

A. Form/Schedule : **F3XA**

Transaction ID :

Additional Notes With Regards to H3 Transfers

_____ 10/27/2010 transfer for \$5,035.00: Admin Tsf _____ -
_____ 11/8/2010 transfer for \$1,960.00: Admin Tsf _____ -
_____ 11/11/2010 transfer for \$402.00: Admin Tsf _____ -
_____ 11/11/2010 transfer for \$5,035.00: Admin Tsf _____ -
_____ 11/19/2010 transfer for \$2,500.00: Admin Tsf _____ -
_____ 10/22/2010 transfer for \$1,905.00: Admin Tsf _____ -
_____ 10/25/2010 transfer for \$3,979.00: Admin Tsf _____ -
_____ 11/1/2010 transfer for \$1,165.00: Admin Tsf _____ -
_____ 11/2/2010 transfer for \$7,315.00: Admin Tsf _____ -

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
Republican Campaign Committee Of New Mexico

Report Covering the Period: From:

M	M
1	0

D	D
1	4

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	1

D	D
2	2

Y	Y	Y	Y
2	0	1	0

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

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
Republican Campaign Committee Of New Mexico

Report Covering the Period: From:

M	M
1	0

D	D
1	4

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	1

D	D
2	2

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	23620.00	68503.04
(ii) Unitemized	8310.00	259824.79
(iii) TOTAL (add Lines 11(a)(i) and (ii)	31930.00	328327.83
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	3300.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	31930.00	331627.83
12. Transfers From Affiliated/Other Party Committees	153380.00	438871.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	894.86	1101.02
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	1.50	19.14
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	21338.00	208897.00
(b) Levin Funds (from Schedule H5)	3006.00	39868.00
(c) Total Transfer (add 18(a) and 18(b)).	24344.00	248765.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	210550.36	1020383.99
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	186206.36	771618.99

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	3919.52	48802.52
(ii) Non-Federal Share.....	22210.36	202111.91
(b) Other Federal Operating Expenditures.....	144037.37	352837.97
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	170167.25	603752.40
22. Transfers to Affiliated/Other Party Committees.....	6382.67	83620.98
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	0.00	24000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	1500.00	1680.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	532.20	7039.63
(ii) "Levin" Share	3015.80	39891.22
(b) Federal Election Activity Paid Entirely With Federal Funds	103421.91	192880.63
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	106969.91	239811.48
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	285019.83	952864.86
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	259793.67	710861.73

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	31930.00	331627.83
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	31930.00	331627.83
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	147956.89	401640.49
37. Offsets to Operating Expenditures (from Line 15, page 3)	894.86	1101.02
38. Net Operating Expenditures (subtract Line 37 from Line 36)	147062.03	400539.47

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 139

(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
The Honora Brian Moore

Mailing Address 724 Walnut Street

City State Zip Code
Clayton NM 88415-2916

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

Name of Employer Occupation
Ranch market President

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 590.00

Date of Receipt

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

Transaction ID: SA11AI-10260-99930-c

Amount of Each Receipt this Period
40.00

B.

Full Name (Last, First, Middle Initial)
Mrs. Maxine Melbourne

Mailing Address 816 Southeast Circle NW

City State Zip Code
Albuquerque NM 87104-1963

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

Name of Employer Occupation
Melbourne Financial Corp. Financial Corp.

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 480.00

Date of Receipt

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

Transaction ID: SA11AI-11406-99489-c

Amount of Each Receipt this Period
50.00

C.

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

Mailing Address PO Box 29

City State Zip Code
Cloudcroft NM 88317-0029

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

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 280.00

Date of Receipt

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

Transaction ID: SA11AI-11451-99459-c

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ▶

110.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 139

(check only one)

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

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

A.

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

Mailing Address PO Box 29

City State Zip Code
Cloudcroft NM 88317-0029

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

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 280.00

Date of Receipt

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

Transaction ID: SA11AI-11451-99888-c

Amount of Each Receipt this Period
40.00

B.

