothy Street NE <hr/> City Albuquerque State NM Zip Code 87123-2813 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40582-99695-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 365.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Mr. Brock Phillips <hr/> Mailing Address 3741 Big Bend Road NE <hr/> City Albuquerque State NM Zip Code 87111-4361 <hr/> Purpose of Disbursement Political Consulting: EDO Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-34780-99349-e Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 1 0
	Amount of Each Disbursement this Period 1259.63
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

1664.63

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 86 / 140

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

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

<p>A. Full Name (Last, First, Middle Initial) Ms. Ana Maria Salazar</p> <p>Mailing Address 2948 Missouri Avenue</p> <p>City Las Cruces State NM Zip Code 88011-4814</p> <p>Purpose of Disbursement FEA 100% Federal: Political Consulting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30b-40432-99336-e Date of Disbursement 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 2000.00</p>
<p>B. Full Name (Last, First, Middle Initial) Mr. Shane Maier</p> <p>Mailing Address 3348 N Hoisington Road</p> <p>City Winnebago State IL Zip Code 61088-8638</p> <p>Purpose of Disbursement FEA 100% Federal: Paid Volunteer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30b-40450-99572-e Date of Disbursement 10 / 26 / 2010</p> <p>Amount of Each Disbursement this Period 110.00</p>
<p>C. Full Name (Last, First, Middle Initial) Mr. Brock Phillips</p> <p>Mailing Address 3741 Big Bend Road NE</p> <p>City Albuquerque State NM Zip Code 87111-4361</p> <p>Purpose of Disbursement Political Consulting: EDO</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30b-34780-99792-e Date of Disbursement 11 / 04 / 2010</p> <p>Amount of Each Disbursement this Period 1250.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3360.00

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

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

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

FOR LINE NUMBER: (check only one)

PAGE 87 / 140

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

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

A. Full Name (Last, First, Middle Initial) Campaign Marketing Strategies <hr/> Mailing Address 125 N Oakland Street <hr/> City Arlington State VA Zip Code 22203-3510 Purpose of Disbursement GOTV Autodials: State Candidates Only Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40538-99415-e Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 1 0
	Amount of Each Disbursement this Period 305.29
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Hilton Albuquerque <hr/> Mailing Address 1901 University Boulevard NE <hr/> City Albuquerque State NM Zip Code 87102-1713 Purpose of Disbursement EDO legal offices/phones Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-23477-99669-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 3667.66
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Deanna Renteria <hr/> Mailing Address 501 S Beech <hr/> City Roswell State NM Zip Code 88202 Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40597-99709-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 60.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	4032.95
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 88 / 140

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

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

<p>A. Full Name (Last, First, Middle Initial) Lisa Reeves</p> <p>Mailing Address 1906 S Lea Avenue</p> <p>City Roswell State NM Zip Code 88203-4227</p> <p>Purpose of Disbursement FEA 100% Federal: Paid Volunteer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30b-40615-99728-e Date of Disbursement 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 80.00</p>
<p>B. Full Name (Last, First, Middle Initial) Margo Nava</p> <p>Mailing Address 3815 S Main Street # 47</p> <p>City Mesilla Park State NM Zip Code 88047-9715</p> <p>Purpose of Disbursement FEA 100% Federal: Paid Volunteer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30b-40622-99756-e Date of Disbursement 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 310.00</p>
<p>C. Full Name (Last, First, Middle Initial) Clifton Green</p> <p>Mailing Address 370 Aspen Road</p> <p>City Glorieta State NM Zip Code 87535-7128</p> <p>Purpose of Disbursement FEA 100% Federal: Paid Volunteer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30b-40577-99676-e Date of Disbursement 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 62.50</p>

SUBTOTAL of Disbursements This Page (optional)	452.50
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 89 / 140

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

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

<p>A. Full Name (Last, First, Middle Initial) Rebekah Bitner</p> <p>Mailing Address 411 N Kansas Avenue</p> <p>City Roswell State NM Zip Code 88201-3945</p> <p>Purpose of Disbursement FEA 100% Federal: Paid Volunteer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30b-40611-99724-e Date of Disbursement 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 50.00</p>
<p>B. Full Name (Last, First, Middle Initial) Ms. Agnes Gaffney</p> <p>Mailing Address 5905 Prenda De Oro NW</p> <p>City Albuquerque State NM Zip Code 87120-1337</p> <p>Purpose of Disbursement FEA 100% Federal: Paid Volunteer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30b-40442-99797-e Date of Disbursement 11 / 05 / 2010</p> <p>Amount of Each Disbursement this Period 154.00</p>
<p>C. Full Name (Last, First, Middle Initial) Robert Salazar</p> <p>Mailing Address PO Box 59</p> <p>City Youngsville State NM Zip Code 87064-0059</p> <p>Purpose of Disbursement FEA 100% Federal: Salary: FEA</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30b-40333-99341-e Date of Disbursement 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 1154.38</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1358.38

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 90 / 140

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

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

A. Full Name (Last, First, Middle Initial) Felicia Nieves Mailing Address PO Box 11 City Dona Ana State NM Zip Code 88032-0011 Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40636-99775-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 1 0
	Amount of Each Disbursement this Period 215.00 Category/Type

B. Full Name (Last, First, Middle Initial) Edward Amador Mailing Address 7970 Inca Dove Avenue City Las Cruces State NM Zip Code 88012-7978 Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40629-99763-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 100.00 Category/Type

C. Full Name (Last, First, Middle Initial) Rosalie Herrera Mailing Address 3000 El Camino Real City Las Cruces State NM Zip Code 88007-7236 Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40621-99769-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 200.00 Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	515.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 91 / 140

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

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

A. Full Name (Last, First, Middle Initial) Ian Sproul <hr/> Mailing Address 8 Camino Del Prado <hr/> City Santa Fe State NM Zip Code 87507-0199 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40571-99670-e Date of Disbursement 11 / 02 / 2010
	Amount of Each Disbursement this Period 232.50
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) Ruben Carbajal <hr/> Mailing Address 3810 Yellowstone Drive <hr/> City Las Cruces State NM Zip Code 88011-9064 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40630-99766-e Date of Disbursement 11 / 02 / 2010
	Amount of Each Disbursement this Period 20.00
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) Brandon Strel <hr/> Mailing Address 304 Calle Oso <hr/> City Santa Fe State NM Zip Code 87501-1026 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40573-99672-e Date of Disbursement 11 / 02 / 2010
	Amount of Each Disbursement this Period 377.50
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	630.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 92 / 140

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

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

A. Full Name (Last, First, Middle Initial) Rebecca Melton <hr/> Mailing Address 521 E 19th Street <hr/> City Roswell State NM Zip Code 88201-5156 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40656-99969-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 2 / 2 0 1 0
	Amount of Each Disbursement this Period 165.00
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) Kelly Dellagatta <hr/> Mailing Address 2727 N Wilshire Boulevard Apt. 30C <hr/> City Roswell State NM Zip Code 88201-6798 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40595-99707-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 120.00
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) Campaign Marketing Strategies <hr/> Mailing Address 125 N Oakland Street <hr/> City Arlington State VA Zip Code 22203-3510 <hr/> Purpose of Disbursement GOTV Calls: State Candidates only Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40538-99438-e Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 1 0
	Amount of Each Disbursement this Period 4000.00
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	4285.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 93 / 140

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

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

<p>A. Full Name (Last, First, Middle Initial) Carolyn Johnson</p> <p>Mailing Address 200 E 22nd Street Trailer 45</p> <p>City Roswell State NM Zip Code 88201-6401</p> <p>Purpose of Disbursement FEA 100% Federal: Paid Volunteer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30b-40610-99723-e Date of Disbursement 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 80.00</p>
<p>B. Full Name (Last, First, Middle Initial) Angela Martinez</p> <p>Mailing Address PO Box 252</p> <p>City Chamberino State NM Zip Code 88027-0252</p> <p>Purpose of Disbursement FEA 100% Federal: Paid Volunteer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30b-40635-99774-e Date of Disbursement 11 / 03 / 2010</p> <p>Amount of Each Disbursement this Period 255.00</p>
<p>C. Full Name (Last, First, Middle Initial) Ms. Janie Lyn Ott</p> <p>Mailing Address 3509 Alaska Place NE</p> <p>City Albuquerque State NM Zip Code 87111-5201</p> <p>Purpose of Disbursement FEA 100% Federal: EDO Consulting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30b-7523-99400-e Date of Disbursement 10 / 21 / 2010</p> <p>Amount of Each Disbursement this Period 1070.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1405.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 94 / 140

