

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

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

2. **FEC IDENTIFICATION NUMBER** ▼ C C00501254 CITY ▲ STATE ▲ ZIP CODE ▲
STATE ▼ DISTRICT
NM 01

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

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

(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on M M / D D / Y Y Y Y in the State of NM
11 / 04 / 2014

5. Covering Period M M / D D / Y Y Y Y through M M / D D / Y Y Y Y
10 / 16 / 2014 through 11 / 24 / 2014

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

Type or Print Name of Treasurer Ms. Jeannine L. Daniels

Signature of Treasurer Ms. Jeannine L. Daniels *[Electronically Filed]* Date M M / D D / Y Y Y Y
01 / 30 / 2015

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

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Friends of Michelle

Report Covering the Period: From: M M / D D / Y Y Y Y 10 / 16 / 2014 To: M M / D D / Y Y Y Y 11 / 24 / 2014

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	85391.05	1706573.27
(b) Total Contribution Refunds (from Line 20(d))	550.00	9850.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	84841.05	1696723.27
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	101880.05	1213583.09
(b) Total Offsets to Operating Expenditures (from Line 14).....	1000.00	33494.17
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	100880.05	1180088.92
8. Cash on Hand at Close of Reporting Period (from Line 27).....	239881.17	
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	

For further information contact:

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

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

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 07/05)

- If the candidate participated in the general election, use this form for the 30-day Post-General report.
- If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name

Friends of Michelle

Report Covering the Period: From: 10 / 16 / 2014 To: 11 / 24 / 2014

I. RECEIPTS

COLUMN A Total this Period	COLUMN B Election Cycle Total as of 11 / 04 / 2014 (date of general election)	COLUMN C Total for 11 / 05 / 2014 (date after general election)
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other than Political Committees		
(i) Itemized (use Schedule A)		
27765.00	819064.53	0.00
(ii) Unitemized		
4976.05	68974.33	464.05
(iii) Total of contributions from individuals		
32741.05	888038.86	464.05
(b) Political Party Committees		
0.00	0.00	0.00
(c) Other Political Committees		
52650.00	818534.41	0.00

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 4 / 101

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
(d) The Candidate		
0.00	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))		
85391.05	1706573.27	464.05
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
0.00	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
0.00	0.00	0.00
(b) All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))		
0.00	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, rebates, etc.)		
1000.00	33494.17	1000.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)		
0.00	0.00	0.00
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		
86391.05	1740067.44	1464.05

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 5 / 101

Write or Type Committee Name

Friends of Michelle

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

II. DISBURSEMENTS

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
17. OPERATING EXPENDITURES		
101880.05	1213583.09	33221.08
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES		
0.00	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate		
0.00	51000.00	0.00
(b) Of All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))		
0.00	51000.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees		
550.00	8850.00	550.00
(b) Political Party Committees		
0.00	0.00	0.00

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 6 / 101

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
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(c) Other Political Committees (such as PACs)

0.00	1000.00	0.00
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(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b) and (c))

550.00	9850.00	550.00
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21. OTHER DISBURSEMENTS

56257.50	260220.53	2400.00
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22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d) and 21)

158687.55	1534653.62	36171.08
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III. NET CONTRIBUTIONS (OTHER THAN LOANS)

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract Line 20(d) from Line 11(e))

84841.05	1696723.27	-85.95
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IV. NET OPERATING EXPENDITURES

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract Line 14 from Line 17)

100880.05	1180088.92	32221.08
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V. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	312177.67
24. TOTAL RECIEPTS THIS PERIOD (from Line 16).....	86391.05
25. SUBTOTAL (add Line 23 and Line 24).....	398568.72
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	158687.55
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	239881.17

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 101
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

NAME OF COMMITTEE (In Full)
Friends of Michelle

A. Full Name (Last, First, Middle Initial)
Paul F. Abrams

Mailing Address **PO Box 278**

City **Santa Fe** State **NM** Zip Code **87504-0278**

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

Name of Employer **Paul F. Abrams & Assoc., P.C.** Occupation **Attorney**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 20 / 2014

Transaction ID : C10544425

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Bonnie Anderson

Mailing Address **522 Edith Blvd SE**

City **Albuquerque** State **NM** Zip Code **87102-3921**

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

Name of Employer **Albuquerque Public Schools** Occupation **Education Administrator**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3000.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 27 / 2014

Transaction ID : C10562260

Amount of Each Receipt this Period
1000.00

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

Mailing Address **9419 Callaway Cir NE**

City **Albuquerque** State **NM** Zip Code **87111-5858**

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 25 / 2014

Transaction ID : C10562391

Amount of Each Receipt this Period
250.00

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 101
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Friends of Michelle

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

Mailing Address 423 Tulane PI NE

City Albuquerque State NM Zip Code 87106-2155

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

Name of Employer Self Occupation Property Manager and Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **800.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 27 / 2014

Transaction ID : C10567759

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Carl David Bedford

Mailing Address 376 Sandlewood Loop

City Avinger State TX Zip Code 75630-8510

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

Name of Employer None Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **475.00**

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 04 / 2014

Transaction ID : C10589141

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
Margaret Moses Branch

Mailing Address 8635 Rio Grande Blvd NW

City Los Ranchos State NM Zip Code 87114-1301

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

Name of Employer Branch Law Firm Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3600.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 27 / 2014

Transaction ID : C10562263

Amount of Each Receipt this Period
1000.00

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

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

1125.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 101
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Friends of Michelle

A. Full Name (Last, First, Middle Initial)
Terrence J. Brunner

Mailing Address 601 Luna Blvd NW

City Albuquerque State NM Zip Code 87102-1931

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

Name of Employer USDA Occupation State Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
255.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 25 / 2014

Transaction ID : C10562389

Amount of Each Receipt this Period
55.00

B. Full Name (Last, First, Middle Initial)
James D. Bullington

Mailing Address PO Box 9534

City Santa Fe State NM Zip Code 87504-9534

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

Name of Employer Self Occupation Government Relations

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 01 / 2014

Transaction ID : C10583043

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Christopher S. Catechis

Mailing Address 5733 Guadalupe Trl NW

City Albuquerque State NM Zip Code 87107-5425

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

Name of Employer Sandia National Laboratories Occupation Environmental Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 27 / 2014

Transaction ID : C10587795

Amount of Each Receipt this Period
150.00

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

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

455.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 101
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Michelle

A. Gail Chasey
 Full Name (Last, First, Middle Initial)
 Mailing Address 1206 Las Lomas Rd NE
 City Albuquerque State NM Zip Code 87106-4526
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Attorney
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 205.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 25 / 2014
Transaction ID : C10562258
 Amount of Each Receipt this Period
 55.00

B. Scott Clark
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 14641
 City Albuquerque State NM Zip Code 87191-4641
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Double Eagle Real Estate Occupation Realtor
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 300.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 20 / 2014
Transaction ID : C10548889
 Amount of Each Receipt this Period
 300.00

C. Frank Ted Cloak Jr
 Full Name (Last, First, Middle Initial)
 Mailing Address 1613 Fruit Ave NW
 City Albuquerque State NM Zip Code 87104-1231
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation Retired
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 465.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 25 / 2014
Transaction ID : C10561186
 Amount of Each Receipt this Period
 110.00

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

465.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 101
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Michelle

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

Mailing Address 1613 Fruit Ave NW

City Albuquerque State NM Zip Code 87104-1231

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

Name of Employer None Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **465.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 28 / 2014

Transaction ID : C10567988

Amount of Each Receipt this Period
20.00

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

Mailing Address 1715 San Cristobal Rd SW

City Albuquerque State NM Zip Code 87104-1130

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

Name of Employer None Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 16 / 2014

Transaction ID : C10533049

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Judith Enright

Mailing Address 12 Mimbres Ct

City Placitas State NM Zip Code 87043-9397

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

Name of Employer Presbyterian Medical Services Occupation Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 23 / 2014

Transaction ID : C10554143

Amount of Each Receipt this Period
25.00

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

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

145.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 101
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Friends of Michelle

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

Mailing Address PO Box 6638

City Albuquerque State NM Zip Code 87197-6638

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

Name of Employer Epstein & Company LLC Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 30 / 2014

Transaction ID : C10576917

Amount of Each Receipt this Period
250.00

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

Mailing Address 900 Vassar Dr NE

City Albuquerque State NM Zip Code 87106-2728

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

Name of Employer University of New Mexico Occupation Physicist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **241.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 18 / 2014

Transaction ID : C10541554

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
April E. Fletcher

Mailing Address PO Box 1715

City Tijeras State NM Zip Code 87059-1715

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

Name of Employer None Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **685.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 27 / 2014

Transaction ID : C10567885

Amount of Each Receipt this Period
250.00

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

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

550.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 101
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Friends of Michelle

A. Full Name (Last, First, Middle Initial)
Yolanda Gallegos

Mailing Address 902 Sierra Pl SE

City Albuquerque State NM Zip Code 87108-3379

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

Name of Employer Gallegos Legal Group Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **690.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 27 / 2014

Transaction ID : C10567757

Amount of Each Receipt this Period
100.00

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

Mailing Address 4808 College Heights Drive NW

City Albuquerque State NM Zip Code 87120-2435

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

Name of Employer Center for Civic Values Occupation Nonprofit CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1800.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 27 / 2014

Transaction ID : C10562103

Amount of Each Receipt this Period
65.00

C. Full Name (Last, First, Middle Initial)
Judy Griego

Mailing Address 2569 Elfego Rd NW

City Albuquerque State NM Zip Code 87107-3085

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

Name of Employer NM Air National Guard Occupation Chief of Joint Staff

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 27 / 2014

Transaction ID : C10562463

Amount of Each Receipt this Period
250.00

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

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

415.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 101
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Michelle

A. Full Name (Last, First, Middle Initial)
Edmund A. Healy

Mailing Address **PO Box 760**

City **Taos** State **NM** Zip Code **87571-0760**

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

Name of Employer **Self** Occupation **Investor**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 27 / 2014

Transaction ID : C10562377

Amount of Each Receipt this Period
2000.00

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

Mailing Address **510 Laguna Blvd SW**

City **Albuquerque** State **NM** Zip Code **87104-1117**

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

Name of Employer **Self** Occupation **Government Relations**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 25 / 2014

Transaction ID : C10558631

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Stanley E. Hubbard

Mailing Address **4904 Guadalupe Trail NW**

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

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

Name of Employer **Hubbard Broadcasting Inc.** Occupation **Business Owner**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
11 / 04 / 2014

Transaction ID : C10598968

Amount of Each Receipt this Period
1000.00

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

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

3050.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 101
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Michelle

A. Full Name (Last, First, Middle Initial)
Jicarilla Apache Nation

Mailing Address **President Ty Vicenti**
PO Box 507

City **Dulce** State **NM** Zip Code **87528**

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
10 / 31 / 2014

Transaction ID : C10582952

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Mary Ann Joca

Mailing Address **915 Los Arboles Ave NW**

City **Albuquerque** State **NM** Zip Code **87107-1139**

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

Name of Employer Occupation
None Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
10 / 30 / 2014

Transaction ID : C10576827

Amount of Each Receipt this Period
 20.00

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

Mailing Address **915 Los Arboles Ave NW**

City **Albuquerque** State **NM** Zip Code **87107-1139**

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

Name of Employer Occupation
None Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
11 / 01 / 2014

Transaction ID : C10582990

Amount of Each Receipt this Period
 25.00

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

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

1045.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 101
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Michelle