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

Mailing Address 1325 Cuba Avenue

City State Zip Code
Alamogordo NM 88310-5727

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

Name of Employer Occupation
None Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 805.00

Date of Receipt

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

Transaction ID: SA11AI-1268-99495-c

Amount of Each Receipt this Period
50.00

C.

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

Mailing Address 1325 Cuba Avenue

City State Zip Code
Alamogordo NM 88310-5727

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

Name of Employer Occupation
None Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 805.00

Date of Receipt

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

Transaction ID: SA11AI-1268-99656-c

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)

115.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 139
(check only one)

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

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

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

Mailing Address PO Box 567

City State Zip Code
Mountainair NM 87036-0567

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

Name of Employer P & M Sign Inc Occupation Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt: 11 / 09 / 2010
Transaction ID: SA11AI-128-99857-c
Amount of Each Receipt this Period: 40.00

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

Mailing Address 7A Roy Crawford Lane

City State Zip Code
Santa Fe NM 87505-4576

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

Name of Employer Santa Fe Recovery Center Occupation Therapist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 560.00

Date of Receipt: 10 / 26 / 2010
Transaction ID: SA11AI-12982-99575-c
Amount of Each Receipt this Period: 180.00

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

Mailing Address 1814 N Guadalupe Street

City State Zip Code
Carlsbad NM 88220-8813

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

Name of Employer Brown Law Firm Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt: 11 / 09 / 2010
Transaction ID: SA11AI-1337-99874-c
Amount of Each Receipt this Period: 40.00

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

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 139
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Mr. Kerry Boyd	Date of Receipt MM / DD / YYYY 11 / 09 / 2010
	Mailing Address 1897 Candela Street	Transaction ID: SA11AI-14785-99922-c
	City State Zip Code Santa Fe NM 87505-5646	Amount of Each Receipt this Period 80.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Century 21 Land Sun Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00	

B.	Full Name (Last, First, Middle Initial) Mr. Kerry Boyd	Date of Receipt MM / DD / YYYY 11 / 10 / 2010
	Mailing Address 1897 Candela Street	Transaction ID: SA11AI-14785-99955-c
	City State Zip Code Santa Fe NM 87505-5646	Amount of Each Receipt this Period 180.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Century 21 Land Sun Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00	

C.	Full Name (Last, First, Middle Initial) Ms. Daureen Dolce	Date of Receipt MM / DD / YYYY 11 / 09 / 2010
	Mailing Address 12 Westlake Drive NE	Transaction ID: SA11AI-1671-99846-c
	City State Zip Code Albuquerque NM 87112-4264	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation The Right to Life Committ- ee NM Executive Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 510.00	

SUBTOTAL of Receipts This Page (optional)	300.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 11 / 139
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

A.	Full Name (Last, First, Middle Initial) Mr. Jeffery Terranova		Date of Receipt MM / DD / YYYY 11 / 01 / 2010		
	Mailing Address PO Box 1480		Transaction ID: SA11AI-19430-99649-c		
	City Mesilla	State NM	Zip Code 88046-1480	Amount of Each Receipt this Period 150.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer F & A Dairy Products Inc	Occupation President			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 450.00			

B.	Full Name (Last, First, Middle Initial) The Honora Jimmie Hall		Date of Receipt MM / DD / YYYY 11 / 09 / 2010		
	Mailing Address 13008 Gray Hills Road NE		Transaction ID: SA11AI-19900-99835-c		
	City Albuquerque	State NM	Zip Code 87111-4378	Amount of Each Receipt this Period 40.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer None	Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 760.00			

C.	Full Name (Last, First, Middle Initial) Mr. Wayne Johnson		Date of Receipt MM / DD / YYYY 11 / 22 / 2010		
	Mailing Address 2926 La Camila Road NE		Transaction ID: SA11AI20533100012c		
	City Albuquerque	State NM	Zip Code 87111-4510	Amount of Each Receipt this Period 15.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Tucumcari Animal Hospital	Occupation Senior Safety Coordinator			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 705.00			

SUBTOTAL of Receipts This Page (optional)	▶	205.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 139
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Republican Campaign Committee Of New Mexico