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

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

<p>A. Full Name (Last, First, Middle Initial) Virginia Contreras</p> <p>Mailing Address PO Box 417</p> <p>City Mesilla State NM Zip Code 88046-0417</p> <p>Purpose of Disbursement FEA 100% Federal: Paid Volunteer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30b-40637-99776-e Date of Disbursement 11 / 03 / 2010</p> <p>Amount of Each Disbursement this Period 110.00</p>
<p>B. Full Name (Last, First, Middle Initial) Susan Quintana</p> <p>Mailing Address 435 HC 74</p> <p>City Pecos State NM Zip Code 87552-9511</p> <p>Purpose of Disbursement FEA 100% Federal: Paid Volunteer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30b-40579-99678-e Date of Disbursement 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 145.00</p>
<p>C. Full Name (Last, First, Middle Initial) David Giron</p> <p>Mailing Address 765 Pedro Madrid Road</p> <p>City Las Cruces State NM Zip Code 88007-5861</p> <p>Purpose of Disbursement FEA 100% Federal: Paid Volunteer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30b-40618-99752-e Date of Disbursement 10 / 31 / 2010</p> <p>Amount of Each Disbursement this Period 320.00</p>

SUBTOTAL of Disbursements This Page (optional)	575.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 95 / 140

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

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

A. Full Name (Last, First, Middle Initial) Silvia Bobadilla <hr/> Mailing Address 222 1/2 N Guadalupe Street <hr/> City Santa Fe State NM Zip Code 87501-1851 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40572-99671-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 475.00
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) Toni Augburn <hr/> Mailing Address 7151 Mesa Del Oro <hr/> City Santa Fe State NM Zip Code 87507-3551 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40574-99673-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 245.00
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) Valerie Lopez <hr/> Mailing Address 707 S Delaware Avenue <hr/> City Roswell State NM Zip Code 88203-2917 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40612-99725-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 55.00
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

775.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 96 / 140

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

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

A. Full Name (Last, First, Middle Initial) Ms. Julia Ruetten <hr/> Mailing Address 6110 Academy Road NE Apt. 86 <hr/> City Albuquerque State NM Zip Code 87109-2800 <hr/> Purpose of Disbursement FEA 100% Federal: Salary: FEA Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40307-99337-e Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 1 0
	Amount of Each Disbursement this Period 1620.18
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Trumaine Smith <hr/> Mailing Address 6723 Photinia Place NW <hr/> City Albuquerque State NM Zip Code 87121-8457 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40587-99699-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 130.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Ms. Pamela Navarette <hr/> Mailing Address 5320 San Mateo Boulevard NE Apt. F75 <hr/> City Albuquerque State NM Zip Code 87109-6319 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40464-99576-e Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 1 0
	Amount of Each Disbursement this Period 110.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	1860.18
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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

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

FOR LINE NUMBER: (check only one)

PAGE 97 / 140

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

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

A. Full Name (Last, First, Middle Initial) Mr. Shane Maier <hr/> Mailing Address 3348 N Hoisington Road <hr/> City Winnebago State IL Zip Code 61088-8638 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40450-99363-e Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 1 0
	Amount of Each Disbursement this Period 110.00
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) Robert Fambrough <hr/> Mailing Address 44 Dogwood Road <hr/> City Roswell State NM Zip Code 88201-8802 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40599-99712-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 60.00
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) William Palombi <hr/> Mailing Address 2104 E 19th Street <hr/> City Roswell State NM Zip Code 88201-9565 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40608-99721-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 120.00
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

290.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 98 / 140

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

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

<p>A. Full Name (Last, First, Middle Initial) Linnea Keyes</p> <p>Mailing Address 422 Mockingbird Lane</p> <p>City Corrales State NM Zip Code 87048-7637</p> <p>Purpose of Disbursement FEA 100% Federal: Paid Volunteer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30b-40633-99770-e Date of Disbursement 11 / 03 / 2010</p> <p>Amount of Each Disbursement this Period 110.00</p>
<p>B. Full Name (Last, First, Middle Initial) Linda Bartelsmeyer</p> <p>Mailing Address 5983 Moon View Drive</p> <p>City Las Cruces State NM Zip Code 88012-7164</p> <p>Purpose of Disbursement FEA 100% Federal: Salary: FEA</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30b-40324-99339-e Date of Disbursement 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 1046.64</p>
<p>C. Full Name (Last, First, Middle Initial) Rita Carbajal</p> <p>Mailing Address 3810 Yellowstone Drive</p> <p>City Las Cruces State NM Zip Code 88011-9064</p> <p>Purpose of Disbursement FEA 100% Federal: Paid Volunteer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30b-40627-99761-e Date of Disbursement 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 60.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1216.64

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 99 / 140

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

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

<p>A. Full Name (Last, First, Middle Initial) Western Data Services, Inc.</p> <p>Mailing Address PO Box 423</p> <p>City Carlsbad State NM Zip Code 88221-0423</p> <p>Purpose of Disbursement Printing/Postage: (State Candidate Mail featuring Pelosi/Reid)</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30b-40563-99609-e Date of Disbursement 10 / 28 / 2010</p> <p>Amount of Each Disbursement this Period 12543.19</p>
<p>B. Full Name (Last, First, Middle Initial) Mr. Victor Contreras</p> <p>Mailing Address PO Box 417</p> <p>City Mesilla State NM Zip Code 88046-0417</p> <p>Purpose of Disbursement FEA 100% Federal: Paid Volunteer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30b-16253-99765-e Date of Disbursement 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 145.00</p>
<p>C. Full Name (Last, First, Middle Initial) Andrea Eskeli</p> <p>Mailing Address 5701 Kincaid Road</p> <p>City Roswell State NM Zip Code 88203-0932</p> <p>Purpose of Disbursement FEA 100% Federal: Paid Volunteer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30b-40601-99714-e Date of Disbursement 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 90.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

12778.19

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 100 / 140

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

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

A. Full Name (Last, First, Middle Initial) Luther Whelan <hr/> Mailing Address 1708 Sequoia Avenue <hr/> City Las Cruces State NM Zip Code 88005-3066 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40625-99759-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 60.00
	Category/ Type
	State: District:
B. Full Name (Last, First, Middle Initial) Margot Lawler <hr/> Mailing Address 172 Galisteo Lane <hr/> City Santa Fe State NM Zip Code 87505-4634 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40575-99674-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 40.00
	Category/ Type
	State: District:
C. Full Name (Last, First, Middle Initial) Eryn Frosch <hr/> Mailing Address 5 Lost Trail Road <hr/> City Roswell State NM Zip Code 88201-9579 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40605-99718-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 210.00
	Category/ Type
	State: District:

SUBTOTAL of Disbursements This Page (optional) ▶	310.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 101 / 140

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

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

<p>A. Full Name (Last, First, Middle Initial) Jessica Giron</p> <p>Mailing Address 7970 Inca Dove Avenue</p> <p>City Las Cruces State NM Zip Code 88012-7978</p> <p>Purpose of Disbursement FEA 100% Federal: Paid Volunteer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30b-40632-99768-e Date of Disbursement 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 70.00</p>
<p>B. Full Name (Last, First, Middle Initial) Rosalie Herrera</p> <p>Mailing Address 3000 El Camino Real</p> <p>City Las Cruces State NM Zip Code 88007-7236</p> <p>Purpose of Disbursement FEA 100% Federal: Paid Volunteer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30b-40621-99755-e Date of Disbursement 10 / 31 / 2010</p> <p>Amount of Each Disbursement this Period 20.00</p>
<p>C. Full Name (Last, First, Middle Initial) Jacob Perry</p> <p>Mailing Address 1604 S Lea Avenue</p> <p>City Roswell State NM Zip Code 88203-3741</p> <p>Purpose of Disbursement FEA 100% Federal: Paid Volunteer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30b-40616-99729-e Date of Disbursement 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 40.00</p>