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

Mailing Address 4808 College Heights Drive NW

City Albuquerque State NM Zip Code 87120-2435

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

Name of Employer Johnson Barnhouse & Keegan LLP Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1800.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 27 / 2014

Transaction ID : C10562104

Amount of Each Receipt this Period
65.00

B. Full Name (Last, First, Middle Initial)
Daniel H. Kloke

Mailing Address 3804 Copper Ave NE Apt 1

City Albuquerque State NM Zip Code 87108-1049

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

Name of Employer DiscoverOrg LLC Occupation Director IT/DEV

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1300.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 18 / 2014

Transaction ID : C10541619

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Randy J. Knudson

Mailing Address 212 W 1st St

City Portales State NM Zip Code 88130-5920

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

Name of Employer Doerr & Knudson PA Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 31 / 2014

Transaction ID : C10580857

Amount of Each Receipt this Period
250.00

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

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

815.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 101
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Michelle

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

Mailing Address 1324 Camino Amparo NW

City Albuquerque State NM Zip Code 87107-2606

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

Name of Employer Walz and Associates Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **520.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 16 / 2014

Transaction ID : C10533198

Amount of Each Receipt this Period
20.00

B. Full Name (Last, First, Middle Initial)
Cornelia W. Lange

Mailing Address 1310 Constitution Ct NE

City Albuquerque State NM Zip Code 87112-4601

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

Name of Employer None Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 03 / 2014

Transaction ID : C10588817

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Steve Maestas

Mailing Address 6801 Jefferson St NE Ste 200

City Albuquerque State NM Zip Code 87109-4390

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

Name of Employer NAI Maestas & Ward Occupation Commercial Realtor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 31 / 2014

Transaction ID : C10580645

Amount of Each Receipt this Period
500.00

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

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

770.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 101
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Friends of Michelle

A. Full Name (Last, First, Middle Initial)
Susan H. Margison

Mailing Address 821 Piedra Vista Rd NE

City Albuquerque State NM Zip Code 87123-1955

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

Name of Employer None Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
205.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 25 / 2014

Transaction ID : C10562440

Amount of Each Receipt this Period
55.00

B. Full Name (Last, First, Middle Initial)
Minda McGonagle

Mailing Address 2505 Candelaria Rd NW

City Albuquerque State NM Zip Code 87107-2908

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

Name of Employer Innerspace Occupation Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 28 / 2014

Transaction ID : C10568360

Amount of Each Receipt this Period
350.00

C. Full Name (Last, First, Middle Initial)
Mississippi Band of Choctaw Indians

Mailing Address PO Box 6090

City Choctaw State MS Zip Code 39350-6090

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 04 / 2014

Transaction ID : C10596350

Amount of Each Receipt this Period
1000.00

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

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

1405.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 101
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Friends of Michelle

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

Mailing Address 3 Garden Park Cir NW

City Albuquerque State NM Zip Code 87107-2620

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

Name of Employer Self Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1525.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 29 / 2014

Transaction ID : C10571248

Amount of Each Receipt this Period
75.00

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

Mailing Address 1206 Las Lomas Rd NE

City Albuquerque State NM Zip Code 87106-4526

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

Name of Employer Norvell Law Firm Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 25 / 2014

Transaction ID : C10562293

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Criostoir S. O'Cleireachain

Mailing Address 3804 Tewa Dr NE

City Albuquerque State NM Zip Code 87111-7901

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

Name of Employer Carter & Valle Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 31 / 2014

Transaction ID : C10580858

Amount of Each Receipt this Period
250.00

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

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

575.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 101
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

NAME OF COMMITTEE (In Full)
Friends of Michelle

A. Full Name (Last, First, Middle Initial)
Erin B. O'Connell

Mailing Address 737 Quincy St NE

City Albuquerque State NM Zip Code 87110-6325

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

Name of Employer O'Connell Law, LLC Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 31 / 2014

Transaction ID : C10582928

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Nancy J. Oriola

Mailing Address 829 Fairway Rd NW

City Albuquerque State NM Zip Code 87107-5720

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

Name of Employer Decades, LLC Occupation CEO, Clinical Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 27 / 2014

Transaction ID : C10587773

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Andrew Ortiz Esq.

Mailing Address PO Box 704

City Albuquerque State NM Zip Code 87103-0704

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

Name of Employer Self Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 21 / 2014

Transaction ID : C10554452

Amount of Each Receipt this Period
150.00

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

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

650.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 101
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Michelle

Full Name (Last, First, Middle Initial) Thomas Padilla		Date of Receipt M M / D D / Y Y Y Y 10 / 23 / 2014
Mailing Address 7770 Jefferson St NE Suite 101		Transaction ID : C10554553
City Albuquerque	State Zip Code NM 87109-4368	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer HUB International Insurance Services	Occupation Sr. VP	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) Bertrand Parnall		Date of Receipt M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 724 Hermosa Dr NE		Transaction ID : C10579933
City Albuquerque	State Zip Code NM 87110-7706	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Parnall Law Firm	Occupation Attorney	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1700.00	

Full Name (Last, First, Middle Initial) Robert Pasternack		Date of Receipt M M / D D / Y Y Y Y 11 / 02 / 2014
Mailing Address 305 W Glendale Ave		Transaction ID : C10583428
City Alexandria	State Zip Code VA 22301-2406	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Accelify	Occupation Psychologist	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

SUBTOTAL of Receipts This Page (optional).....	1250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 101
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Michelle

A. Full Name (Last, First, Middle Initial)
Pueblo de Cochiti

Mailing Address **PO Box 70**

City **Cochiti Pueblo** State **NM** Zip Code **87072-0070**

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

Name of Employer _____ Occupation _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date
 _____ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 28 / 2014

Transaction ID : C10568183

Amount of Each Receipt this Period
 _____ 250.00

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

Mailing Address **PO Box 237**

City **Laguna** State **NM** Zip Code **87026-0237**

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

Name of Employer _____ Occupation _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date
 _____ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 22 / 2014

Transaction ID : C10564557

Amount of Each Receipt this Period
 _____ 1500.00

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

Mailing Address **PO Box 1119**

City **Ohkay Owingeh** State **NM** Zip Code **87566-1119**

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

Name of Employer _____ Occupation _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date
 _____ 3000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 23 / 2014

Transaction ID : C10555033

Amount of Each Receipt this Period
 _____ 1000.00

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

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

_____ 2750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 101
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Michelle

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

Mailing Address 481 Sandia Loop Rd

City Bernalillo State NM Zip Code 87004

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5100.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 21 / 2014

Transaction ID : C10549673

Amount of Each Receipt this Period
1100.00

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

Mailing Address PO Box 580

City Espanola State NM Zip Code 87532-0580

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 31 / 2014

Transaction ID : C10580656

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Joseph O. Quintana

Mailing Address 3919 Ortiz Ct NE
Apt C

City Albuquerque State NM Zip Code 87110-1267

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

Name of Employer Occupation
Wellkeeper, Inc. Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 23 / 2014

Transaction ID : C10554459

Amount of Each Receipt this Period
250.00

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

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

2350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 101
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Friends of Michelle

A. Full Name (Last, First, Middle Initial)
Ousama M Rasheed Esq.

Mailing Address 1024 2nd St NW

City	State	Zip Code
Albuquerque	NM	87102-2216

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

Name of Employer	Occupation
Rasheed & Associates PC	Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 31 / 2014

Transaction ID : C10582930

Amount of Each Receipt this Period
750.00

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

Mailing Address 907 Silver Ave SW

City	State	Zip Code
Albuquerque	NM	87102-3046

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

Name of Employer	Occupation
Self	Education Consultant/Lobbyist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 25 / 2014

Transaction ID : C10582452

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Pia D. Salazar

Mailing Address 2521 Elfego Rd NW

City	State	Zip Code
Albuquerque	NM	87107-3010

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

Name of Employer	Occupation
Salazar And Sullivan Law Firm	Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
550.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 31 / 2014

Transaction ID : C10580856

Amount of Each Receipt this Period
250.00

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

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

1100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 101
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Michelle

A. Full Name (Last, First, Middle Initial)
Bernie S. Sanchez

Mailing Address 1107 Camino Del Rio NW

City Albuquerque State NM Zip Code 87114-1837

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

Name of Employer None Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 01 / 2014

Transaction ID : C10583008

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Diane M Sanchez

Mailing Address PO Box 2411

City Corrales State NM Zip Code 87048-2411

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

Name of Employer Self Occupation Accountant/Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 23 / 2014

Transaction ID : C10584453

Amount of Each Receipt this Period
250.00

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

Mailing Address PO Box 739

City Santa Cruz State NM Zip Code 87567-0739

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

Name of Employer Akal Security Inc Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 27 / 2014

Transaction ID : C10562028

Amount of Each Receipt this Period
200.00

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

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

700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 101
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Friends of Michelle

A. Full Name (Last, First, Middle Initial)
Kate M. Southard

Mailing Address **PO Box 93367**

City **Albuquerque** State **NM** Zip Code **87199-3367**

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

Name of Employer **Self** Occupation **Realtor**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 25 / 2014

Transaction ID : C10562384

Amount of Each Receipt this Period
250.00

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

Mailing Address **3521 Campbell Ct NW**

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

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 27 / 2014

Transaction ID : C10562266

Amount of Each Receipt this Period
1000.00

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

Mailing Address **7459B Old Santa Fe Trl**

City **Santa Fe** State **NM** Zip Code **87505-9578**

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

Name of Employer **Self** Occupation **Consultant**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1075.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 30 / 2014

Transaction ID : C10576828

Amount of Each Receipt this Period
100.00

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

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

1350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 101
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Michelle

Full Name (Last, First, Middle Initial) Sei Tokuda		Date of Receipt M M / D D / Y Y Y Y 11 / 03 / 2014
Mailing Address 3008 Marble Ave NE		Transaction ID : C10584154
City Albuquerque	State NM	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer None	Occupation Retired	Election Cycle-to-Date 356.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) Trudy Valerio Healy		Date of Receipt M M / D D / Y Y Y Y 10 / 27 / 2014
Mailing Address PO Box 760		Transaction ID : C10562376
City Taos	State NM	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer None	Occupation Retired	Election Cycle-to-Date 2000.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) Richard Valle		Date of Receipt M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 4713 Larchmont Dr NE		Transaction ID : C10579961
City Albuquerque	State NM	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Carter & Valle	Occupation Attorney	Election Cycle-to-Date 750.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Receipts This Page (optional).....	2300.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 101
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Michelle

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

Mailing Address 8232 Loma Del Norte Rd NE

City Albuquerque State NM Zip Code 87109-4981

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

Name of Employer None Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2927.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 19 / 2014

Transaction ID : C10541628

Amount of Each Receipt this Period
150.00

B. Full Name (Last, First, Middle Initial)
Ray M. Vargas II

Mailing Address 807 Silver Ave SW

City Albuquerque State NM Zip Code 87102-3020

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

Name of Employer Self Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2850.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 31 / 2014

Transaction ID : C10580859

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Jennifer Vega-Brown

Mailing Address 3114 Demavend Rd NE

City Rio Rancho State NM Zip Code 87144-5599

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

Name of Employer City of Rio Rancho Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 17 / 2014

Transaction ID : C10538084

Amount of Each Receipt this Period
250.00

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

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

650.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 101
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Michelle

A. Full Name (Last, First, Middle Initial)
Patricia Kay Vincent-Collawn

Mailing Address 4408 Atherton Way NW

City Albuquerque State NM Zip Code 87120-1262

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

Name of Employer PNM Resources Occupation Chief Executive Officer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y
11 / 03 / 2014