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

Mailing Address 2926 La Camila Road NE

City Albuquerque State NM Zip Code 87111-4510

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

Name of Employer Tukumcari Animal Hospital Occupation Senior Safety Coordinator

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 705.00

Date of Receipt 10 / 22 / 2010

Transaction ID: SA11AI-20533-99420-c

Amount of Each Receipt this Period 15.00

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

Mailing Address PO Box 1818

City Roswell State NM Zip Code 88202-1818

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

Name of Employer Self-Employed Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 605.00

Date of Receipt 10 / 25 / 2010

Transaction ID: SA11AI-20950-99471-c

Amount of Each Receipt this Period 15.00

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

Mailing Address 1030 N Alameda Street

City Carlsbad State NM Zip Code 88220-5104

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

Name of Employer Cress Insurance Consultants Occupation Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt 10 / 28 / 2010

Transaction ID: SA11AI-21137-99606-c

Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) ► 130.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 139
(check only one)

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

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

A. Full Name (Last, First, Middle Initial)
Ms. Judith Ledford

Mailing Address 1030 N Alameda Street

City Carlsbad State NM Zip Code 88220-5104

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

Name of Employer Cress Insurance Consultants Occupation Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt 11 / 09 / 2010

Transaction ID: SA11AI-21137-99876-c

Amount of Each Receipt this Period 40.00

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

Mailing Address 1341 Oakhurst Road

City Clovis State NM Zip Code 88101-4426

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

Name of Employer None Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 21 / 2010

Transaction ID: SA11AI-21567-99404-c

Amount of Each Receipt this Period 25.00

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

Mailing Address 1341 Oakhurst Road

City Clovis State NM Zip Code 88101-4426

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

Name of Employer None Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt 11 / 17 / 2010

Transaction ID: SA11AI-21567-99994-c

Amount of Each Receipt this Period 25.00

SUBTOTAL of Receipts This Page (optional) ▶ 90.00

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

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

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

FOR LINE NUMBER: PAGE 14 / 139
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)

Mr. Charles Moran

Mailing Address 1919 Villa Drive

City State Zip Code
Artesia NM 88210-1644

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

Name of Employer
Yates Petroleum Corporati-
on

Occupation
Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2290.00

Date of Receipt

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

Transaction ID: SA11AI-2180-99685-c

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Mr. Hoyt Pattison

Mailing Address 2295 Curry Rd. H

City State Zip Code
Clovis NM 88101-0900

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

Name of Employer
Self-Employed

Occupation
Farmer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
910.00

Date of Receipt

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

Transaction ID: SA11AI-21922-99683-c

Amount of Each Receipt this Period

0.00

C.

Full Name (Last, First, Middle Initial)

Mr. Hoyt Pattison

Mailing Address 2295 Curry Rd. H

City State Zip Code
Clovis NM 88101-0900

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

Name of Employer
Self-Employed

Occupation
Farmer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
910.00

Date of Receipt

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

Transaction ID: SA11AI-21922-99684-c

Amount of Each Receipt this Period

180.00

SUBTOTAL of Receipts This Page (optional) ▶

680.00

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

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 139

(check only one)

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

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

A.

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

Mailing Address 125 Smoke Rise Trail

City State Zip Code
Belen NM 87002-9543

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

Name of Employer Occupation
None Homemaker

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

Date of Receipt

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

Transaction ID: SA11AI-23013-99354-c

Amount of Each Receipt this Period
25.00

B.

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

Mailing Address 125 Smoke Rise Trail

City State Zip Code
Belen NM 87002-9543

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

Name of Employer Occupation
None Homemaker

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

Date of Receipt

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

Transaction ID: SA11AI-23013-99563-c

Amount of Each Receipt this Period
25.00

C.