SUBTOTAL of Disbursements This Page (optional)	130.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

PAGE 102 / 140

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

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

A. Full Name (Last, First, Middle Initial) Terrence Shields <hr/> Mailing Address 704 Three Cross Drive <hr/> City Roswell State NM Zip Code 88201-7832 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40588-99700-e Date of Disbursement 11 / 02 / 2010
	Amount of Each Disbursement this Period 40.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Sandra Garcia <hr/> Mailing Address PO Box 3384 <hr/> City Sunland Park State NM Zip Code 88063-3384 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40623-99757-e Date of Disbursement 11 / 02 / 2010
	Amount of Each Disbursement this Period 120.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Mary Palombi <hr/> Mailing Address 2104 E 19th Street <hr/> City Roswell State NM Zip Code 88201-9565 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40607-99720-e Date of Disbursement 11 / 02 / 2010
	Amount of Each Disbursement this Period 90.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

250.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 103 / 140

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

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

<p>A. Full Name (Last, First, Middle Initial) Benjamin Sanchez</p> <p>Mailing Address PO Box 2332</p> <p>City Roswell State NM Zip Code 88202-2332</p> <p>Purpose of Disbursement FEA 100% Federal: Paid Volunteer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30b-40603-99716-e Date of Disbursement 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 240.00</p>
<p>B. Full Name (Last, First, Middle Initial) Sergio Carrillo</p> <p>Mailing Address 117 Father Luis Catano</p> <p>City Sunland Park State NM Zip Code 88063</p> <p>Purpose of Disbursement FEA 100% Federal: Paid Volunteer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30b-40624-99758-e Date of Disbursement 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 170.00</p>
<p>C. Full Name (Last, First, Middle Initial) Luther Whelan</p> <p>Mailing Address 1708 Sequoia Avenue</p> <p>City Las Cruces State NM Zip Code 88005-3066</p> <p>Purpose of Disbursement FEA 100% Federal: Paid Volunteer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30b-40625-99764-e Date of Disbursement 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 45.00</p>

SUBTOTAL of Disbursements This Page (optional)	455.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

PAGE 104 / 140

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

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

<p>A. Full Name (Last, First, Middle Initial) Isabelle Lopez</p> <p>Mailing Address 707 S Delaware Avenue</p> <p>City Roswell State NM Zip Code 88203-2917</p> <p>Purpose of Disbursement FEA 100% Federal: Paid Volunteer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30b-40613-99726-e Date of Disbursement 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 45.00</p>
<p>B. Full Name (Last, First, Middle Initial) Ms. Agnes Gaffney</p> <p>Mailing Address 5905 Prenda De Oro NW</p> <p>City Albuquerque State NM Zip Code 87120-1337</p> <p>Purpose of Disbursement FEA 100% Federal: Paid Volunteer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30b-40442-99526-e Date of Disbursement 10 / 26 / 2010</p> <p>Amount of Each Disbursement this Period 110.00</p>
<p>C. Full Name (Last, First, Middle Initial) Carolyn Fambrough</p> <p>Mailing Address 44 Dogwood Road</p> <p>City Roswell State NM Zip Code 88201-8802</p> <p>Purpose of Disbursement FEA 100% Federal: Paid Volunteer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30b-40598-99711-e Date of Disbursement 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 90.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

245.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 105 / 140

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

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

A. Full Name (Last, First, Middle Initial) D. Rael Sanchez <hr/> Mailing Address PO Box 2332 <hr/> City Roswell State NM Zip Code 88202-2332 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40602-99715-e Date of Disbursement 11 / 02 / 2010
	Amount of Each Disbursement this Period 240.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Richard Tirado <hr/> Mailing Address 3003 W 8th Street <hr/> City Roswell State NM Zip Code 88201-1307 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40591-99703-e Date of Disbursement 11 / 02 / 2010
	Amount of Each Disbursement this Period 40.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Mr. Brock Phillips <hr/> Mailing Address 3741 Big Bend Road NE <hr/> City Albuquerque State NM Zip Code 87111-4361 <hr/> Purpose of Disbursement Political Consulting: EDO Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-34780-99793-e Date of Disbursement 11 / 05 / 2010
	Amount of Each Disbursement this Period 1250.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

1530.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 106 / 140

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

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

<p>A. Full Name (Last, First, Middle Initial) Abel Olivas</p> <p>Mailing Address 3102 Barcelona Drive</p> <p>City Roswell State NM Zip Code 88201-8337</p> <p>Purpose of Disbursement FEA 100% Federal: Paid Volunteer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30b-40593-99705-e Date of Disbursement 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 40.00</p>
<p>B. Full Name (Last, First, Middle Initial) Mary Reeves</p> <p>Mailing Address 1007 Ave del Sumbre</p> <p>City Roswell State NM Zip Code 88203</p> <p>Purpose of Disbursement FEA 100% Federal: Paid Volunteer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30b-40614-99727-e Date of Disbursement 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 80.00</p>
<p>C. Full Name (Last, First, Middle Initial) Angel Sanchez</p> <p>Mailing Address 606 Evista Perchway</p> <p>City Roswell State NM Zip Code 88701</p> <p>Purpose of Disbursement FEA 100% Federal: Paid Volunteer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30b-40594-99706-e Date of Disbursement 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 40.00</p>

SUBTOTAL of Disbursements This Page (optional)	160.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

PAGE 107 / 140

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

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

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Rosa Teresa Miranda</p> <p>Mailing Address 1267 Fountain Loop</p> <p>City Las Cruces State NM Zip Code 88007-8093</p> <p>Purpose of Disbursement FEA 100% Federal: Paid Volunteer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30b-40620-99754-e Date of Disbursement 10 / 31 / 2010</p> <p>Amount of Each Disbursement this Period 60.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Shannon Cardillo</p> <p>Mailing Address 1320 Penasco Road NE</p> <p>City Rio Rancho State NM Zip Code 87144-6317</p> <p>Purpose of Disbursement FEA 100% Federal: Paid Volunteer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30b-40580-99693-e Date of Disbursement 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 190.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Jalisa White</p> <p>Mailing Address 220 Wstrn Skies Drive SE Apt. 2046</p> <p>City Albuquerque State NM Zip Code 87123-4909</p> <p>Purpose of Disbursement FEA 100% Federal: Paid Volunteer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30b-40583-99696-e Date of Disbursement 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 420.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

670.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 108 / 140

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

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

A. Full Name (Last, First, Middle Initial) Oxford Communications, LLC <hr/> Mailing Address PO Box 1214 <hr/> City Alexandria State VA Zip Code 22313-1214 <hr/> Purpose of Disbursement GOTV Calls: No Federal Candidate Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40658-99983-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 6 / 2 0 1 0
	Amount of Each Disbursement this Period 509.14
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) Jason Deleau <hr/> Mailing Address 714 1/2 Kathryn Avenue <hr/> City Santa Fe State NM Zip Code 87505-1038 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40578-99677-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 42.50
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) Ms. Agnes Gaffney <hr/> Mailing Address 5905 Prenda De Oro NW <hr/> City Albuquerque State NM Zip Code 87120-1337 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40442-99365-e Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 1 0
	Amount of Each Disbursement this Period 110.00
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	661.64
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 109 / 140

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

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

A. Full Name (Last, First, Middle Initial) Cathy Alling <hr/> Mailing Address 5905 Prenda De Oro NW <hr/> City Albuquerque State NM Zip Code 87120-1337 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40443-99364-e Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 1 0
	Amount of Each Disbursement this Period 110.00
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) Mrs. Marjorie Teague <hr/> Mailing Address 4910 Simon Drive NW <hr/> City Albuquerque State NM Zip Code 87114-4329 <hr/> Purpose of Disbursement FEA 100% Federal: Political Consulting Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-7860-99796-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 5 / 2 0 1 0
	Amount of Each Disbursement this Period 5998.90
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) Scott Zacheus <hr/> Mailing Address 406 E Arriba Drive <hr/> City Hobbs State NM Zip Code 88240-3433 <hr/> Purpose of Disbursement FEA 100% Federal: Salary: FEA Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40377-99343-e Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 1 0
	Amount of Each Disbursement this Period 1028.91
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