Transaction ID : C10584195

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
William E. Warren

Mailing Address 1401 Wells Dr NE

City Albuquerque State NM Zip Code 87112-6385

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

Name of Employer None Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 31 / 2014

Transaction ID : C10580648

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Franky P. Waters

Mailing Address 2105 Horse Shoe Bnd

City New Bern State NC Zip Code 28562-6613

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

Name of Employer None Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 27 / 2014

Transaction ID : C10567841

Amount of Each Receipt this Period
250.00

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

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

1550.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 101
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Michelle

A. Full Name (Last, First, Middle Initial)
William P. Weber

Mailing Address 319 Carlisle Blvd SE

City Albuquerque State NM Zip Code 87106-1409

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

Name of Employer None Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 29 / 2014

Transaction ID : C10571657

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Patricia S. White

Mailing Address 609 Encino PI NE Apt 207

City Albuquerque State NM Zip Code 87102-2614

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

Name of Employer None Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1100.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 17 / 2014

Transaction ID : C10541433

Amount of Each Receipt this Period
25.00

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

Mailing Address 5004 Northern Trl NW

City Albuquerque State NM Zip Code 87120-2026

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

Name of Employer None Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **275.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 28 / 2014

Transaction ID : C10568637

Amount of Each Receipt this Period
50.00

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

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

125.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 101
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Michelle

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

Mailing Address 6501 Caballero Pkwy NW

City Los Ranchos State NM Zip Code 87107-5603

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

Name of Employer Radiology Associates Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
675.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 19 / 2014

Transaction ID : C10556675A

Amount of Each Receipt this Period
50.00

* Earmarked Contribution: See Below

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

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

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

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3223.05

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 19 / 2014

Transaction ID : C10556675AB

Amount of Each Receipt this Period
50.00

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

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

Mailing Address 1200 Columbia Dr NE

City Albuquerque State NM Zip Code 87106-2604

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

Name of Employer Self Occupation Government Relations

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1350.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 24 / 2014

Transaction ID : C10556666

Amount of Each Receipt this Period
250.00

* Earmarked Contribution: See Below

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

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

300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 101
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Michelle

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

Mailing Address **PO Box 382110**

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

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

Name of Employer _____ Occupation **Conduit total listed in Agg. field**

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date **3223.05**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 24 / 2014

Transaction ID : C10556666B

Amount of Each Receipt this Period
 _____ **250.00** _____

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

B. Full Name (Last, First, Middle Initial)
Jerry R. Oldenettel

Mailing Address **499 Farm To Market Rd**

City **Socorro** State **NM** Zip Code **87801-5814**

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

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

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 31 / 2014

Transaction ID : C10604934A

Amount of Each Receipt this Period
 _____ **100.00** _____

* Earmarked Contribution: See Below

C. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address **PO Box 382110**

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

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

Name of Employer _____ Occupation **Conduit total listed in Agg. field**

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date **3223.05**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 31 / 2014

Transaction ID : C10604934AB

Amount of Each Receipt this Period
 _____ **100.00** _____

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

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

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

_____ **100.00** _____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 101
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Michelle

A. Full Name (Last, First, Middle Initial)
John Tansey

Mailing Address 4224 Indian Springs NE

City Albuquerque State NM Zip Code 87109-1912

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

Name of Employer Self Occupation Architect

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
265.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 17 / 2014

Transaction ID : C10556672A

Amount of Each Receipt this Period
25.00

* Earmarked Contribution: See Below

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

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

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

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3223.05

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 19 / 2014

Transaction ID : C10556672AB

Amount of Each Receipt this Period
25.00

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

C. Full Name (Last, First, Middle Initial)
Keeler and Keeler Law Office

Mailing Address 108 E Aztec Ave

City Gallup State NM Zip Code 87301-6267

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 31 / 2014

Transaction ID : C10582933

Amount of Each Receipt this Period
250.00

PARTNERSHIP--partners below if itemized

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

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

275.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 101
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Michelle

A. Full Name (Last, First, Middle Initial)
William R. Keeler

Mailing Address 108 E Aztec Ave

City Gallup State NM Zip Code 87301-6267

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

Name of Employer Keeler & Keeler Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 31 / 2014

Transaction ID : C10598971

Amount of Each Receipt this Period
250.00

[MEMO ITEM]
*

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

0.00

27765.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 101
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Michelle

A. Full Name (Last, First, Middle Initial)
ACADEMY OF NUTRITION AND DIETETICS POLITICAL ACTION COMMITTEE

Mailing Address 1120 CONNECTICUT AVE. NW
SUITE 480

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C C00143560**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 20 / 2014

Transaction ID : C10544398

Amount of Each Receipt this Period
3000.00

B. Full Name (Last, First, Middle Initial)
American College of Cardiology

Mailing Address 2400 N St NW

City Washington State DC Zip Code 20037-1153

FEC ID number of contributing federal political committee. **C C00375360**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 20 / 2014

Transaction ID : C10548868

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
AMERICAN COLLEGE OF SURGEONS PROFESSIONAL ASSOCIATION PAC

Mailing Address 20 F ST NW, STE 1000
ATTN: SARA MORSE

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00382424**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 20 / 2014

Transaction ID : C10544427

Amount of Each Receipt this Period
2500.00

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

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

6500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 101
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Michelle

A. Full Name (Last, First, Middle Initial)
AMERICAN COUNCIL OF ENGINEERING COMPANIES (ACEC/PAC)

Mailing Address 1015 15th St NW
Ste 802

City Washington State DC Zip Code 20005-2605

FEC ID number of contributing federal political committee. **C** C00010868

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 20 / 2014

Transaction ID : C10544423

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
American Dental Association PAC

Mailing Address 1111 14th St NW
Ste 1100

City Washington State DC Zip Code 20005-5627

FEC ID number of contributing federal political committee. **C** C00000729

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
6000.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 20 / 2014

Transaction ID : C10548878

Amount of Each Receipt this Period
3000.00

C. Full Name (Last, First, Middle Initial)
AMERICAN GASTROENTEROLOGICAL ASSOCIATION INC. PAC

Mailing Address 4720 Montgomery Ln
Ste 430

City Bethesda State MD Zip Code 20814-3441

FEC ID number of contributing federal political committee. **C** C00423228

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 31 / 2014

Transaction ID : C10580608

Amount of Each Receipt this Period
1000.00

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 101
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Friends of Michelle

A. Full Name (Last, First, Middle Initial)
AMERICAN HOSPITAL ASSOCIATION PAC

Mailing Address 325 7th St NW
Ste 700

City Washington State DC Zip Code 20004-2801

FEC ID number of contributing federal political committee. **C** C00106146

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 04 / 2014

Transaction ID : C10598973

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
American Physical Therapy Association PAC

Mailing Address 1111 N Fairfax St

City Alexandria State VA Zip Code 22314-1484

FEC ID number of contributing federal political committee. **C** C00012880

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
6000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 24 / 2014

Transaction ID : C10555916

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
AMERICAN PODIATRIC MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 9312 OLD GEORGETOWN ROAD

City BETHESDA State MD Zip Code 20814

FEC ID number of contributing federal political committee. **C** C00008839

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 04 / 2014

Transaction ID : C10599181

Amount of Each Receipt this Period
1500.00

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

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

3500.00

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

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

FOR LINE NUMBER: PAGE 38 OF 101
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Friends of Michelle

A. Full Name (Last, First, Middle Initial)
AMERICAN SUGAR CANE LEAGUE OF USA INC POLITICAL ACTION COMMITTEE

Mailing Address **P. O. DRAWER 938**

City State Zip Code
THIBODAUX LA 70302

FEC ID number of contributing federal political committee. **C C00081414**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 28 2014

Transaction ID : C10568180

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Committee to Re-Elect Karen Montoya

Mailing Address **1504 Clancy Dr NE**

City State Zip Code
Albuquerque NM 87112-4018

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date **100.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 27 2014

Transaction ID : C10567765

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
EMPLOYEES OF NORTHROP GRUMMAN CORPORATION PAC

Mailing Address **2980 Fairview Park Dr**

City State Zip Code
Falls Church VA 22042-4511

FEC ID number of contributing federal political committee. **C C00088591**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date **7000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 31 2014

Transaction ID : C10582953

Amount of Each Receipt this Period
2000.00

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

3050.00

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

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

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

FOR LINE NUMBER: PAGE 39 OF 101
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Friends of Michelle

A. Full Name (Last, First, Middle Initial)
FRATERNITY & SORORITY POLITICAL ACTION COMMITTEE

Mailing Address PO Box 3435

City Alexandria State VA Zip Code 22302-0435

FEC ID number of contributing federal political committee. **C** C00410068

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 20 / 2014

Transaction ID : C10544402

Amount of Each Receipt this Period
 2000.00

B. Full Name (Last, First, Middle Initial)
HONEYWELL INTERNATIONAL POLITICAL ACTION COMMITTEE

Mailing Address 101 CONSTITUTION AVE. NW
SUITE 500 WEST

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00096156

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 12895.41

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 23 / 2014

Transaction ID : C10554461

Amount of Each Receipt this Period
 2500.00

C. Full Name (Last, First, Middle Initial)
INT'L. ASSOCIATION OF BRIDGE, STRUCTURAL, ORNAMENTAL & REINFORCING IRON WORKERS (IPAL)

Mailing Address 1750 NEW YORK AVE. NW
SUITE 400

City WASHINGTON State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00027359

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 10000.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 23 / 2014

Transaction ID : C10554559

Amount of Each Receipt this Period
 3000.00

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

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

7500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 101
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Michelle

A. Full Name (Last, First, Middle Initial)
JOHNSON & JOHNSON POLITICAL ACTION COMMITTEE

Mailing Address **ONE JOHNSON & JOHNSON PLAZA**

City **NEW BRUNSWICK** State **NJ** Zip Code **08933**

FEC ID number of contributing federal political committee. **C C00010983**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
10 / 31 / 2014

Transaction ID : C10580604

Amount of Each Receipt this Period
 2500.00

B. Full Name (Last, First, Middle Initial)
LEAGUE OF CONSERVATION VOTERS ACTION FUND

Mailing Address **1920 L St NW Ste 800**

City **Washington** State **DC** Zip Code **20036-5045**

FEC ID number of contributing federal political committee. **C C00252940**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
11 / 03 / 2014

Transaction ID : C10596333

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Lifepoint Hospitals Inc. Good Government Fund

Mailing Address **103 Powell Ct Ste 200**

City **Brentwood** State **TN** Zip Code **37027-5079**

FEC ID number of contributing federal political committee. **C C00347955**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
10 / 31 / 2014

Transaction ID : C10580609

Amount of Each Receipt this Period
 2500.00

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

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

6000.00

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

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

FOR LINE NUMBER: PAGE 41 OF 101
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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

NAME OF COMMITTEE (In Full)
Friends of Michelle

A. Full Name (Last, First, Middle Initial)
LOCKHEED MARTIN CORPORATION EMPLOYEES' POLITICAL ACTION COMMITTEE

Mailing Address **2121 Crystal Dr
Ste 100**

City **Arlington** State **VA** Zip Code **22202-3706**

FEC ID number of contributing federal political committee. **C C00303024**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 20 / 2014

Transaction ID : C10542505

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
MERCK & CO., INC., EMPLOYEES POLITICAL ACTION COMMITTEE (MERCK PAC)

Mailing Address **601 PENNSYLVANIA AVE., NW
NORTH BUILDING, SUITE 1200**

City **WASHINGTON** State **DC** Zip Code **20004**

FEC ID number of contributing federal political committee. **C C00097485**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 28 / 2014