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

Mailing Address PO Box 3102

City State Zip Code
Roswell NM 88202-3102

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

Name of Employer Occupation
Mack Energy Corporation Attorney

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1165.00

Date of Receipt

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

Transaction ID: SA11AI-23152-99472-c

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional)

65.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 16 / 139
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Mailing Address PO Box 400

City Roswell State NM Zip Code 88202-0400

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

Name of Employer Self-Employed Occupation Investments

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

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

Transaction ID: SA11AI-23905-99549-c

Amount of Each Receipt this Period
500.00

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

Mailing Address PO Box 50787

City Albuquerque State NM Zip Code 87181-0787

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

Name of Employer PNM Occupation Engineer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 455.00

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

Transaction ID: SA11AI-25500-99834-c

Amount of Each Receipt this Period
40.00

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

Mailing Address PO Box 50787

City Albuquerque State NM Zip Code 87181-0787

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

Name of Employer PNM Occupation Engineer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 455.00

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

Transaction ID: SA11AI-25500-99970-c

Amount of Each Receipt this Period
15.00

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

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

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

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

FOR LINE NUMBER: PAGE 17 / 139
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Mailing Address PO Box 157

City Mora State NM Zip Code 87732-0157

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

Name of Employer Self-Employed Occupation Rancher

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt 10 / 26 / 2010

Transaction ID: SA11AI-2565-99564-c

Amount of Each Receipt this Period 25.00

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

Mailing Address PO Box 157

City Mora State NM Zip Code 87732-0157

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

Name of Employer Self-Employed Occupation Rancher

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt 11 / 17 / 2010

Transaction ID: SA11AI-2565-99996-c

Amount of Each Receipt this Period 15.00

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

Mailing Address 817 Salamanca Street NW

City Los Ranchos State NM Zip Code 87107-5639

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

Name of Employer Argus Development Company Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 28 / 2010

Transaction ID: SA11AI-25704-99603-c

Amount of Each Receipt this Period 5000.00

SUBTOTAL of Receipts This Page (optional) ► 5040.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 139
(check only one)

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

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

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

Mailing Address 10 Ellis Ranch Loop

City Santa Fe State NM Zip Code 87505-1472

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

Name of Employer Self-Employed Occupation Writer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 11 / 09 / 2010

Transaction ID: SA11AI-27852-99929-c

Amount of Each Receipt this Period 40.00

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

Mailing Address 3133 Vista Sandia

City Santa Fe State NM Zip Code 87506-8528

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

Name of Employer Firemark Investments Occupation Investment Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt 11 / 09 / 2010

Transaction ID: SA11AI-27855-99927-c

Amount of Each Receipt this Period 40.00

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

Mailing Address 800 Garcia Street

City Santa Fe State NM Zip Code 87505-2862

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

Name of Employer LANL Occupation Staff Scientist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 26 / 2010

Transaction ID: SA11AI-29305-99533-c

Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) ► 180.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 139
(check only one)

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

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

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

Mailing Address 1207 Cuatro Cerros Trail SE

City State Zip Code
Albuquerque NM 87123-4151

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

Name of Employer DOJ/FAA Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

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

Transaction ID: SA11AI-3026-99841-c

Amount of Each Receipt this Period
40.00

B. Full Name (Last, First, Middle Initial)
Mr. Mike Tellez

Mailing Address 909 N Alameda Boulevard

City State Zip Code
Las Cruces NM 88005-2124

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

Name of Employer Family Restaurant Group LLC Occupation Restaurant Operator

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 265.00

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

Transaction ID: SA11AI31639100009c

Amount of Each Receipt this Period
15.00

C. Full Name (Last, First, Middle Initial)
Mr. Mike Tellez

Mailing Address 909 N Alameda Boulevard

City State Zip Code
Las Cruces NM 88005-2124

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

Name of Employer Family Restaurant Group LLC Occupation Restaurant Operator

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 265.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: SA11AI-31639-99346-c

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional) ▶ **70.00**

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

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

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

FOR LINE NUMBER: PAGE 20 / 139
(check only one)

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

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

A.

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

Mailing Address 4108 Cibola Village Drive NE

City State Zip Code
Albuquerque NM 87111-4112

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

Name of Employer Occupation
None Retired

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

Date of Receipt

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

Transaction ID: SA11AI-3399-99427-c

Amount of Each Receipt this Period
100.00

B.