7137.81

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 110 / 140

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

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

A.	Full Name (Last, First, Middle Initial) Ms. Pamela Navarette		Transaction ID: SB30b-40464-99799-e	
	Mailing Address 5320 San Mateo Boulevard NE Apt. F75		Date of Disbursement 11 / 05 / 2010	
	City Albuquerque	State NM	Zip Code 87109-6319	Amount of Each Disbursement this Period 176.00
	Purpose of Disbursement FEA 100% Federal: Paid Volunteer		Category/ Type	
	Candidate Name			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
	State: District:			

SUBTOTAL of Disbursements This Page (optional)	▶	176.00
TOTAL This Period (last page this line number only)	▶	86522.61

METHOD OF ALLOCATION FOR:

- **SHARED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS**
- **SHARED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES** (State, District and Local Party Committees Only)
- **ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE)**(Seperate Segregated Funds And Nonconnected Committees Only)

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

USE ONLY ONE SECTION, A or B

A. State and Local Party Committees

Fixed Percentage (select one)

- _____ Presidential-Only Election Year (28% Federal)
- _____ Presidential and Senate Election Year (36% Federal)
- _____ Senate-Only Election Year (21% Federal)
- X Non-Presidential and Non-Senate Election Year (15% Federal)

B. Separate Segregated Funds and Nonconnected Committees

Flat Minimum Federal Percentage

If the committee will allocate using the flat minimum percentage of 50% federal funds, check

or

If the committee is spending more than 50% federal funds, indicate ratio below

Federal..... %

Nonfederal..... %

This ratio applies to (check all that apply):

- Administrative Generic Voter Drive Public Communications Referencing Party Only

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

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

NAME OF ACCOUNT WF Allocation	DATE OF RECEIPT M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 1 0	TOTAL AMOUNT TRANSFERRED 7315.00
----------------------------------	---	-------------------------------------

BREAKDOWN OF TRANSFER RECEIVED		
i) Total Administrative		7315.00 Transaction ID: H3A-40482-82211
ii) Generic Voter Drive		Transaction ID:
iii) Exempt Activities		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising		
v) Direct Candidate Support (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support		
vi) Public Communications Referring Only to Party (Made by PAC)		
		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED	
TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred)	

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

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

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
WF Allocation	M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 1 0	1165.00

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative		1165.00	Transaction ID: H3A-40481-82210
ii) Generic Voter Drive			Transaction ID:
iii) Exempt Activities			Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)			
a) _____			Transaction ID:
b) _____			Transaction ID:
c) Total Amount Transferred for Direct Fundraising			
v) Direct Candidate Support (List of Activity or Event Identifier)			
a) _____			Transaction ID:
b) _____			Transaction ID:
c) Total Amount Transferred For Direct Candidate Support			
vi) Public Communications Referring Only to Party (Made by PAC)			Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred)	

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

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

NAME OF ACCOUNT WF Allocation	DATE OF RECEIPT M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 1 0	TOTAL AMOUNT TRANSFERRED 1905.00
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BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	1905.00	Transaction ID: H3A-40471-82205
ii) Generic Voter Drive		Transaction ID:
iii) Exempt Activities		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising		
v) Direct Candidate Support (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support		
vi) Public Communications Referring Only to Party (Made by PAC)		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred)	

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

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

NAME OF ACCOUNT WF Allocation	DATE OF RECEIPT M M / D D / Y Y Y Y 1 1 / 1 9 / 2 0 1 0	TOTAL AMOUNT TRANSFERRED 2500.00
----------------------------------	---	-------------------------------------

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	2500.00	Transaction ID: H3A-40499-82217
ii) Generic Voter Drive		Transaction ID:
iii) Exempt Activities		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising		
v) Direct Candidate Support (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support		
vi) Public Communications Referring Only to Party (Made by PAC)		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred)	

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

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

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
WF Allocation	M M / D D / Y Y Y Y 11 / 08 / 2010	1960.00

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative		1960.00	Transaction ID: H3A-40488-82213
ii) Generic Voter Drive			Transaction ID:
iii) Exempt Activities			Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)			
a) _____			Transaction ID:
b) _____			Transaction ID:
c) Total Amount Transferred for Direct Fundraising			
v) Direct Candidate Support (List of Activity or Event Identifier)			
a) _____			Transaction ID:
b) _____			Transaction ID:
c) Total Amount Transferred For Direct Candidate Support			
vi) Public Communications Referring Only to Party (Made by PAC)			Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred)	

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

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

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
WF Allocation	M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 1 0	-3979.00

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	-3979.00	Transaction ID: H3A-40474-82206
ii) Generic Voter Drive		Transaction ID:
iii) Exempt Activities		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising		
v) Direct Candidate Support (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support		
vi) Public Communications Referring Only to Party (Made by PAC)		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred)	

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

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

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
WF Allocation	M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 1 0	5035.00

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	5035.00	Transaction ID: H3A-40476-82208
ii) Generic Voter Drive		Transaction ID:
iii) Exempt Activities		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising		
v) Direct Candidate Support (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support		
vi) Public Communications Referring Only to Party (Made by PAC)		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred)	

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

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

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
WF Allocation	M M / D D / Y Y Y Y 11 / 11 / 2010	5437.00

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	5035.00	Transaction ID: H3A-40491-82215
ii) Generic Voter Drive	402.00	Transaction ID: H340491-82215
iii) Exempt Activities		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising		
v) Direct Candidate Support (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support		
vi) Public Communications Referring Only to Party (Made by PAC)		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	20936.00
TOTAL This Period (Generic Voter Drive)	402.00
TOTAL This Period (Exempt Activities)	0.00
TOTAL This Period (Direct Fundraising)	0.00
TOTAL This Period (Direct Candidate Support)	0.00
TOTAL This Period (Public Communications Referring Only to Party)	0.00
TOTAL This Period (Total Amount Transferred)	21338.00

A. Form/Schedule : **H3**

Transaction ID : **H340491-82215**

Additional Notes With Regards to H3 Transfers

_____ 10/27/2010 transfer for \$5,035.00: Admin Tsf _____
_____ 11/8/2010 transfer for \$1,960.00: Admin Tsf _____
_____ 11/11/2010 transfer for \$402.00: Admin Tsf _____
_____ 11/11/2010 transfer for \$5,035.00: Admin Tsf _____
_____ 11/19/2010 transfer for \$2,500.00: Admin Tsf _____
_____ 10/22/2010 transfer for \$1,905.00: Admin Tsf _____
_____ 10/25/2010 transfer for \$3,979.00: Admin Tsf _____
_____ 11/1/2010 transfer for \$1,165.00: Admin Tsf _____
_____ 11/2/2010 transfer for \$7,315.00: Admin Tsf _____

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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

A. Full Name (Last, First, Middle Initial) Mrs. Janel Causey			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 13116 Bear Dancer Trail NE			Allocated Activity or Event Year-To-Date 203805.92	
City State Zip Code Albuquerque NM 87112-3725	Category/ Type		Date M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 1 0	
Purpose of Disbursement: Salary: Non FEA			Transaction ID: H4-39238-99331-e	
Activity or Event Identifier: ADMINISTRATION B 411 - 1200				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
219.30		1242.67		1461.97

B. Full Name (Last, First, Middle Initial) Miss Tiffany Kardeen			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 11804 Palo Duro Avenue NE			Allocated Activity or Event Year-To-Date 203805.92	
City State Zip Code Albuquerque NM 87111-4145	Category/ Type		Date M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 1 0	
Purpose of Disbursement: Salary: Non FEA			Transaction ID: H4-34571-99330-e	
Activity or Event Identifier: ADMINISTRATION B 411 - 1200				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
176.97		1002.80		1179.77

C. Full Name (Last, First, Middle Initial) Ms. Heather Hall			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 142 Big Horn Ridge Court NE			Allocated Activity or Event Year-To-Date 203805.92	
City State Zip Code Albuquerque NM 87122-1902	Category/ Type		Date M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 1 0	
Purpose of Disbursement: Salary- Non FEA			Transaction ID: H4-40332-99734-e	
Activity or Event Identifier: ADMINISTRATION B 411 - 1200				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
109.03		617.85		726.88