Transaction ID : C10568187

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
MICHIGAN SUGAR COMPANY GROWERS POLITICAL ACTION COMMITTEE

Mailing Address **2600 SOUTH EUCLID AVENUE**

City **BAY CITY** State **MI** Zip Code **48706**

FEC ID number of contributing federal political committee. **C C00384354**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date **4000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 03 / 2014

Transaction ID : C10596330

Amount of Each Receipt this Period
2000.00

SUBTOTAL of Receipts This Page (optional)..... **4000.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 101
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Friends of Michelle

A. Full Name (Last, First, Middle Initial)
NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION PAC

Mailing Address 1325 Massachusetts Ave NW

City Washington State DC Zip Code 20005-4171

FEC ID number of contributing federal political committee. **C C00238725**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
6500.00

Date of Receipt
 M M / D D / Y Y Y Y
11 / 04 / 2014

Transaction ID : C10601782

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF SURETY BOND PRODUCERS POLITICAL ACTION COMMITTEE (SURETYPAC)

Mailing Address 1140 19th St NW Ste 800

City Washington State DC Zip Code 20036-6607

FEC ID number of contributing federal political committee. **C C00300525**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 22 / 2014

Transaction ID : C10554561

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
NATIONAL BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1101 King St Ste 600

City Alexandria State VA Zip Code 22314-2965

FEC ID number of contributing federal political committee. **C C00144766**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
7500.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 20 / 2014

Transaction ID : C10548870

Amount of Each Receipt this Period
2500.00

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

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

5500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 101
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Michelle

A. Full Name (Last, First, Middle Initial)
NATIONAL RURAL LETTER CARRIERS' ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1630 Duke St
FI 2

City Alexandria State VA Zip Code 22314-3467

FEC ID number of contributing federal political committee. **C** C00072025

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 20 / 2014

Transaction ID : C10544394

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
NEA FUND FOR CHILDREN AND PUBLIC EDUCATION

Mailing Address 1201 16th St NW
Ste 420

City Washington State DC Zip Code 20036-3201

FEC ID number of contributing federal political committee. **C** C00003251

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 19 / 2014

Transaction ID : C10544424

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Southeast Albuquerque Leadership Project

Mailing Address PO Box 8038

City Albuquerque State NM Zip Code 87198-8038

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
100.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 28 / 2014

Transaction ID : C10568246

Amount of Each Receipt this Period
100.00

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

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

3100.00

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

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

FOR LINE NUMBER: PAGE 44 OF 101
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Friends of Michelle

Full Name (Last, First, Middle Initial)
A. UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Mailing Address **8000 EAST JEFFERSON**

City State Zip Code
DETROIT MI 48214

FEC ID number of contributing federal political committee. **C C00002840**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date **6000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 31 2014

Transaction ID : C10582931

Amount of Each Receipt this Period
5000.00

Full Name (Last, First, Middle Initial)
B. UNITED MINE WORKERS OF AMERICA - COAL MINERS POLITICAL ACTION COMMITTEE

Mailing Address **18354 Quantico Gateway Dr Ste 200**

City State Zip Code
Triangle VA 22172-1779

FEC ID number of contributing federal political committee. **C C00013342**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date **7000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 20 2014

Transaction ID : C10542506

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
C. SEIU COPE (SERVICE EMPLOYEES INTERNATIONAL UNION COMMITTEE ON POLITICAL EDUCATION)

Mailing Address **1800 Massachusetts Ave NW**

City State Zip Code
Washington DC 20036-1222

FEC ID number of contributing federal political committee. **C C00004036**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date **7500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 23 2014

Transaction ID : C10556664

Amount of Each Receipt this Period
2500.00

* Earmarked Contribution: See Below

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

8500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 101
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Michelle

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

Mailing Address **PO Box 382110**

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

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

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

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date
 _____ **3223.05**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 23 / 2014

Transaction ID : C10556664B

Amount of Each Receipt this Period
 _____ **2500.00**

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

B. Full Name (Last, First, Middle Initial) _____

Mailing Address _____

City _____ State _____ Zip Code _____

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

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) _____

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial) _____

Mailing Address _____

City _____ State _____ Zip Code _____

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

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) _____

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y

Amount of Each Receipt this Period

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

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

_____ **0.00**

_____ **52650.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 101
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Michelle

A. Full Name (Last, First, Middle Initial)
KIRKPATRICK FOR ARIZONA

Mailing Address **PO BOX 12011**

City **CASA GRANDE** State **AZ** Zip Code **85130**

FEC ID number of contributing federal political committee. **C C00437293**

Name of Employer _____ Occupation _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date
 _____ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 06 / 2014

Transaction ID : C10596348

Amount of Each Receipt this Period
 _____ 1000.00

B. Full Name (Last, First, Middle Initial) _____

Mailing Address _____

City _____ State _____ Zip Code _____

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

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) _____

Election Cycle-to-Date

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 _____ / _____ / _____

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial) _____

Mailing Address _____

City _____ State _____ Zip Code _____

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

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) _____

Election Cycle-to-Date

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 _____ / _____ / _____

Amount of Each Receipt this Period

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

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

_____ 1000.00

_____ 1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 101			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Michelle

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services			Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2014
Mailing Address PO Box 382110			Amount of Each Disbursement this Period 3.13
City Cambridge	State MA	Zip Code 02238-2110	
Purpose of Disbursement Online Credit Card Processing Fee		Candidate Name	Transaction ID : D741373
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2014		Category/ Type	
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:		

Full Name (Last, First, Middle Initial) B. ActBlue Technical Services			Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2014
Mailing Address PO Box 382110			Amount of Each Disbursement this Period 113.57
City Cambridge	State MA	Zip Code 02238-2110	
Purpose of Disbursement Online Credit Card Processing Fee		Candidate Name	Transaction ID : D741374
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2014		Category/ Type	
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:		

Full Name (Last, First, Middle Initial) C. ActBlue Technical Services			Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address PO Box 382110			Amount of Each Disbursement this Period 14.63
City Cambridge	State MA	Zip Code 02238-2110	
Purpose of Disbursement Online Credit Card Processing Fee		Candidate Name	Transaction ID : D741375
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2014		Category/ Type	
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....	131.33
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 101			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Michelle

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2014
Mailing Address PO Box 382110		Amount of Each Disbursement this Period 0.20 Transaction ID : D741376
City Cambridge	State MA	
Purpose of Disbursement Online Credit Card Processing Fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2014
Mailing Address PO Box 382110		Amount of Each Disbursement this Period 0.40 Transaction ID : D741377
City Cambridge	State MA	
Purpose of Disbursement Online Credit Card Processing Fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2014
Mailing Address PO Box 382110		Amount of Each Disbursement this Period 0.21 Transaction ID : D741378
City Cambridge	State MA	
Purpose of Disbursement Online Credit Card Processing Fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional)	0.81
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 101			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Michelle

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 11 / 23 / 2014
Mailing Address PO Box 382110		Amount of Each Disbursement this Period 0.16 Transaction ID : D741379
City Cambridge	State MA	
Zip Code 02238-2110	Purpose of Disbursement Online Credit Card Processing Fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. American Self Storage		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2014
Mailing Address 720 Candelaria NE		Amount of Each Disbursement this Period 147.98 Transaction ID : D741387
City Albuquerque	State NM	
Zip Code 87107	Purpose of Disbursement Storage Rental	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. American Self Storage		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014
Mailing Address 720 Candelaria NE		Amount of Each Disbursement this Period 25.00 Transaction ID : D741658
City Albuquerque	State NM	
Zip Code 87107	Purpose of Disbursement Storage Rental	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional)	173.14
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 101			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Friends of Michelle

Full Name (Last, First, Middle Initial) A. Authorize.Net		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2014
Mailing Address PO Box 8999		Amount of Each Disbursement this Period 17.95 Transaction ID : D741391
City San Francisco	State CA	
Zip Code 94128-8999	Purpose of Disbursement Online Credit Card Processing Fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) B. Ms. Nancy A. Baca		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2014
Mailing Address 423 Tulane PI NE		Amount of Each Disbursement this Period 550.00 Transaction ID : D741061
City Albuquerque	State NM	
Zip Code 87106-2155	Purpose of Disbursement Campaign Rent	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) c. Barelás Coffee House		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014
Mailing Address 1502 4th St. SW		Amount of Each Disbursement this Period 32.33 Transaction ID : D741389
City Albuquerque	State NM	
Zip Code 87102	Purpose of Disbursement Food - Constituent Meeting	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	600.28
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 51 OF 101	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Michelle

Full Name (Last, First, Middle Initial) A. Barelas Coffee House		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2014
Mailing Address 1502 4th St. SW		Amount of Each Disbursement this Period 3266.11 Transaction ID : D741386
City Albuquerque	State NM Zip Code 87102	
Purpose of Disbursement Food - Constituent Meeting	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Greysen F Carlson		Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2014
Mailing Address 432 NE Thornberry Pl		Amount of Each Disbursement this Period 1607.40 Transaction ID : D741320
City Lees Summit	State MO Zip Code 64064-1664	
Purpose of Disbursement Salary	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Greysen F Carlson		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2014
Mailing Address 432 NE Thornberry Pl		Amount of Each Disbursement this Period 1607.40 Transaction ID : D741049
City Lees Summit	State MO Zip Code 64064-1664	
Purpose of Disbursement Salary	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3266.11
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 101			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Michelle

Full Name (Last, First, Middle Initial) A. Cricket Wireless		Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2014
Mailing Address 6209 Menaul Blvd NE		Amount of Each Disbursement this Period 25.00
City Albuquerque	State NM	
Zip Code 87110-3321	Purpose of Disbursement Campaign Cellphone	Transaction ID : D741674
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Diamond ShamrockValero Corner Store #1216		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address 5600 Edith Blvd NE		Amount of Each Disbursement this Period 800.00
City Albuquerque	State NM	
Zip Code 87107-5008	Purpose of Disbursement Travel/Gas	Transaction ID : D741667
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Doubletree Hotel Albuquerque		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2014
Mailing Address 201 Marquette Ave NW		Amount of Each Disbursement this Period 411.41
City Albuquerque	State NM	
Zip Code 87102	Purpose of Disbursement Event Room Rental	Transaction ID : D741385
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1236.41
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 101			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Michelle

Full Name (Last, First, Middle Initial) A. Downtown Action Team			Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 100 Gold Ave SW			Amount of Each Disbursement this Period 280.00 Transaction ID : D741661
City Albuquerque	State NM	Zip Code 87102	
Purpose of Disbursement Donation		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2014			
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General			
<input type="checkbox"/> Other (specify)			
State:	District:		

Full Name (Last, First, Middle Initial) B. El Charritos Mexican Restaurant			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address 4703 Central Ave NW			Amount of Each Disbursement this Period 36.54 Transaction ID : D741663
City Albuquerque	State NM	Zip Code 87105	
Purpose of Disbursement Food - Constituent Meeting		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2014			
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General			
<input type="checkbox"/> Other (specify)			
State:	District:		

Full Name (Last, First, Middle Initial) c. Facebook.com			Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014
Mailing Address 156 University Ave			Amount of Each Disbursement this Period 517.63 Transaction ID : D741662
City Palo Alto	State CA	Zip Code 94301-1688	
Purpose of Disbursement Online Advertising		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2014			
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General			
<input type="checkbox"/> Other (specify)			
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....	834.17
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 101			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Michelle