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

Mailing Address 2916 Maese Lane

City State Zip Code
Las Cruces NM 88007-5020

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

Name of Employer Occupation
Self-Employed Day Care Owner

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 760.00

Date of Receipt

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

Transaction ID: SA11AI-34584-99871-c

Amount of Each Receipt this Period
40.00

C.

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

Mailing Address 25 Tano Alto

City State Zip Code
Santa Fe NM 87506-7503

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

Name of Employer Occupation
none Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

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

Transaction ID: SA11AI-3484-99682-c

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ►

190.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 139
(check only one)

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

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

A.

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

Mailing Address 909 Rio Vista Circle SW

City State Zip Code
Albuquerque NM 87105-3323

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

Name of Employer VRI,LC Occupation Geologist

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1885.00

Date of Receipt

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

Transaction ID: SA11AI-35124-99803-c

Amount of Each Receipt this Period
60.00

B.

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

Mailing Address 2908 Pueblo Tsankawi

City State Zip Code
Santa Fe NM 87507-2530

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

Name of Employer None Occupation Retired

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1200.00

Date of Receipt

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

Transaction ID: SA11AI-36787-99587-c

Amount of Each Receipt this Period
1000.00

C.

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

Mailing Address 3 Painted Horse

City State Zip Code
Santa Fe NM 87506-8298

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

Name of Employer None Occupation Retired

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 770.00

Date of Receipt

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

Transaction ID: SA11AI39247100028c

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)

1110.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 / 139

(check only one)

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

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

A.

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

Mailing Address 3 Painted Horse

City State Zip Code
Santa Fe NM 87506-8298

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

Name of Employer Occupation
None Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 770.00

Date of Receipt

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

Transaction ID: SA11AI-39247-99423-c

Amount of Each Receipt this Period
50.00

B.

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

Mailing Address 581 Enchanted Forrest Loop

City State Zip Code
Alto NM 88312-9589

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

Name of Employer Occupation
Self-Employed Consultant

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 205.00

Date of Receipt

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

Transaction ID: SA11AI39280100008c

Amount of Each Receipt this Period
15.00

C.

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

Mailing Address 581 Enchanted Forrest Loop

City State Zip Code
Alto NM 88312-9589

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

Name of Employer Occupation
Self-Employed Consultant

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 205.00

Date of Receipt

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

Transaction ID: SA11AI-39280-99373-c

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional) ▶

80.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 139
(check only one)

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

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

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

Mailing Address 581 Enchanted Forrest Loop

City Alto State NM Zip Code 88312-9589

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

Name of Employer Self-Employed Occupation Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt 11 / 09 / 2010

Transaction ID: SA11AI-39280-99884-c

Amount of Each Receipt this Period 40.00

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

Mailing Address 3209 Lazy Day Drive SW

City Albuquerque State NM Zip Code 87121-6701

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

Name of Employer None Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 15 / 2010

Transaction ID: SA11AI-39557-99323-c

Amount of Each Receipt this Period 15.00

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

Mailing Address 3209 Lazy Day Drive SW

City Albuquerque State NM Zip Code 87121-6701

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

Name of Employer None Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt 11 / 17 / 2010

Transaction ID: SA11AI-39557-99995-c

Amount of Each Receipt this Period 15.00

SUBTOTAL of Receipts This Page (optional) ► 70.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 139
(check only one)

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

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

A.

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

Mailing Address 608 W Plains Avenue

City Clovis State NM Zip Code 88101-4232

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

Name of Employer DAVTEK Corp Occupation Construction Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt 11 / 10 / 2010

Transaction ID: SA11AI-39564-99951-c

Amount of Each Receipt this Period 50.00

B.

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

Mailing Address PO Box 52103

City Albuquerque State NM Zip Code 87181-2103

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

Name of Employer CARE Occupation Executive Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 265.00

Date of Receipt 10 / 18 / 2010

Transaction ID: SA11AI-39618-99353-c

Amount of Each Receipt this Period 15.00

C.