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
505.30		2863.32		3368.62

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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

A. Full Name (Last, First, Middle Initial) Miss Tiffany Kardeen			Category/ Type		Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC							
Mailing Address 11804 Palo Duro Avenue NE					Allocated Activity or Event Year-To-Date <div style="border:1px solid black; padding:2px; text-align:center;">203805.92</div>							
City	State	Zip Code										
Albuquerque	NM	87111-4145										
Purpose of Disbursement: Salary- Non FEA			Date									
Activity or Event Identifier: ADMINISTRATION B 411 - 1200			M	M	/	D	D	/	Y	Y	Y	Y
			1	0	/	3	1	/	2	0	1	0
			Transaction ID: H4-34571-99731-e									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<div style="border:1px solid black; padding:2px; text-align:center;">176.97</div>		<div style="border:1px solid black; padding:2px; text-align:center;">1002.80</div>		<div style="border:1px solid black; padding:2px; text-align:center;">1179.77</div>

B. Full Name (Last, First, Middle Initial) Taxation & Revenue Department			Category/ Type		Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC							
Mailing Address PO Box 25128					Allocated Activity or Event Year-To-Date <div style="border:1px solid black; padding:2px; text-align:center;">203805.92</div>							
City	State	Zip Code										
Santa Fe	NM	87504-5128										
Purpose of Disbursement: CRS - September (Non-FEA Employees)			Date									
Activity or Event Identifier: ADMINISTRATION B 411 - 1200			M	M	/	D	D	/	Y	Y	Y	Y
			1	0	/	1	5	/	2	0	1	0
			Transaction ID: H4-18771-99987-e									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<div style="border:1px solid black; padding:2px; text-align:center;">52.92</div>		<div style="border:1px solid black; padding:2px; text-align:center;">299.90</div>		<div style="border:1px solid black; padding:2px; text-align:center;">352.82</div>

C. Full Name (Last, First, Middle Initial) EFTPS			Category/ Type		Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC							
Mailing Address Internal Revenue Serv Center					Allocated Activity or Event Year-To-Date <div style="border:1px solid black; padding:2px; text-align:center;">203805.92</div>							
City	State	Zip Code										
Ogden	UT	84201-0001										
Purpose of Disbursement: 941 Taxes			Date									
Activity or Event Identifier: ADMINISTRATION B 411 - 1200			M	M	/	D	D	/	Y	Y	Y	Y
			1	1	/	1	5	/	2	0	1	0
			Transaction ID: H4-20457-100022-e									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<div style="border:1px solid black; padding:2px; text-align:center;">217.95</div>		<div style="border:1px solid black; padding:2px; text-align:center;">1235.04</div>		<div style="border:1px solid black; padding:2px; text-align:center;">1452.99</div>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<div style="border:1px solid black; padding:2px; text-align:center;">447.84</div>		<div style="border:1px solid black; padding:2px; text-align:center;">2537.74</div>		<div style="border:1px solid black; padding:2px; text-align:center;">2985.58</div>

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<div style="border:1px solid black; padding:2px; text-align:center;"> </div>	<div style="border:1px solid black; padding:2px; text-align:center;"> </div>	<div style="border:1px solid black; padding:2px; text-align:center;"> </div>

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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

A. Full Name (Last, First, Middle Initial) LexisNexis			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 894166			Allocated Activity or Event Year-To-Date 203805.92		
City Los Angeles	State CA	Zip Code 90189-4166	Date <input type="text" value="11"/> / <input type="text" value="19"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Online Subscription			Transaction ID: H4-24366-100000-e		
Activity or Event Identifier: ADMINISTRATION B 411 - 1200					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
63.71		360.99		424.70

B. Full Name (Last, First, Middle Initial) PNM			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 17970			Allocated Activity or Event Year-To-Date 203805.92		
City Denver	State CO	Zip Code 80217-0970	Date <input type="text" value="11"/> / <input type="text" value="08"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Utilities: Electricity			Transaction ID: H4-23373-99818-e		
Activity or Event Identifier: ADMINISTRATION B 411 - 1200					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
32.11		181.94		214.05

C. Full Name (Last, First, Middle Initial) Howard & Koval, PC			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 30850			Allocated Activity or Event Year-To-Date 203805.92		
City Albuquerque	State NM	Zip Code 87190-0850	Date <input type="text" value="11"/> / <input type="text" value="08"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Accounting Services			Transaction ID: H4-20380-99819-e		
Activity or Event Identifier: ADMINISTRATION B 411 - 1200					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
252.79		1432.46		1685.25

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
348.61		1975.39		2324.00

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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

A. Full Name (Last, First, Middle Initial) Mrs. Pam Wolfe			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 15129			Allocated Activity or Event Year-To-Date 203805.92		
City	State	Zip Code	Date <input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2010"/>		
Las Cruces	NM	88004-5129			
Purpose of Disbursement: Salary- Non FEA			Category/ Type		
Activity or Event Identifier: ADMINISTRATION B 411 - 1200			Transaction ID: H4-2665-99733-e		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
165.32		936.84		1102.16

B. Full Name (Last, First, Middle Initial) Pitney Bowes Purchase Power			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 371874			Allocated Activity or Event Year-To-Date 203805.92		
City	State	Zip Code	Date <input type="text" value="11"/> / <input type="text" value="19"/> / <input type="text" value="2010"/>		
Pittsburgh	PA	15250-7874			
Purpose of Disbursement: Meter Refill			Category/ Type		
Activity or Event Identifier: ADMINISTRATION B 411 - 1200			Transaction ID: H4-18829-100004-e		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
30.00		170.00		200.00

C. Full Name (Last, First, Middle Initial) EFTPS			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address Internal Revenue Serv Center			Allocated Activity or Event Year-To-Date 203805.92		
City	State	Zip Code	Date <input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2010"/>		
Ogden	UT	84201-0001			
Purpose of Disbursement: 941 Taxes- Non FEA Employees			Category/ Type		
Activity or Event Identifier: ADMINISTRATION B 411 - 1200			Transaction ID: H4-20457-99812-e		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
217.95		1235.04		1452.99

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
413.27		2341.88		2755.15

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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

A. Full Name (Last, First, Middle Initial) Mrs. Pam Wolfe			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 15129			Allocated Activity or Event Year-To-Date 203805.92		
City Las Cruces	State NM	Zip Code 88004-5129	Date <input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Salary			Transaction ID: H4-2665-100025-e		
Activity or Event Identifier: ADMINISTRATION B 411 - 1200					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
165.32		936.83		1102.15

B. Full Name (Last, First, Middle Initial) Print Mart, LLC			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2408 Candelaria Road NE			Allocated Activity or Event Year-To-Date 203805.92		
City Albuquerque	State NM	Zip Code 87107-2037	Date <input type="text" value="11"/> / <input type="text" value="19"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Letterhead and envelopes			Transaction ID: H4-34496-100002-e		
Activity or Event Identifier: ADMINISTRATION B 411 - 1200					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
103.20		584.81		688.01

C. Full Name (Last, First, Middle Initial) Taxation & Revenue Department			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 25128			Allocated Activity or Event Year-To-Date 203805.92		
City Santa Fe	State NM	Zip Code 87504-5128	Date <input type="text" value="10"/> / <input type="text" value="22"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: WC 3Q 2010			Transaction ID: H4-18771-99445-e		
Activity or Event Identifier: ADMINISTRATION B 411 - 1200					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.58		14.62		17.20

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
271.10		1536.26		1807.36

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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

A. Full Name (Last, First, Middle Initial)
Marlin Business Bank
Mailing Address
PO Box 13604
City Philadelphia **State** PA **Zip Code** 19101-3604
Purpose of Disbursement:
Xerox Lease
Activity or Event Identifier:
ADMINISTRATION B 411 - 1200

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
203805.92
Date 11 / 19 / 2010
Transaction ID: H4-39721-100005-e