Full Name (Last, First, Middle Initial) A. First Data USA		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014
Mailing Address 5565 Glenridge Connector NE Ste 2000		Amount of Each Disbursement this Period 642.95
City Atlanta State GA Zip Code 30342-1651	Purpose of Disbursement Online Credit Card Processing Fee	
Candidate Name	Category/Type	Transaction ID : D741690
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) B. First Data USA		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014
Mailing Address 5565 Glenridge Connector NE Ste 2000		Amount of Each Disbursement this Period 429.30
City Atlanta State GA Zip Code 30342-1651	Purpose of Disbursement Online Credit Card Processing Fee	
Candidate Name	Category/Type	Transaction ID : D741691
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) c. Flying Star Restaurant		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2014
Mailing Address 723 Silver Ave SW		Amount of Each Disbursement this Period 9.56
City Albuquerque State NM Zip Code 87102-3018	Purpose of Disbursement Food - Constituent Meeting	
Candidate Name	Category/Type	Transaction ID : D741657
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1081.81
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 101			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Michelle

Full Name (Last, First, Middle Initial) A. Flying Star Restaurant		Date of Disbursement M M / D D / Y Y Y Y 11 / 17 / 2014
Mailing Address 723 Silver Ave SW		Amount of Each Disbursement this Period 74.90
City Albuquerque	State NM	
Zip Code 87102-3018	Purpose of Disbursement Food - Constituent Meeting	Transaction ID : D741382
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Dominic Pius Gabello		Date of Disbursement M M / D D / Y Y Y Y 11 / 09 / 2014
Mailing Address 1331 S. Eads St, Apt. 1103		Amount of Each Disbursement this Period 10800.00
City Arlington	State VA	
Zip Code 22202	Purpose of Disbursement Campaign Management Consulting	Transaction ID : D741326
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Dominic Pius Gabello		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2014
Mailing Address 1331 S. Eads St, Apt. 1103		Amount of Each Disbursement this Period 5400.00
City Arlington	State VA	
Zip Code 22202	Purpose of Disbursement Campaign Management Consulting	Transaction ID : D741057
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	16274.90
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 101			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Michelle

Full Name (Last, First, Middle Initial) A. Garcia's Kitchen		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2014
Mailing Address 1113 4th St NW		Amount of Each Disbursement this Period 10.11
City Albuquerque	State NM	
Zip Code 87102-1412	Purpose of Disbursement Food - Constituent Meeting	Transaction ID : D741685
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Matthew GlouDEMANS		Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2014
Mailing Address 407 Vassar Dr SE		Amount of Each Disbursement this Period 2611.50
City Albuquerque	State NM	
Zip Code 87106-2805	Purpose of Disbursement Salary	Transaction ID : D741321
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Matthew GlouDEMANS		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2014
Mailing Address 407 Vassar Dr SE		Amount of Each Disbursement this Period 1305.75
City Albuquerque	State NM	
Zip Code 87106-2805	Purpose of Disbursement Salary	Transaction ID : D741050
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3927.36
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 101			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Michelle

Full Name (Last, First, Middle Initial) A. Gold Communications		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2014
Mailing Address 1617 W 6th St Ste B		Amount of Each Disbursement this Period 8883.06
City Austin	State TX	Zip Code 78703-5080
Purpose of Disbursement Design and Printing	Category/Type	
Candidate Name	Transaction ID : D735635	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Google, Inc		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2014
Mailing Address Department No 33654 PO Box 39000		Amount of Each Disbursement this Period 350.00
City San Francisco	State CA	Zip Code 94139
Purpose of Disbursement Online Advertising	Category/Type	
Candidate Name	Transaction ID : D735704	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Google, Inc		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2014
Mailing Address Department No 33654 PO Box 39000		Amount of Each Disbursement this Period 500.00
City San Francisco	State CA	Zip Code 94139
Purpose of Disbursement Online Advertising	Category/Type	
Candidate Name	Transaction ID : D741388	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	9733.06
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 101			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Michelle

Full Name (Last, First, Middle Initial) A. Google, Inc		Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2014
Mailing Address Department No 33654 PO Box 39000		Amount of Each Disbursement this Period 500.00
City San Francisco	State CA Zip Code 94139	
Purpose of Disbursement Online Advertising	Category/Type	Transaction ID : D741682
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Google, Inc		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2014
Mailing Address Department No 33654 PO Box 39000		Amount of Each Disbursement this Period 500.00
City San Francisco	State CA Zip Code 94139	
Purpose of Disbursement Online Advertising	Category/Type	Transaction ID : D741677
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Google, Inc		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address Department No 33654 PO Box 39000		Amount of Each Disbursement this Period 500.00
City San Francisco	State CA Zip Code 94139	
Purpose of Disbursement Online Advertising	Category/Type	Transaction ID : D741666
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 59 OF 101	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Michelle

Full Name (Last, First, Middle Initial) A. Greenberg Quinlan Rosner Research		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2014
Mailing Address 10 G St NE Ste 500		Amount of Each Disbursement this Period 13400.00
City Washington	State DC Zip Code 20002-4228	
Purpose of Disbursement Polling	Category/Type	Transaction ID : D735639
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Hotel Andaluz		Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2014
Mailing Address 125 2nd St NW		Amount of Each Disbursement this Period 83.40
City Albuquerque	State NM Zip Code 87102-3304	
Purpose of Disbursement Food - Constituent Meeting	Category/Type	Transaction ID : D741678
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Internal Revenue Service		Date of Disbursement M M / D D / Y Y Y Y 11 / 17 / 2014
Mailing Address 5338 Montgomery Blvd NE		Amount of Each Disbursement this Period 1500.00
City Albuquerque	State NM Zip Code 87109-1338	
Purpose of Disbursement Payroll Taxes	Category/Type	Transaction ID : D741381
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	14983.40
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 101			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Michelle

Full Name (Last, First, Middle Initial) A. Intuit Payment Solutions		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014
Mailing Address 21215 Burbank Blvd		Amount of Each Disbursement this Period 12.95 Transaction ID : D741394
City Woodland Hills	State CA Zip Code 91367-6607	
Purpose of Disbursement Credit Card Processing Fee	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Java Joe's		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2014
Mailing Address 906 Park Ave SW		Amount of Each Disbursement this Period 14.57 Transaction ID : D741390
City Albuquerque	State NM Zip Code 87102	
Purpose of Disbursement Food - Constituent Meeting	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Lolls New Mexican Food		Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2014
Mailing Address 424 Isleta Blvd SW		Amount of Each Disbursement this Period 60.36 Transaction ID : D741671
City Albuquerque	State NM Zip Code 87105	
Purpose of Disbursement Food - Constituent Meeting	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	87.88
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 101			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Michelle

Full Name (Last, First, Middle Initial) A. Love's Travel Stop		Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2014
Mailing Address 2200 6th St NW		Amount of Each Disbursement this Period 18.36
City Albuquerque State NM Zip Code 87102	Category/Type	
Purpose of Disbursement Travel/Gas	Candidate Name	Transaction ID : D741679
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Mac's La Sierra Coffee Shop		Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2014
Mailing Address 6217 Central Ave NW		Amount of Each Disbursement this Period 26.55
City Albuquerque State NM Zip Code 87105	Category/Type	
Purpose of Disbursement Food - Constituent Meeting	Candidate Name	Transaction ID : D741672
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Marble Brewery		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2014
Mailing Address 111 Marble Ave NW		Amount of Each Disbursement this Period 8.50
City Albuquerque State NM Zip Code 87102	Category/Type	
Purpose of Disbursement Food - Constituent Meeting	Candidate Name	Transaction ID : D741659
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	53.41
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 101			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Michelle

Full Name (Last, First, Middle Initial) A. Matchbox		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2014
Mailing Address 521 8th St SE		Amount of Each Disbursement this Period 205.70
City Washington	State DC	
Zip Code 20003-2835	Purpose of Disbursement Meeting Expense - Food	Transaction ID : D741681
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Monte Carlo Liquor & Steak House		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address 3916 Central Ave SW		Amount of Each Disbursement this Period 58.09
City Albuquerque	State NM	
Zip Code 87105	Purpose of Disbursement Event- Beverages	Transaction ID : D741664
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Sheila A Nelson		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2014
Mailing Address 2828 Butch Cassidy Dr SW		Amount of Each Disbursement this Period 700.00
City Albuquerque	State NM	
Zip Code 87121-5013	Purpose of Disbursement Database Support	Transaction ID : D741044
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	963.79
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 101			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Michelle

Full Name (Last, First, Middle Initial) A. Sheila A Nelson		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2014
Mailing Address 2828 Butch Cassidy Dr SW		Amount of Each Disbursement this Period 136.08
City Albuquerque State NM Zip Code 87121-5013	Purpose of Disbursement Mileage Reimbursement	
Candidate Name	Category/Type	Transaction ID : D741046
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. New Mexico Dept of Workforce Solutions		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014
Mailing Address PO Box 2281		Amount of Each Disbursement this Period 595.29
City Albuquerque State NM Zip Code 87103-2281	Purpose of Disbursement Payroll Taxes	
Candidate Name	Category/Type	Transaction ID : D741395
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. New Mexico Taxation & Revenue Dept		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014
Mailing Address PO Box 25127		Amount of Each Disbursement this Period 12.90
City Santa Fe State NM Zip Code 87504-5127	Purpose of Disbursement Payroll Taxes	
Candidate Name	Category/Type	Transaction ID : D741396
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	744.27
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 101			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Michelle

Full Name (Last, First, Middle Initial) A. New Mexico Taxation & Revenue Dept			Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2014
Mailing Address PO Box 25127			Amount of Each Disbursement this Period 400.00
City Santa Fe	State NM	Zip Code 87504-5127	
Purpose of Disbursement Payroll Taxes		Category/ Type	Transaction ID : D741669
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. NGP VAN Inc			Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2014
Mailing Address 1101 15th St NW Ste 500			Amount of Each Disbursement this Period 2400.00
City Washington	State DC	Zip Code 20005-5006	
Purpose of Disbursement Database, Online contribution fee, broadcast email fee		Category/ Type	Transaction ID : D735638
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) c. Isaac Padilla			Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2014
Mailing Address 1417 Phoenix Ave NW			Amount of Each Disbursement this Period 5000.00
City Albuquerque	State NM	Zip Code 87107-1035	
Purpose of Disbursement Salary		Category/ Type	Transaction ID : D741055
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	7800.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 101			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Michelle

Full Name (Last, First, Middle Initial) A. Isaac Padilla		Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2014
Mailing Address 1417 Phoenix Ave NW		Amount of Each Disbursement this Period 10500.00 Transaction ID : D741325
City Albuquerque	State NM Zip Code 87107-1035	
Purpose of Disbursement Salary		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Painted Sky Gallery & Gifts		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2014
Mailing Address 326 San Felipe St NW		Amount of Each Disbursement this Period 34.24 Transaction ID : D741675
City Albuquerque	State NM Zip Code 87104	
Purpose of Disbursement Volunteer Appreciation Gifts		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. People Living Through Cancer		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2014
Mailing Address 3411 Candelaria Rd NE		Amount of Each Disbursement this Period 65.00 Transaction ID : D741383
City Albuquerque	State NM Zip Code 87107	
Purpose of Disbursement Event Ticket		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	10599.24
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 101			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Michelle