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

Mailing Address PO Box 52103

City Albuquerque State NM Zip Code 87181-2103

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

Name of Employer CARE Occupation Executive Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 265.00

Date of Receipt 11 / 17 / 2010

Transaction ID: SA11AI-39618-99993-c

Amount of Each Receipt this Period 15.00

SUBTOTAL of Receipts This Page (optional) ► 80.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 139

(check only one)

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

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

A.

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

Mailing Address 5300 Knight Road NE

City Albuquerque State NM Zip Code 87109-3109

FEC ID number of contributing federal political committee. C

Name of Employer Rio Grande Credit Union Occupation Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

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

Transaction ID: SA11AI-39653-99747-c

Amount of Each Receipt this Period 15.00

B.

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

Mailing Address PO Box 1037

City Silver City State NM Zip Code 88062-1037

FEC ID number of contributing federal political committee. C

Name of Employer None Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

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

Transaction ID: SA11AI-39750-99748-c

Amount of Each Receipt this Period 15.00

C.

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

Mailing Address PO Box 1037

City Silver City State NM Zip Code 88062-1037

FEC ID number of contributing federal political committee. C

Name of Employer None Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

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

Transaction ID: SA11AI-39750-99878-c

Amount of Each Receipt this Period 40.00

SUBTOTAL of Receipts This Page (optional) 70.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 / 139
(check only one)

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

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

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

A.

Full Name (Last, First, Middle Initial)
Mrs. Debra White

Mailing Address 985 Shakespeare Lane

City State Zip Code
Las Cruces NM 88007-4885

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

Name of Employer Occupation
None Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 525.00

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

Transaction ID: SA11AI-39781-99976-c

Amount of Each Receipt this Period
125.00

B.

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

Mailing Address 1531 Camino Cerrito SE

City State Zip Code
Albuquerque NM 87123-4400

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

Name of Employer Occupation
Self Employed Real Estate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 915.00

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

Transaction ID: SA11AI-39785-99953-c

Amount of Each Receipt this Period
15.00

C.

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

Mailing Address 4800 Brookwood Street NE

City State Zip Code
Albuquerque NM 87109-2808

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

Name of Employer Occupation
UNM Professor Emeritus

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

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

Transaction ID: SA11AI-40103-99425-c

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ▶ **640.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 / 139
(check only one)

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

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

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

A.

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

Mailing Address 4128 Dietz Farm Circle NW

City	State	Zip Code
Los Ranchos	NM	87107-3126

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

Name of Employer Self	Occupation Attorney
--------------------------	------------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00
---	------------------------------------

Date of Receipt

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

Transaction ID: SA11AI-40263-99961-c

Amount of Each Receipt this Period

100.00

B.

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

Mailing Address 428 Sandoval Street

City	State	Zip Code
Santa Fe	NM	87501-7312

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

Name of Employer Best Efforts	Occupation Best Efforts
----------------------------------	----------------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00
---	-------------------------------------

Date of Receipt

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

Transaction ID: SA11AI-40526-99318-c

Amount of Each Receipt this Period

5000.00

C.

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

Mailing Address 5351 Wilshire Avenue NE

City	State	Zip Code
Albuquerque	NM	87113-1934

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

Name of Employer Business Environments	Occupation Owner
---	---------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00
---	-------------------------------------

Date of Receipt

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

Transaction ID: SA11AI-40531-99351-c

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

6100.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 28 / 139
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Mailing Address 5351 Wilshire Avenue NE

City Albuquerque State NM Zip Code 87113-1934

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

Name of Employer Business Environments Occupation Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 18 / 2010
Transaction ID: SA11AI-40532-99352-c
Amount of Each Receipt this Period 1000.00

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

Mailing Address 425 Huehl Road Bldg. 3

City Northbrook State IL Zip Code 60062-2323

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

Name of Employer Self Occupation Businessman

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 28 / 2010
Transaction ID: SA11AI-40562-99604-c
Amount of Each Receipt this Period 5000.00

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

Mailing Address 388 Road 2900

City Aztec State NM Zip Code 87410-9712

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

Name of Employer Self-Employed Occupation Rancher

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt 11 / 09 / 2010
Transaction ID: SA11AI-4956-99910-c
Amount of Each Receipt this Period 40.00