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
47.15		267.17		314.32

B. Full Name (Last, First, Middle Initial)
EFTPS
Mailing Address
Internal Revenue Serv Center
City Ogden **State** UT **Zip Code** 84201-0001
Purpose of Disbursement:
941 Taxes: Non FEA Employees
Activity or Event Identifier:
ADMINISTRATION B 411 - 1200

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
203805.92
Date 10 / 15 / 2010
Transaction ID: H4-20457-99334-e

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
217.95		1235.04		1452.99

C. Full Name (Last, First, Middle Initial)
PNM
Mailing Address
PO Box 17970
City Denver **State** CO **Zip Code** 80217-0970
Purpose of Disbursement:
Utilities: Electricity
Activity or Event Identifier:
ADMINISTRATION B 411 - 1200

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
203805.92
Date 11 / 08 / 2010
Transaction ID: H4-23373-99817-e

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
25.92		146.85		172.77

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
291.02		1649.06		1940.08

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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

A. Full Name (Last, First, Middle Initial) Mrs. Janel Causey			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 13116 Bear Dancer Trail NE			Allocated Activity or Event Year-To-Date 203805.92		
City Albuquerque	State NM	Zip Code 87112-3725	Date <input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Salary- Non FEA			Transaction ID: H4-39238-99732-e		
Activity or Event Identifier: ADMINISTRATION B 411 - 1200					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
219.30		1242.67		1461.97

B. Full Name (Last, First, Middle Initial) Mrs. Janel Causey			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 13116 Bear Dancer Trail NE			Allocated Activity or Event Year-To-Date 203805.92		
City Albuquerque	State NM	Zip Code 87112-3725	Date <input type="text" value="10"/> / <input type="text" value="22"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Reimbursement: Insurance			Transaction ID: H4-39238-99441-e		
Activity or Event Identifier: ADMINISTRATION B 411 - 1200					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
25.58		144.92		170.50

C. Full Name (Last, First, Middle Initial) Pitney Bowes Global Financial Svcs LLC			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 371887			Allocated Activity or Event Year-To-Date 203805.92		
City Pittsburgh	State PA	Zip Code 15250-7887	Date <input type="text" value="10"/> / <input type="text" value="22"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Equipment Lease			Transaction ID: H4-2872-99442-e		
Activity or Event Identifier: ADMINISTRATION B 411 - 1200					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
194.43		1101.76		1296.19

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
439.31		2489.35		2928.66

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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

A. Full Name (Last, First, Middle Initial) Mrs. Janel Causey			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 13116 Bear Dancer Trail NE			Allocated Activity or Event Year-To-Date 203805.92		
City Albuquerque	State NM	Zip Code 87112-3725	Date <input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Salary			Transaction ID: H4-39238-100024-e		
Activity or Event Identifier: ADMINISTRATION B 411 - 1200					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
219.30		1242.67		1461.97

B. Full Name (Last, First, Middle Initial) NM Department of Workforce Solutions			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 2281			Allocated Activity or Event Year-To-Date 203805.92		
City Albuquerque	State NM	Zip Code 87103-2281	Date <input type="text" value="10"/> / <input type="text" value="22"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: SUTA 3Q 2010			Transaction ID: H4-2868-99443-e		
Activity or Event Identifier: ADMINISTRATION B 411 - 1200					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
48.31		273.74		322.05

C. Full Name (Last, First, Middle Initial) Miss Tiffany Kardeen			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 11804 Palo Duro Avenue NE			Allocated Activity or Event Year-To-Date 203805.92		
City Albuquerque	State NM	Zip Code 87111-4145	Date <input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Salary			Transaction ID: H4-34571-100023-e		
Activity or Event Identifier: ADMINISTRATION B 411 - 1200					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
176.97		1002.80		1179.77

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
444.58		2519.21		2963.79

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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

A. Full Name (Last, First, Middle Initial) Ms. Heather Hall			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 142 Big Horn Ridge Court NE			Allocated Activity or Event Year-To-Date 203805.92																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td>/</td><td>1</td><td>5</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table> Transaction ID: H4-40332-100026-e			M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	1	5	/	2	0	1	0
M	M	/				D	D	/	Y	Y	Y	Y													
1	1	/	1	5	/	2	0	1	0																
Albuquerque	NM	87122-1902																							
Purpose of Disbursement: Salary			Category/ Type																						
Activity or Event Identifier: ADMINISTRATION B 411 - 1200																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
109.03		617.86		726.89

B. Full Name (Last, First, Middle Initial) Mrs. Pam Wolfe			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address PO Box 15129			Allocated Activity or Event Year-To-Date 203805.92																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td>/</td><td>1</td><td>5</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table> Transaction ID: H4-2665-99332-e			M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	1	5	/	2	0	1	0
M	M	/				D	D	/	Y	Y	Y	Y													
1	0	/	1	5	/	2	0	1	0																
Las Cruces	NM	88004-5129																							
Purpose of Disbursement: Salary: Non FEA			Category/ Type																						
Activity or Event Identifier: ADMINISTRATION B 411 - 1200																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
165.32		936.83		1102.15

C. Full Name (Last, First, Middle Initial) Mr. Mitch Meyers			Type of Allocated Activity: <input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input checked="" type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 1713 Gabaldon Drive NW			Allocated Activity or Event Year-To-Date 4467.00																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td>/</td><td>1</td><td>1</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table> Transaction ID: H4-25022-99964-e			M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	1	1	/	2	0	1	0
M	M	/				D	D	/	Y	Y	Y	Y													
1	1	/	1	1	/	2	0	1	0																
Albuquerque	NM	87104-2770																							
Purpose of Disbursement: Voter Registration Table			Category/ Type																						
Activity or Event Identifier: GENERIC VOTER DRIVE																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
70.95		402.05		473.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
345.30		1956.74		2302.04

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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

A. Full Name (Last, First, Middle Initial) Marlin Business Bank			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address PO Box 13604			Allocated Activity or Event Year-To-Date 203805.92																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td>/</td><td>2</td><td>2</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table> Transaction ID: H4-39721-99440-e			M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	2	2	/	2	0	1	0
M	M	/				D	D	/	Y	Y	Y	Y													
1	0	/	2	2	/	2	0	1	0																
Philadelphia	PA	19101-3604																							
Purpose of Disbursement: xerox lease			Category/ Type																						
Activity or Event Identifier: ADMINISTRATION B 411 - 1200																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
47.15		267.17		314.32

B. Full Name (Last, First, Middle Initial) Ms. Heather Hall			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 142 Big Horn Ridge Court NE			Allocated Activity or Event Year-To-Date 203805.92																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td>/</td><td>1</td><td>5</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table> Transaction ID: H4-40332-99333-e			M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	1	5	/	2	0	1	0
M	M	/				D	D	/	Y	Y	Y	Y													
1	0	/	1	5	/	2	0	1	0																
Albuquerque	NM	87122-1902																							
Purpose of Disbursement: Salary: Non FEA			Category/ Type																						
Activity or Event Identifier: ADMINISTRATION B 411 - 1200																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
109.03		617.86		726.89

C. Full Name (Last, First, Middle Initial) New Mexico Gas Company			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address PO Box 173341			Allocated Activity or Event Year-To-Date 203805.92																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td>/</td><td>0</td><td>8</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table> Transaction ID: H4-39214-99820-e			M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	8	/	2	0	1	0
M	M	/				D	D	/	Y	Y	Y	Y													
1	1	/	0	8	/	2	0	1	0																
Denver	CO	80217-3341																							
Purpose of Disbursement: Utilities: Gas			Category/ Type																						
Activity or Event Identifier: ADMINISTRATION B 411 - 1200																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.69		20.88		24.57

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
159.87		905.91		1065.78

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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

A. Full Name (Last, First, Middle Initial)
EFTPS
Mailing Address
Internal Revenue Serv Center
City State Zip Code
Ogden UT 84201-0001
Purpose of Disbursement:
940 taxes 3Q 2010 (non FEA Employees)
Activity or Event Identifier:
ADMINISTRATION B 411 - 1200

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
203805.92
Date 10 / 15 / 2010
Transaction ID: H4-20457-99986-e