Full Name (Last, First, Middle Initial) A. Peoples Flowers		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2014
Mailing Address 3520 Candelaria Rd NE		Amount of Each Disbursement this Period 136.76
City Albuquerque	State NM	Zip Code 87107-1912
Purpose of Disbursement Flowers - Volunteer Appreciation		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. PhoneTag		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014
Mailing Address 3099 N 1st St		Amount of Each Disbursement this Period 29.95
City San Jose	State CA	Zip Code 95134-2006
Purpose of Disbursement Voicemail Service		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) c. Range Cafe		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014
Mailing Address 925 S. Camino Del Pueblo		Amount of Each Disbursement this Period 36.18
City Bernalillo	State NM	Zip Code 87004
Purpose of Disbursement Food - Constituent Meeting		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....	202.89
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 101			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Michelle

Full Name (Last, First, Middle Initial) A. Renaissance Hotel		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2014
Mailing Address 3300 Prospect Ave NE		Amount of Each Disbursement this Period 513.52
City Albuquerque	State NM	
Zip Code 87107	Purpose of Disbursement Event Food and Fees	Transaction ID : D741655
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Catherine Sherwood		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2014
Mailing Address 1509 Archuleta Drive NE		Amount of Each Disbursement this Period 1500.00
City Albuquerque	State NM	
Zip Code 87112-6375	Purpose of Disbursement Communications Consultant	Transaction ID : D741059
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Southwest Outdoor Electric, Inc		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2014
Mailing Address 1525 Candelaria NE		Amount of Each Disbursement this Period 2140.00
City Albuquerque	State NM	
Zip Code 87107	Purpose of Disbursement Advertisement - Billboard	Transaction ID : D735637
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4153.52
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 101		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
Friends of Michelle

Full Name (Last, First, Middle Initial) A. Subway		Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2014
Mailing Address 931 Old Coors Rd SW		Amount of Each Disbursement this Period 2.14
City Albuquerque	State NM Zip Code 87121	
Purpose of Disbursement Food - Constituent Meeting		Transaction ID : D741670
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Target Store		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2014
Mailing Address 8710 Montgomery Blvd NE		Amount of Each Disbursement this Period 24.38
City Albuquerque	State NM Zip Code 87111-2308	
Purpose of Disbursement Event Supplies		Transaction ID : D741683
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. The New Media Firm. Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2014
Mailing Address 1730 Rhode Island Ave NW Ste 410		Amount of Each Disbursement this Period 13811.95
City Washington	State DC Zip Code 20036-3134	
Purpose of Disbursement Media Production		Transaction ID : D741040
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	13838.47
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 101			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Michelle

Full Name (Last, First, Middle Initial) A. The UPS Store		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2014
Mailing Address 6100 4th St NW		Amount of Each Disbursement this Period 38.04
City Albuquerque State NM Zip Code 87107	Purpose of Disbursement Shipping	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : D741668
State: District:		

Full Name (Last, First, Middle Initial) B. The UPS Store		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2014
Mailing Address 6100 4th St NW		Amount of Each Disbursement this Period 128.32
City Albuquerque State NM Zip Code 87107	Purpose of Disbursement Shipping	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : D741676
State: District:		

Full Name (Last, First, Middle Initial) c. The UPS Store		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014
Mailing Address 6100 4th St NW		Amount of Each Disbursement this Period 64.98
City Albuquerque State NM Zip Code 87107	Purpose of Disbursement Shipping	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : D741392
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	231.34
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 70 OF 101	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Michelle

Full Name (Last, First, Middle Initial) A. The UPS Store		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address 6100 4th St NW		Amount of Each Disbursement this Period 38.04
City Albuquerque State NM Zip Code 87107	Purpose of Disbursement Shipping	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : D741665
State: District:		

Full Name (Last, First, Middle Initial) B. The UPS Store		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2014
Mailing Address 6100 4th St NW		Amount of Each Disbursement this Period 54.32
City Albuquerque State NM Zip Code 87107	Purpose of Disbursement Shipping	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : D741660
State: District:		

Full Name (Last, First, Middle Initial) c. The UPS Store		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014
Mailing Address 6100 4th St NW		Amount of Each Disbursement this Period 44.48
City Albuquerque State NM Zip Code 87107	Purpose of Disbursement Shipping	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : D741689
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	136.84
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 101			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Michelle

Full Name (Last, First, Middle Initial) A. Tim's Place		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2014
Mailing Address 8050 Academy Rd NE		Amount of Each Disbursement this Period 28.14
City Albuquerque	State NM	
Zip Code 87111	Purpose of Disbursement Food - Constituent Meeting	Transaction ID : D741684
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Theresa Trujeque		Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2014
Mailing Address 106 Kjersti Ct		Amount of Each Disbursement this Period 641.18
City Corrales	State NM	
Zip Code 87048-6921	Purpose of Disbursement Salary	Transaction ID : D741322
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Theresa Trujeque		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2014
Mailing Address 106 Kjersti Ct		Amount of Each Disbursement this Period 641.18
City Corrales	State NM	
Zip Code 87048-6921	Purpose of Disbursement Salary	Transaction ID : D741051
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1310.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 101			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Michelle

Full Name (Last, First, Middle Initial) A. United Airlines		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014
Mailing Address 77 W Wacker Dr		Amount of Each Disbursement this Period 390.00 Transaction ID : D741654
City Chicago	State IL Zip Code 60601-1604	
Purpose of Disbursement Travel - Airline Ticket		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. United States Postal Service		Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2014
Mailing Address 111 Alvarado Dr SE		Amount of Each Disbursement this Period 122.00 Transaction ID : D741336
City Albuquerque	State NM Zip Code 87108-3496	
Purpose of Disbursement PO Box Rental		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Walgreens		Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2014
Mailing Address 3501 Lomas Blvd NE		Amount of Each Disbursement this Period 423.80 Transaction ID : D741680
City Albuquerque	State NM Zip Code 87106-1335	
Purpose of Disbursement Volunteer Recognition Items		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	935.80
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 101			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Michelle

Full Name (Last, First, Middle Initial) A. We, The Pizza			Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2014
Mailing Address 305 Pennsylvania SE			Amount of Each Disbursement this Period 47.88
City Washington	State DC	Zip Code 20003	
Purpose of Disbursement Food for Constituent Meeting		Category/ Type	Transaction ID : D741384
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) B. Stefanie Weber			Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2014
Mailing Address PO Box 35268			Amount of Each Disbursement this Period 3947.50
City Albuquerque	State NM	Zip Code 87176-5268	
Purpose of Disbursement Salary		Category/ Type	Transaction ID : D741318
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) c. Stefanie Weber			Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2014
Mailing Address PO Box 35268			Amount of Each Disbursement this Period 1315.84
City Albuquerque	State NM	Zip Code 87176-5268	
Purpose of Disbursement Salary		Category/ Type	Transaction ID : D741047
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

SUBTOTAL of Disbursements This Page (optional).....	5311.22
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 101			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Michelle

Full Name (Last, First, Middle Initial)
A. Weck's

Mailing Address 2039 4th St NW

City Albuquerque State NM Zip Code 87102

Purpose of Disbursement Food - Campaign Meeting

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 11 / 02 / 2014

Amount of Each Disbursement this Period: 53.87

Transaction ID : D741397

Full Name (Last, First, Middle Initial)
B. Hon. Michelle Lujan Grisham

Mailing Address 1001 Los Arboles Ave NW

City Albuquerque State NM Zip Code 87107-1141

Purpose of Disbursement Reimburse Food for Meetings, Events and Travel - Gas and Food, See Below

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 22 / 2014

Amount of Each Disbursement this Period: 313.52

Transaction ID : D735943

Full Name (Last, First, Middle Initial)
c. Chipotle Mexican Grill

Mailing Address Dulles Airport

City Sterling State VA Zip Code 20166

Purpose of Disbursement Travel - Food

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 22 / 2014

Amount of Each Disbursement this Period: 9.33

Transaction ID : D736090

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) 367.39

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 101			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Michelle

Full Name (Last, First, Middle Initial) A. Comanche Fuel Stop		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2014
Mailing Address 600 Comanche Rd NE		Amount of Each Disbursement this Period 30.96
City Albuquerque	State NM Zip Code 87107	
Purpose of Disbursement Travel - Gas	Category/Type	Transaction ID : D735951 [MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. DEB Albuquerque		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2014
Mailing Address 219 Central Ave NW, 5A-501		Amount of Each Disbursement this Period 125.00
City Albuquerque	State NM Zip Code 87102	
Purpose of Disbursement Event Food	Category/Type	Transaction ID : D736086 [MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Flying Star Restaurant		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2014
Mailing Address 723 Silver Ave SW		Amount of Each Disbursement this Period 9.56
City Albuquerque	State NM Zip Code 87102-3018	
Purpose of Disbursement Food - Constituent Meeting	Category/Type	Transaction ID : D735954 [MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 76 OF 101	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Michelle

Full Name (Last, First, Middle Initial) A. Freshens #21		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2014
Mailing Address DFW Airport		Amount of Each Disbursement this Period 13.73
City Dallas State TX Zip Code 75261	Purpose of Disbursement Travel - Food	
Candidate Name	Category/Type	Transaction ID : D736087
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. Garcia's Kitchen		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2014
Mailing Address 1113 4th St NW		Amount of Each Disbursement this Period 10.11
City Albuquerque State NM Zip Code 87102-1412	Purpose of Disbursement Food - Constituent Meeting	
Candidate Name	Category/Type	Transaction ID : D735946
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) c. GLObal News		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2014
Mailing Address DFW Airport		Amount of Each Disbursement this Period 1.99
City Dallas State TX Zip Code 75261	Purpose of Disbursement Travel - Food	
Candidate Name	Category/Type	Transaction ID : D736089
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 101			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Michelle

Full Name (Last, First, Middle Initial) A. Grecian Festival		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2014
Mailing Address 308 High Street SE		Amount of Each Disbursement this Period 50.00
City Albuquerque State NM Zip Code 87102	Purpose of Disbursement Event Tickets	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : D736091 [MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. Tractor Brewing Co		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2014
Mailing Address 1000 4th St NW		Amount of Each Disbursement this Period 19.00
City Albuquerque State NM Zip Code 87102	Purpose of Disbursement Food - Constituent Meeting	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : D736093 [MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. Two Amys		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2014
Mailing Address 3715 Macomb St NW		Amount of Each Disbursement this Period 43.84
City Washington State DC Zip Code 20016-3868	Purpose of Disbursement Food - Constituent Meeting	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : D736088 [MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 101			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Michelle

Full Name (Last, First, Middle Initial) A. Matthew Gludemans			Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2014
Mailing Address 407 Vassar Dr SE			Amount of Each Disbursement this Period 48.09
City Albuquerque	State NM	Zip Code 87106-2805	Transaction ID : D741032
Purpose of Disbursement Reimburse Event Food, See Below		Category/Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. Dunkin Donuts			Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2014
Mailing Address 5502 4th St NW			Amount of Each Disbursement this Period 48.09
City Albuquerque	State NM	Zip Code 87107	Transaction ID : D741033
Purpose of Disbursement Event Food		Category/Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			[MEMO ITEM]

Full Name (Last, First, Middle Initial) c. Catherine Sherwood			Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014
Mailing Address 1509 Archuleta Drive NE			Amount of Each Disbursement this Period 186.01
City Albuquerque	State NM	Zip Code 87112-6375	Transaction ID : D741066
Purpose of Disbursement Reimburse Event Supplies, See Below		Category/Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	234.01
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 101			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Friends of Michelle