SUBTOTAL of Receipts This Page (optional) ▶ 6040.00

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

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

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

FOR LINE NUMBER: PAGE 29 / 139
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Mailing Address 1616 Soplo Road SE

City Albuquerque State NM Zip Code 87123-4455

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

Name of Employer Barnett Law Firm, PA Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt 11 / 09 / 2010
Transaction ID: SA11AI-7262-99829-c
Amount of Each Receipt this Period 40.00

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

Mailing Address PO Box 30243

City Albuquerque State NM Zip Code 87190-0243

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

Name of Employer None Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 11 / 02 / 2010
Transaction ID: SA11AI-7514-99688-c
Amount of Each Receipt this Period 40.00

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

Mailing Address 7112 Pan Am E Freeway NE Unit 377

City Albuquerque State NM Zip Code 87109-4226

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

Name of Employer Lovelace Medical Center Occupation RN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 12 / 2010
Transaction ID: SA11AI-7590-99966-c
Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional) ► 100.00

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

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

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

FOR LINE NUMBER: PAGE 30 / 139
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Charles Tipton
Mailing Address 3613 Espejo Street NE
City Albuquerque State NM Zip Code 87111-4762
FEC ID number of contributing federal political committee. **C**
Name of Employer Applied Technology Associates Occupation Scientist
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 530.00
Date of Receipt 10 / 22 / 2010
Transaction ID: SA11AI-7630-99745-c
Amount of Each Receipt this Period 30.00

B. Full Name (Last, First, Middle Initial)
Charles Tipton
Mailing Address 3613 Espejo Street NE
City Albuquerque State NM Zip Code 87111-4762
FEC ID number of contributing federal political committee. **C**
Name of Employer Applied Technology Associates Occupation Scientist
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 530.00
Date of Receipt 11 / 09 / 2010
Transaction ID: SA11AI-7630-99852-c
Amount of Each Receipt this Period 40.00

C. Full Name (Last, First, Middle Initial)
Mrs. Marjorie Teague
Mailing Address 4910 Simon Drive NW
City Albuquerque State NM Zip Code 87114-4329
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed Occupation Lobbyist
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 670.00
Date of Receipt 11 / 09 / 2010
Transaction ID: SA11AI-7860-99893-c
Amount of Each Receipt this Period 40.00

SUBTOTAL of Receipts This Page (optional) ► 110.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 31 / 139
(check only one)

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

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

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

Mailing Address PO Box 1714

City Roswell State NM Zip Code 88202-1714

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

Name of Employer Self-Employed Occupation Investments

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

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

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

Mailing Address 5819 Padre Roberto Road NW

City Los Ranchos State NM Zip Code 87107-7115

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1560.00

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

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

Mailing Address 4910 Simon Drive NW

City Albuquerque State NM Zip Code 87114-4329

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

Name of Employer Self Employed Occupation Lobbyist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 540.00

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

SUBTOTAL of Receipts This Page (optional) ▶ 600.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 32 / 139
(check only one)

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

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

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

Mailing Address 7112 Lantern Road NE

City Albuquerque State NM Zip Code 87109-2915

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

Name of Employer None Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt 11 / 09 / 2010

Transaction ID: SA11AI-8626-99837-c

Amount of Each Receipt this Period 40.00

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

Mailing Address PO Box 1369

City Socorro State NM Zip Code 87801-1369

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

Name of Employer Tripp's Inc Occupation Jeweler

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5630.00

Date of Receipt 11 / 09 / 2010

Transaction ID: SA11AI-8662-99890-c

Amount of Each Receipt this Period 40.00

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

Mailing Address 29 Chisholm Trail

City Santa Fe State NM Zip Code 87506-9575

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

Name of Employer None Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 26 / 2010

Transaction ID: SA11AI-8676-99552-c

Amount of Each Receipt this Period 200.00

SUBTOTAL of Receipts This Page (optional) ► 280.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 33 / 139

(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)

Mr. Holm Bursum, III

Mailing Address PO Box 1457

City State Zip Code
Socorro NM 87801-1457

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

Name of Employer Occupation
First State Bank of Socorro Banker

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

Date of Receipt

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

Transaction ID: SA11AI-8708-99743-c

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Mrs. Josephine Mitchell

Mailing Address 1432 Stagecoach Road SE

City State Zip Code
Albuquerque NM 87123-4433

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

Name of Employer Occupation
None Retired

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

Date of Receipt

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

Transaction ID: SA11AI-8710-99845-c

Amount of Each Receipt this Period

40.00

C.