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.60		37.40		44.00

B. Full Name (Last, First, Middle Initial)
Xerox Corporation
Mailing Address
PO Box 7405
City State Zip Code
Pasadena CA 91109-7405
Purpose of Disbursement:
Printing Charges
Activity or Event Identifier:
ADMINISTRATION B 411 - 1200

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
203805.92
Date 11 / 08 / 2010
Transaction ID: H4-7801-99816-e

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
31.88		180.64		212.52

C. Full Name (Last, First, Middle Initial)
Midway Office Supply Center, Inc.
Mailing Address
5900 Midway Park Boulevard NE
City State Zip Code
Albuquerque NM 87109-5805
Purpose of Disbursement:
Office Supplies
Activity or Event Identifier:
ADMINISTRATION B 411 - 1200

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
203805.92
Date 10 / 22 / 2010
Transaction ID: H4-20381-99447-e

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
18.15		102.88		121.03

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
56.63		320.92		377.55

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

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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

A. Full Name (Last, First, Middle Initial) Mountain States Mutual Casualty Co.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 93254			Allocated Activity or Event Year-To-Date 203805.92		
City Albuquerque	State NM	Zip Code 87199-3254	Date MM / DD / YYYY 11 / 19 / 2010		
Purpose of Disbursement: Insurance			Transaction ID: H4-34706-100001-e		
Activity or Event Identifier: ADMINISTRATION B 411 - 1200					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
186.49		1056.80		1243.29

B. Full Name (Last, First, Middle Initial) Midway Office Supply Center, Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 5900 Midway Park Boulevard NE			Allocated Activity or Event Year-To-Date 203805.92		
City Albuquerque	State NM	Zip Code 87109-5805	Date MM / DD / YYYY 11 / 19 / 2010		
Purpose of Disbursement: Office Supplies			Transaction ID: H4-20381-100003-e		
Activity or Event Identifier: ADMINISTRATION B 411 - 1200					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.20		57.78		67.98

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
196.69		1114.58		1311.27

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

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
3919.52		22210.36		26129.88

**SCHEDULE H5 (FEC Form 3X)
TRANSFERS OF LEVIN FUNDS FOR
SHARED FEDERAL ELECTION ACTIVITY**

(To be used by State, District and Local Party Committees Only)

NAME OF COMMITTEE (In Full)

Republican Campaign Committee Of New Mexico

NAME OF ACCOUNT

WF Allocation Tsfs

DATE OF RECEIPT

M M / D D / Y Y Y Y
1 1 / 0 4 / 2 0 1 0

TOTAL AMOUNT TRANSFERRED

510.00

Transaction ID: H540484-82212

BREAKDOWN OF THIS TRANSFER

i) **Voter Registration**

Total Amount Transferred for Voter Registration.....

VOTER REGISTRATION

510.00

ii) **Voter ID**

Total Amount Transferred for Voter ID.....

VOTER ID

0.00

iii) **GOTV**

Total Amount Transferred for GOTV.....

GOTV

0.00

iv) **Generic Campaign Activity**

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

GENERIC CAMPAIGN ACTIVITY

0.00

NAME OF ACCOUNT

WF Allocation Tsfs

DATE OF RECEIPT

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

TOTAL AMOUNT TRANSFERRED

625.00

Transaction ID: H540477-82209

BREAKDOWN OF THIS TRANSFER

i) **Voter Registration**

Total Amount Transferred for Voter Registration.....

VOTER REGISTRATION

625.00

ii) **Voter ID**

Total Amount Transferred for Voter ID.....

VOTER ID

0.00

iii) **GOTV**

Total Amount Transferred for GOTV.....

GOTV

0.00

iv) **Generic Campaign Activity**

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

GENERIC CAMPAIGN ACTIVITY

0.00

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED (Last Page Only)

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

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

TOTAL This Period (GOTV).....

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

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

**SCHEDULE H5 (FEC Form 3X)
TRANSFERS OF LEVIN FUNDS FOR
SHARED FEDERAL ELECTION ACTIVITY**

(To be used by State, District and Local Party Committees Only)

NAME OF COMMITTEE (In Full)

Republican Campaign Committee Of New Mexico

NAME OF ACCOUNT

WF Allocation Tsfs

DATE OF RECEIPT

M M / D D / Y Y Y Y
1 1 / 1 5 / 2 0 1 0

TOTAL AMOUNT TRANSFERRED

735.00

Transaction ID: H540495-82216

BREAKDOWN OF THIS TRANSFER

i) **Voter Registration**

Total Amount Transferred for Voter Registration.....

VOTER REGISTRATION

735.00

ii) **Voter ID**

Total Amount Transferred for Voter ID.....

VOTER ID

0.00

iii) **GOTV**

Total Amount Transferred for GOTV.....

GOTV

0.00

iv) **Generic Campaign Activity**

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

GENERIC CAMPAIGN ACTIVITY

0.00

NAME OF ACCOUNT

WF Allocation Tsfs

DATE OF RECEIPT

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 1 0

TOTAL AMOUNT TRANSFERRED

520.00

Transaction ID: H540463-82203

BREAKDOWN OF THIS TRANSFER

i) **Voter Registration**

Total Amount Transferred for Voter Registration.....

VOTER REGISTRATION

520.00

ii) **Voter ID**

Total Amount Transferred for Voter ID.....

VOTER ID

0.00

iii) **GOTV**

Total Amount Transferred for GOTV.....

GOTV

0.00

iv) **Generic Campaign Activity**

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

GENERIC CAMPAIGN ACTIVITY

0.00

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED (Last Page Only)

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

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

TOTAL This Period (GOTV).....

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

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

**SCHEDULE H5 (FEC Form 3X)
 TRANSFERS OF LEVIN FUNDS FOR
 SHARED FEDERAL ELECTION ACTIVITY**
 (To be used by State, District and Local Party Committees Only)

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

NAME OF ACCOUNT WF Allocation Tsfs	DATE OF RECEIPT <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	1		2	0	1	0	TOTAL AMOUNT TRANSFERRED <table border="1"> <tr> <td>616.00</td> </tr> </table> Transaction ID: H540470-82204	616.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		2	1		2	0	1	0														
616.00																							

BREAKDOWN OF THIS TRANSFER

		VOTER REGISTRATION		
i) Voter Registration	Total Amount Transferred for Voter Registration.....	<table border="1"><tr><td>616.00</td></tr></table>	616.00	
616.00				
		VOTER ID		
ii) Voter ID	Total Amount Transferred for Voter ID.....	<table border="1"><tr><td>0.00</td></tr></table>	0.00	
0.00				
		GOTV		
iii) GOTV	Total Amount Transferred for GOTV.....	<table border="1"><tr><td>0.00</td></tr></table>	0.00	
0.00				
		GENERIC CAMPAIGN ACTIVITY		
iv) Generic Campaign Activity	Total Amount Transferred for Generic Campaign Activity.....	<table border="1"><tr><td>0.00</td></tr></table>	0.00	
0.00				

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED (Last Page Only)

TOTAL This Period (Voter Registration).....	<table border="1"><tr><td>3006.00</td></tr></table>	3006.00
3006.00		
TOTAL This Period (Voter ID).....	<table border="1"><tr><td>0.00</td></tr></table>	0.00
0.00		
TOTAL This Period (GOTV).....	<table border="1"><tr><td>0.00</td></tr></table>	0.00
0.00		
TOTAL This Period (Generic Campaign Activity).....	<table border="1"><tr><td>0.00</td></tr></table>	0.00
0.00		
TOTAL This Period (Total Amount of Transfers Received).....	<table border="1"><tr><td>3006.00</td></tr></table>	3006.00
3006.00		

**SCHEDULE H6 (FEC Form 3X)
DISBURSEMENTS OF FEDERAL AND LEVIN FUNDS
FOR SHARED FEDERAL ELECTION ACTIVITY**

(To be used by State, District and Local Party Committees Only)

NAME OF COMMITTEE (In Full)

Republican Campaign Committee Of New Mexico

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

Dona Ana County FRW

Type of Allocated Activity or Event:

Voter Registration GOTV
 Voter ID Generic Campaign

Mailing Address
15 Happy Trails Drive

Allocated Activity or Event Year-To-Date

23529.00

City State Zip Code
Las Cruces NM 88005-3973

Purpose of Disbursement
Replace lost check: original date 10/7/10

Category/
Type

Date / /

FEDERAL SHARE + LEVIN SHARE = TOTAL AMOUNT
19.20 + 108.80 = 128.00

Transaction ID: H6-30466-99968-e

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

Valencia County FRW

Type of Allocated Activity or Event:

Voter Registration GOTV
 Voter ID Generic Campaign

Mailing Address
PO Box 1282

Allocated Activity or Event Year-To-Date

23529.00

City State Zip Code
Los Lunas NM 87031-1282

Purpose of Disbursement
Voter Registration Table

Category/
Type

Date / /

FEDERAL SHARE + LEVIN SHARE = TOTAL AMOUNT
15.60 + 88.40 = 104.00

Transaction ID: H6-40655-99978-e

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

Dona Ana County FRW

Type of Allocated Activity or Event:

Voter Registration GOTV
 Voter ID Generic Campaign

Mailing Address
15 Happy Trails Drive

Allocated Activity or Event Year-To-Date

23529.00

City State Zip Code
Las Cruces NM 88005-3973

Purpose of Disbursement
Lost Check: original date 10/7/10

Category/
Type

Date / /

FEDERAL SHARE + LEVIN SHARE = TOTAL AMOUNT
-19.20 + -108.80 = -128.00

Transaction ID: H6-30466-99967-e

SUBTOTAL of Shared Federal and Levin Activity This Page

FEDERAL SHARE + LEVIN SHARE = TOTAL AMOUNT
15.60 + 88.40 = 104.00

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

FEDERAL SHARE TOTAL AMOUNT
LEVIN SHARE

TOTAL This Period for the Levin Share

**SCHEDULE H6 (FEC Form 3X)
DISBURSEMENTS OF FEDERAL AND LEVIN FUNDS
FOR SHARED FEDERAL ELECTION ACTIVITY**

(To be used by State, District and Local Party Committees Only)

NAME OF COMMITTEE (In Full)

Republican Campaign Committee Of New Mexico

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

FRW of Lincoln County

Type of Allocated Activity or Event:

Voter Registration GOTV
 Voter ID Generic Campaign

Mailing Address
PO Box 987

Allocated Activity or Event Year-To-Date

23529.00

City State Zip Code
Alto NM 88312-0987

Purpose of Disbursement
Voter Registration Table

Category/
Type

Date / /

FEDERAL SHARE + LEVIN SHARE = TOTAL AMOUNT
106.80 + 605.20 = 712.00

Transaction ID: H6-29518-99979-e

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

Mr. Mitch Meyers

Type of Allocated Activity or Event:

Voter Registration GOTV
 Voter ID Generic Campaign

Mailing Address
1713 Gabaldon Drive NW

Allocated Activity or Event Year-To-Date

23529.00

City State Zip Code
Albuquerque NM 87104-2770

Purpose of Disbursement
Voter Registration Table

Category/
Type

Date / /

FEDERAL SHARE + LEVIN SHARE = TOTAL AMOUNT
92.40 + 523.60 = 616.00

Transaction ID: H6-25022-99305-e

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

Mr. Mitch Meyers

Type of Allocated Activity or Event:

Voter Registration GOTV
 Voter ID Generic Campaign

Mailing Address
1713 Gabaldon Drive NW

Allocated Activity or Event Year-To-Date

23529.00

City State Zip Code
Albuquerque NM 87104-2770

Purpose of Disbursement
Voter Registration Table

Category/
Type

Date / /

FEDERAL SHARE + LEVIN SHARE = TOTAL AMOUNT
110.55 + 626.45 = 737.00

Transaction ID: H6-25022-99599-e

SUBTOTAL of Shared Federal and Levin Activity This Page

FEDERAL SHARE + LEVIN SHARE = TOTAL AMOUNT
309.75 + 1755.25 = 2065.00

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

FEDERAL SHARE TOTAL AMOUNT
LEVIN SHARE

TOTAL This Period for the Levin Share

SCHEDULE L (FEC Form 3X)

AGGREGATION PAGE: LEVIN FUNDS

Transaction ID: Levin-1

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

	COLUMN A TOTAL THIS PERIOD	COLUMN B YEAR-TO-DATE
1. RECEIPTS FROM PERSONS		
a. Itemized..... <small>(Use Schedule L-A)</small>	0.00	85000.00
b. Unitemized.....	0.00	0.00
c. Total.....	0.00	85000.00
2. OTHER RECEIPTS.....	0.00	23750.00
3. TOTAL RECEIPTS..... <small>(Add Lines 1c and 2)</small>	0.00	108750.00
4. TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT <small>(Use Schedule L-B)</small>		
a. Voter Registration.....	3006.00	18728.00
b. Voter ID.....	0.00	13130.00
c. GOTV.....	0.00	7140.00
d. Generic Campaign.....	0.00	0.00
e. Total.....	3006.00	38998.00
5. OTHER DISBURSEMENTS.....	0.00	65266.00
6. TOTAL DISBURSEMENTS..... <small>(Add Lines 4e and 5)</small>	3006.00	104264.00
7. BEGINNING CASH ON HAND..... <small>(for Column B, use cash as of January 1st)</small>	7492.00	0.00
8. RECEIPTS..... <small>(from Line 3)</small>	0.00	108750.00
9. SUBTOTAL..... <small>(Add Lines 7 and 8)</small>	7492.00	108750.00
10. DISBURSEMENTS..... <small>(From Line 6)</small>	3006.00	104264.00
11. ENDING CASH ON HAND..... <small>(Subtract Line 10 From Line 9)</small>	4486.00	4486.00

**SCHEDULE L-B (FEC Form 3X)
ITEMIZED DISBURSEMENTS
OF LEVIN FUNDS**

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

FOR LINE NUMBER:
(check only one)

PAGE 140 / 140

4a 4c 5
 4b 4d

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

<p>A. Full Name (Last, First, Middle Initial) / Full Organization Name Republican Campaign Committee Of New Mexico</p> <p>Mailing Address PO Box 94083</p> <p>City State Zip Code Albuquerque NM 87199-4083</p> <p>Purpose of Disbursement Admin Tsf</p>	<p>Transaction ID: SBSL4A-82216 Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period <input type="text" value="735.00"/></p> <p>Account: 1</p>
<p>B. Full Name (Last, First, Middle Initial) / Full Organization Name Republican Campaign Committee Of New Mexico</p> <p>Mailing Address PO Box 94083</p> <p>City State Zip Code Albuquerque NM 87199-4083</p> <p>Purpose of Disbursement Admin Tsf</p>	<p>Transaction ID: SBSL4A-82204 Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period <input type="text" value="616.00"/></p> <p>Account: 1</p>
<p>C. Full Name (Last, First, Middle Initial) / Full Organization Name Republican Campaign Committee Of New Mexico</p> <p>Mailing Address PO Box 94083</p> <p>City State Zip Code Albuquerque NM 87199-4083</p> <p>Purpose of Disbursement Admin Tsf</p>	<p>Transaction ID: SBSL4A-82212 Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period <input type="text" value="510.00"/></p> <p>Account: 1</p>
<p>D. Full Name (Last, First, Middle Initial) / Full Organization Name Republican Campaign Committee Of New Mexico</p> <p>Mailing Address PO Box 94083</p> <p>City State Zip Code Albuquerque NM 87199-4083</p> <p>Purpose of Disbursement Admin Tsf</p>	<p>Transaction ID: SBSL4A-82209 Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period <input type="text" value="625.00"/></p> <p>Account: 1</p>
<p>E. Full Name (Last, First, Middle Initial) / Full Organization Name Republican Campaign Committee Of New Mexico</p> <p>Mailing Address PO Box 94083</p> <p>City State Zip Code Albuquerque NM 87199-4083</p> <p>Purpose of Disbursement Admin Tsf</p>	<p>Transaction ID: SBSL4A-82203 Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period <input type="text" value="520.00"/></p> <p>Account: 1</p>
<p>SUBTOTAL of Disbursements This Page (optional) ▶ <input type="text" value="3006.00"/></p>	
<p>TOTAL This Period (last page this line number only) ▶ <input type="text" value="3006.00"/></p>	