Full Name (Last, First, Middle Initial) A. Party City		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014
Mailing Address 10254 Coors Byp NW		Amount of Each Disbursement this Period 357.65
City Albuquerque	State NM	
Zip Code 87114-5725	Purpose of Disbursement Event Supplies	Transaction ID : D741067 [MEMO ITEM]
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Hector Licon		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2014
Mailing Address 7827 Latir Mesa Rd NW		Amount of Each Disbursement this Period 357.65
City Albuquerque	State NM	
Zip Code 87114	Purpose of Disbursement Reimburse Event Food, See Below	Transaction ID : D741306
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Subway		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2014
Mailing Address 931 Old Coors Rd SW		Amount of Each Disbursement this Period 357.65
City Albuquerque	State NM	
Zip Code 87121	Purpose of Disbursement Event Food	Transaction ID : D741307 [MEMO ITEM]
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	357.65
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 101			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Michelle

Full Name (Last, First, Middle Initial) A. Matthew Gludemans		Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2014
Mailing Address 407 Vassar Dr SE		Amount of Each Disbursement this Period 182.20 Transaction ID : D741312
City Albuquerque	State NM	
Zip Code 87106-2805	Purpose of Disbursement Reimburse Campaign Office Moving Expenses, See Below	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) B. U-Haul Moving & Storage		Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2014
Mailing Address 6401 Central NE		Amount of Each Disbursement this Period 182.20 Transaction ID : D741317 [MEMO ITEM]
City Albuquerque	State NM	
Zip Code 87108	Purpose of Disbursement Moving Truck Rental	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) c. Dominic Pius Gabello		Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2014
Mailing Address 1331 S. Eads St, Apt. 1103		Amount of Each Disbursement this Period 538.76 Transaction ID : D741337
City Arlington	State VA	
Zip Code 22202	Purpose of Disbursement Reimburse Moving Expenses, See Below	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	720.96
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 101			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Michelle

Full Name (Last, First, Middle Initial) A. Alanreed Travel Center		Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2014
Mailing Address I-40 Exit 135		Amount of Each Disbursement this Period 45.48
City Alanreed	State TX	Zip Code 79002
Purpose of Disbursement Gas - Moving Expense	Category/ Type	
Candidate Name	Transaction ID : D741698	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) B. Country Store		Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2014
Mailing Address RR #1 Box 910		Amount of Each Disbursement this Period 25.19
City Checotah	State OK	Zip Code 74426
Purpose of Disbursement Gas - Moving Expense	Category/ Type	
Candidate Name	Transaction ID : D741694	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) c. Hampton Inn		Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2014
Mailing Address 7445 Sawyer Ln		Amount of Each Disbursement this Period 151.25
City Knoxville	State TN	Zip Code 37924
Purpose of Disbursement Lodging - Moving Expense	Category/ Type	
Candidate Name	Transaction ID : D741692	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	[MEMO ITEM]	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 82 OF 101	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Michelle

Full Name (Last, First, Middle Initial) A. Homewood Suites		Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2014
Mailing Address 6920 W Reno Ave		Amount of Each Disbursement this Period 170.96
City Oklahoma City	State OK	Zip Code 73127
Purpose of Disbursement Lodging - Moving Expense	Category/Type	
Candidate Name	Transaction ID : D741693	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) B. Kenjo		Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2014
Mailing Address 7406 Straw Plains Pk		Amount of Each Disbursement this Period 36.33
City Knoxville	State TN	Zip Code 37924
Purpose of Disbursement Gas - Moving Expense	Category/Type	
Candidate Name	Transaction ID : D741696	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) c. Phillips 66		Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2014
Mailing Address 1100 N Arkansas		Amount of Each Disbursement this Period 12.13
City Russellville	State AR	Zip Code 72801
Purpose of Disbursement Gas - Moving Expense	Category/Type	
Candidate Name	Transaction ID : D741695	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	[MEMO ITEM]	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 101			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Michelle

Full Name (Last, First, Middle Initial) A. Sheetz		Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2014
Mailing Address 1250 Richmond Ave		Amount of Each Disbursement this Period 35.29
City Staunton	State VA	
Zip Code 24401	Purpose of Disbursement Gas - Moving Expense	Transaction ID : D741697
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. Alma Acosta		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2014
Mailing Address 214 Cannon Hob		Amount of Each Disbursement this Period 88.00
City Washington	State DC	
Zip Code 20515-3007	Purpose of Disbursement Reimbursement - Travel, See Below	Transaction ID : D741617
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. American Airlines		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2014
Mailing Address PO Box 200025		Amount of Each Disbursement this Period 50.00
City El Paso	State TX	
Zip Code 88520-0025	Purpose of Disbursement Travel - Airline Fee	Transaction ID : D741618
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	88.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 101			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Michelle

Full Name (Last, First, Middle Initial) A. Super Shuttle		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2014
Mailing Address BWI Airport		Amount of Each Disbursement this Period 38.00
City Baltimore	State MD Zip Code 21240	
Purpose of Disbursement Travel - Ground Transportation		Transaction ID : D741619
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	101880.05

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 101			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Friends of Michelle

Full Name (Last, First, Middle Initial) A. Poarch Band of Creek Indians		Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2014
Mailing Address 5811 Jack Springs Rd		Amount of Each Disbursement this Period 400.00
City Atmore	State AL Zip Code 36502-5025	
Purpose of Disbursement Refund Excess Contribution		Transaction ID : D741329
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/Type
State: District:		

Full Name (Last, First, Middle Initial) B. Patricia M. Stelzner		Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2014
Mailing Address 3521 Campbell Ct NW		Amount of Each Disbursement this Period 150.00
City Albuquerque	State NM Zip Code 87104-3201	
Purpose of Disbursement Refund Excess Contribution		Transaction ID : D741328
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/Type
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement		Transaction ID
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)	Category/Type
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	550.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 101
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Michelle

Full Name (Last, First, Middle Initial) A. AIMEE BELGARD FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2014
Mailing Address PO BOX 35		Amount of Each Disbursement this Period 1000.00 Transaction ID : D737796
City WILLINGBORO State NJ Zip Code 08046	Purpose of Disbursement Candidate Committee Campaign Contribution	
Candidate Name AIMEE BELGARD		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NJ District: 03		

Full Name (Last, First, Middle Initial) B. FRIENDS OF RENTERIA		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2014
Mailing Address P.O. BOX 655		Amount of Each Disbursement this Period 1000.00 Transaction ID : D741030
City SANGER State CA Zip Code 93657	Purpose of Disbursement Candidate Committee Campaign Contribution	
Candidate Name AMANDA RENTERIA		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CA District: 21		

Full Name (Last, First, Middle Initial) C. AMI BERA FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2014
Mailing Address PO BOX 582496		Amount of Each Disbursement this Period 1000.00 Transaction ID : D737790
City ELK GROVE State CA Zip Code 95758	Purpose of Disbursement Candidate Committee Campaign Contribution	
Candidate Name AMERISH BERA		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CA District: 07		

SUBTOTAL of Disbursements This Page (optional).....	3000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 101			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Michelle

Full Name (Last, First, Middle Initial) A. Anderson for HD 20		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2014
Mailing Address 1207 Sea Biscuit Dr SE		Amount of Each Disbursement this Period 250.00
City Albuquerque State NM Zip Code 87123	Category/Type	
Purpose of Disbursement State Candidate Campaign Contribution		Transaction ID : D741027
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. AZ01 VICTORY FUND		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2014
Mailing Address 2910 E GARY WAY		Amount of Each Disbursement this Period 1000.00
City PHOENIX State AZ Zip Code 85042	Category/Type	
Purpose of Disbursement Political Campaign Contribution		Transaction ID : D741039
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. APPEL FOR IOWA, INC.		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2014
Mailing Address PO BOX 702		Amount of Each Disbursement this Period 1000.00
City DES MOINES State IA Zip Code 50303	Category/Type	
Purpose of Disbursement Candidate Committee Campaign Contribution		Transaction ID : D737797
Candidate Name STACI APPEL		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: IA District: 03		

SUBTOTAL of Disbursements This Page (optional)	2250.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 101			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Michelle

Full Name (Last, First, Middle Initial) A. BRAD ASHFORD FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2014
Mailing Address PO BOX 24023		Amount of Each Disbursement this Period 1000.00 Transaction ID : D741029
City OMAHA State NE Zip Code 68124	Purpose of Disbursement Candidate Committee Campaign Contribution	
Candidate Name BRAD ASHFORD	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NE District: 02		

Full Name (Last, First, Middle Initial) B. Campaign to Re-Elect Phillip Archuleta		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2014
Mailing Address 2055 Briarwood Ln		Amount of Each Disbursement this Period 500.00 Transaction ID : D737801
City Las Cruces State NM Zip Code 88005	Purpose of Disbursement State Candidate Campaign Contribution	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Colorado Democratic Party		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2014
Mailing Address 789 Sherman St, Suite 110		Amount of Each Disbursement this Period 461.70 Transaction ID : D741686
City Denver State CO Zip Code 80203	Purpose of Disbursement In-Kind/Travel - US Airways, Transaction #D736299	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1961.70
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 101
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Michelle

Full Name (Last, First, Middle Initial) A. Committee to Elect Bob Coffey		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2014
Mailing Address 7304 Bellrose Ave NE		Amount of Each Disbursement this Period 500.00
City Albuquerque	State NM	Zip Code 87110
Purpose of Disbursement State Candidate Campaign Contribution		Transaction ID : D737798
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type
State: District:		

Full Name (Last, First, Middle Initial) B. Committee to Elect Catherine Begaye		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2014
Mailing Address 10600 Cibola Loop, NW, #435		Amount of Each Disbursement this Period 500.00
City Albuquerque	State NM	Zip Code 87114
Purpose of Disbursement State Candidate Campaign Contribution		Transaction ID : D740998
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type
State: District:		

Full Name (Last, First, Middle Initial) C. Committee to Elect Elizabeth Thomson		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2014
Mailing Address 2401 Morrow Rd NE		Amount of Each Disbursement this Period 1000.00
City Albuquerque	State NM	Zip Code 87106-2519
Purpose of Disbursement State Candidate Campaign Contribution		Transaction ID : D737799
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 101			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Michelle

Full Name (Last, First, Middle Initial) A. Committee to Elect Emily Kane		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2014
Mailing Address 6608 Hood Rd NW		Amount of Each Disbursement this Period 1000.00 Transaction ID : D740997
City Albuquerque State NM Zip Code 87114-3759	Purpose of Disbursement State Candidate Campaign Contribution	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Committee to Elect Joanne Ferrary		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2014
Mailing Address 6100Morning Sun Way		Amount of Each Disbursement this Period 1000.00 Transaction ID : D737800
City Las Cruces State NM Zip Code 88012	Purpose of Disbursement State Candidate Campaign Contribution	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. JIM COSTA FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2014
Mailing Address 2037 W BULLARD AVENUE # 355		Amount of Each Disbursement this Period 1000.00 Transaction ID : D741616
City FRESNO State CA Zip Code 93711	Purpose of Disbursement Contribution to Recount Fund	
Candidate Name JIM COSTA	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CA District: 16		

SUBTOTAL of Disbursements This Page (optional).....	3000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 101			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Michelle

Full Name (Last, First, Middle Initial) A. LOEBSACK FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2014
Mailing Address PO BOX 3013		Amount of Each Disbursement this Period 1000.00 Transaction ID : D737780
City IOWA CITY State IA Zip Code 52244	Purpose of Disbursement Candidate Committee Campaign Contribution	
Candidate Name DAVID WAYNE LOEBSACK	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: IA District: 02		

Full Name (Last, First, Middle Initial) B. Democratic Party of New Mexico		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2014
Mailing Address 8214 2nd St NW Ste A		Amount of Each Disbursement this Period 10000.00 Transaction ID : D741035
City Albuquerque State NM Zip Code 87114-1091	Purpose of Disbursement Unlimited Transfer to State Party Committee	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Democratic Party of New Mexico		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2014
Mailing Address 8214 2nd St NW Ste A		Amount of Each Disbursement this Period 11000.00 Transaction ID : D741304
City Albuquerque State NM Zip Code 87114-1091	Purpose of Disbursement Unlimited Transfer to State Party Committee	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	22000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 101			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Michelle

Full Name (Last, First, Middle Initial) A. Committee to Elect Theresa Smith de Cherif		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2014
Mailing Address PO Box 326		Amount of Each Disbursement this Period 250.00 Transaction ID : D741026
City Tome	State NM Zip Code 87060	
Purpose of Disbursement State Candidate Campaign Contribution		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) B. Committee to Elect Theresa Smith de Cherif		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014
Mailing Address PO Box 326		Amount of Each Disbursement this Period 145.52 Transaction ID : D741301
City Tome	State NM Zip Code 87060	
Purpose of Disbursement In-Kind/Robocall - Switchboard Communications Transaction #D741705		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) C. ENYART FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2014
Mailing Address PO BOX 308		Amount of Each Disbursement this Period 1000.00 Transaction ID : D737777
City BELLEVILLE	State IL Zip Code 62222	
Purpose of Disbursement Candidate Committee Campaign Contribution		Category/ Type
Candidate Name WILLIAM L. ENYART JR.		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: IL	District: 12	

SUBTOTAL of Disbursements This Page (optional).....	1395.52
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 101			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Michelle

Full Name (Last, First, Middle Initial) A. FRIENDS OF DAN MAFFEI		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2014
Mailing Address PO BOX 230		Amount of Each Disbursement this Period 1000.00
City SYRACUSE	State NY	Zip Code 13201
Purpose of Disbursement Candidate Committee Campaign Contribution		Category/ Type
Candidate Name DANIEL BENJAMIN MR. MAFFEI		
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2014	
<input type="checkbox"/> Senate	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State: NY	District: 24	

Full Name (Last, First, Middle Initial) B. FRIENDS OF JOHN BARROW		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014
Mailing Address PO BOX 1001		Amount of Each Disbursement this Period 2000.00
City AUGUSTA	State GA	Zip Code 30903
Purpose of Disbursement Candidate Committee Campaign Contribution		Category/ Type
Candidate Name JOHN J. BARROW		
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2014	
<input type="checkbox"/> Senate	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State: GA	District: 12	

Full Name (Last, First, Middle Initial) C. FRIENDS OF PATRICK MURPHY		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2014
Mailing Address 4521 PGA BLVD. #412		Amount of Each Disbursement this Period 1000.00
City PALM BEACH GARDENS	State FL	Zip Code 33418
Purpose of Disbursement Candidate Committee Campaign Contribution		Category/ Type
Candidate Name PATRICK MURPHY		
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2014	
<input type="checkbox"/> Senate	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State: FL	District: 18	

SUBTOTAL of Disbursements This Page (optional).....	4000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 101			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Michelle

Full Name (Last, First, Middle Initial) A. JULIA BROWNLEY FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2014
Mailing Address PO BOX 2018		Amount of Each Disbursement this Period 1000.00 Transaction ID : D737792
City THOUSAND OAKS	State CA	
Zip Code 91358	Purpose of Disbursement Candidate Committee Campaign Contribution	Category/ Type
Candidate Name JULIA BROWNLEY	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CA	District: 26	

Full Name (Last, First, Middle Initial) B. KIRKPATRICK FOR ARIZONA		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2014
Mailing Address PO BOX 12011		Amount of Each Disbursement this Period 1000.00 Transaction ID : D737789
City CASA GRANDE	State AZ	
Zip Code 85130	Purpose of Disbursement Candidate Committee Campaign Contribution	Category/ Type
Candidate Name ANN KIRKPATRICK	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: AZ	District: 01	

Full Name (Last, First, Middle Initial) C. KUSTER FOR CONGRESS, INC.		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2014
Mailing Address P.O. BOX 1498		Amount of Each Disbursement this Period 1000.00 Transaction ID : D737794
City CONCORD	State NH	
Zip Code 03302	Purpose of Disbursement Candidate Committee Campaign Contribution	Category/ Type
Candidate Name ANN MCLANE KUSTER	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NH	District: 02	

SUBTOTAL of Disbursements This Page (optional).....	3000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 OF 101			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Michelle

Full Name (Last, First, Middle Initial) A. MARK TAKAI FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2014
Mailing Address PO BOX 2267		Amount of Each Disbursement this Period 1000.00 Transaction ID : D741031
City PEARL CITY State HI Zip Code 96782	Purpose of Disbursement Candidate Committee Campaign Contribution	
Candidate Name KYLE MARK TAKAI	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: HI District: 01		

Full Name (Last, First, Middle Initial) B. Committee to Elect Matthew McQueen		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2014
Mailing Address 7 Avenida Vista Grande B7-120		Amount of Each Disbursement this Period 250.00 Transaction ID : D737802
City Santa Fe State NM Zip Code 87508	Purpose of Disbursement State Candidate Campaign Contribution	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. New Mexico 4-H Youth Development Foundation		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2014
Mailing Address PO Box 30003 MSC 3AE		Amount of Each Disbursement this Period 1500.00 Transaction ID : D741041
City Las Cruces State NM Zip Code 88003	Purpose of Disbursement Donation	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2750.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 OF 101			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Michelle

Full Name (Last, First, Middle Initial) A. NOLAN FOR CONGRESS VOLUNTEER COMMITTEE		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2014
Mailing Address PO BOX 1041		Amount of Each Disbursement this Period 1000.00
City BRAINERD State MN Zip Code 56401	Purpose of Disbursement Candidate Committee Campaign Contribution	Transaction ID : D737793
Candidate Name RICHARD MICHAEL NOLAN	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: MN District: 08		

Full Name (Last, First, Middle Initial) B. Old Town Optimists		Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2014
Mailing Address PO Box 8957		Amount of Each Disbursement this Period 100.00
City Albuquerque State NM Zip Code 87198	Purpose of Disbursement Donation	Transaction ID : D741334
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. OWENS FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014
Mailing Address PO BOX 2786		Amount of Each Disbursement this Period 1000.00
City SALT LAKE CITY State UT Zip Code 84110	Purpose of Disbursement Candidate Committee Campaign Contribution	Transaction ID : D741063
Candidate Name H DOUGLAS OWENS	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: UT District: 04		

SUBTOTAL of Disbursements This Page (optional).....	2100.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 97 OF 101	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Michelle

Full Name (Last, First, Middle Initial) A. PAT MURPHY FOR IOWA		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address PO BOX 692		Amount of Each Disbursement this Period 2000.00
City DUBUQUE State IA Zip Code 52004	Category/Type	
Purpose of Disbursement Candidate Committee Campaign Contribution		Transaction ID : D741043
Candidate Name PATRICK JOSEPH MURPHY		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 01	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Progressive Contacts VCS		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014
Mailing Address 4533 East Harrison St		Amount of Each Disbursement this Period 486.08
City Gilbert State AZ Zip Code 85295	Category/Type	
Purpose of Disbursement Robocall - In-Kind Contribution to Tim Eichenberg for State Treasurer		Transaction ID : D741299 [MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Ray Powell for Land Commissioner		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2014
Mailing Address 805 Pueblo Solano NW		Amount of Each Disbursement this Period 1000.00
City Albuquerque State NM Zip Code 87107	Category/Type	
Purpose of Disbursement State Candidate Campaign Contribution		Transaction ID : D741015
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	3000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 101			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Michelle

Full Name (Last, First, Middle Initial) A. RON BARBER FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2014
Mailing Address PO BOX 57715		Amount of Each Disbursement this Period 1000.00 Transaction ID : D741756
City TUCSON State AZ Zip Code 85732	Purpose of Disbursement Contribution to Recount Fund	
Candidate Name RONALD BARBER		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: AZ District: 02		

Full Name (Last, First, Middle Initial) B. RON BARBER FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2014
Mailing Address PO BOX 57715		Amount of Each Disbursement this Period 764.20 Transaction ID : D741688
City TUCSON State AZ Zip Code 85732	Purpose of Disbursement In-Kind/Travel - United Airline, Transaction ID#D741654	
Candidate Name RONALD BARBER		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: AZ District: 02		

Full Name (Last, First, Middle Initial) c. Martinez for NM 2014		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2014
Mailing Address PO Box 66551		Amount of Each Disbursement this Period 250.00 Transaction ID : D741007
City Albuquerque State NM Zip Code 87193	Purpose of Disbursement State Candidate Campaign Contribution	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2014.20
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 OF 101			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Michelle

Full Name (Last, First, Middle Initial) A. SEAN PATRICK MALONEY FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2014
Mailing Address PO BOX 270		Amount of Each Disbursement this Period 1000.00 Transaction ID : D737782
City NEWBURGH State NY Zip Code 12550	Purpose of Disbursement Candidate Committee Campaign Contribution	
Candidate Name SEAN PATRICK MALONEY	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY District: 18		

Full Name (Last, First, Middle Initial) B. Horsford for Congress		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2014
Mailing Address 6100 ELTON AVE, SUITE 1000		Amount of Each Disbursement this Period 1000.00 Transaction ID : D741038
City LAS VEGAS State NV Zip Code 89107	Purpose of Disbursement Candidate Committee Campaign Contribution	
Candidate Name STEVEN ALEXZANDER HORSFORD	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NV District: 04		

Full Name (Last, First, Middle Initial) c. Switchboard Communications		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014
Mailing Address 2000 14th St NW, First Floor		Amount of Each Disbursement this Period 145.52 Transaction ID : D741705 [MEMO ITEM]
City Washington State DC Zip Code 20009	Purpose of Disbursement In-Kind/Robocall Contribution to Committee to Elect Theresa Smith de Cherif	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 100 OF 101	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Michelle

Full Name (Last, First, Middle Initial) A. Tierra Adentro School		Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2014
Mailing Address 1511 Central Ave NE		Amount of Each Disbursement this Period 300.00 Transaction ID : D741327
City Albuquerque	State NM Zip Code 87106-4408	
Purpose of Disbursement Donation for Scholarship Fund		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Committee to Elect Tim Eichenberg State Senator District 15		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014
Mailing Address 7800 Charger Trl NE		Amount of Each Disbursement this Period 486.08 Transaction ID : D741295
City Albuquerque	State NM Zip Code 87109-3123	
Purpose of Disbursement In-Kind/Robocall - Progressive Contacts VCS Transaction #D741299		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Tim Keller for New Mexico		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2014
Mailing Address 11023 Vistazo PL SE		Amount of Each Disbursement this Period 1000.00 Transaction ID : D741012
City Albuquerque	State NM Zip Code 87123	
Purpose of Disbursement State Candidate Campaign Contribution		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1786.08
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 101 OF 101	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Michelle

Full Name (Last, First, Middle Initial) A. United Airlines		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2014
Mailing Address 77 W Wacker Dr		Amount of Each Disbursement this Period 746.20
City Chicago State IL Zip Code 60601-1604	Purpose of Disbursement In-Kind Contribution to Ron Barber for Congress	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : D741687 [MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. US Airways		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2014
Mailing Address 4000 E Sky Harbor Blvd		Amount of Each Disbursement this Period 461.70
City Phoenix State AZ Zip Code 85034-3802	Purpose of Disbursement In-Kind/Travel to Colorado Democratic Party	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : D736299 [MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	56257.50