Full Name (Last, First, Middle Initial)

Mrs. Nancy Hobbs

Mailing Address 1415 Catron Avenue SE

City State Zip Code
Albuquerque NM 87123-4215

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

Name of Employer Occupation
None Housewife

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

Date of Receipt

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

Transaction ID: SA11AI-8812-99476-c

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional) ▶

240.00

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

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

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

FOR LINE NUMBER: PAGE 34 / 139
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Mailing Address 31 Eagle Ridge

City State Zip Code
Santa Fe NM 87508-5907

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

Name of Employer Occupation
Santa Fe Radiology Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 625.00

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

Transaction ID: SA11AI-8924-99924-c

Amount of Each Receipt this Period
40.00

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

Mailing Address 15 Pueblo Trail

City State Zip Code
Alamogordo NM 88310-9757

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

Name of Employer Occupation
None Housewife

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

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

Transaction ID: SA11AI-8951-99655-c

Amount of Each Receipt this Period
20.00

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

Mailing Address 7615 Storrie Place NE

City State Zip Code
Albuquerque NM 87109-5378

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

Name of Employer Occupation
None Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

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

Transaction ID: SA11AI-8996-99570-c

Amount of Each Receipt this Period
50.00

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

TOTAL This Period (last page this line number only) ► **23620.00**

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

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

FOR LINE NUMBER: PAGE 35 / 139

(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Republican National Committee (tsfs)

Mailing Address 310 1st Street SE

City State Zip Code
Washington DC 20003-1885

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 390871.00

Date of Receipt

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

Transaction ID: SA12-2878-99306-c

Amount of Each Receipt this Period
1440.00

In-Kind Transfer

B.

Full Name (Last, First, Middle Initial)
Republican National Committee (tsfs)

Mailing Address 310 1st Street SE

City State Zip Code
Washington DC 20003-1885

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 390871.00

Date of Receipt

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

Transaction ID: SA12-2878-99810-c

Amount of Each Receipt this Period
38000.00

C.

Full Name (Last, First, Middle Initial)
Republican National Committee (tsfs)

Mailing Address 310 1st Street SE

City State Zip Code
Washington DC 20003-1885

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 390871.00

Date of Receipt

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

Transaction ID: SA12-2878-99940-c

Amount of Each Receipt this Period
1440.00

In-Kind Transfer

SUBTOTAL of Receipts This Page (optional) ▶

40880.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 36 / 139

(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Republican National Committee (tsfs)

Mailing Address 310 1st Street SE

City	State	Zip Code
Washington	DC	20003-1885

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
390871.00

Date of Receipt

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

Transaction ID: SA12-2878-99809-c

Amount of Each Receipt this Period
52000.00

B.

Full Name (Last, First, Middle Initial)
Republican National Committee (tsfs)

Mailing Address 310 1st Street SE

City	State	Zip Code
Washington	DC	20003-1885

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
390871.00

Date of Receipt

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

Transaction ID: SA12-2878-99303-c

Amount of Each Receipt this Period
60500.00

SUBTOTAL of Receipts This Page (optional)

112500.00

TOTAL This Period (last page this line number only)

153380.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 37 / 139
(check only one)

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

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

A.

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

Mailing Address 4913 Northridge Place NE

City State Zip Code
Albuquerque NM 87111-2105

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
875.86

Date of Receipt

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

Transaction ID: SA15-40326-100010-e

Amount of Each Receipt this Period
875.86

Refund of Unused Staff Expenses

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

<p>A. Full Name (Last, First, Middle Initial) Ms. Kial Vidic</p> <p>Mailing Address 1230 Mahood Road</p> <p>City West Sunbury State PA Zip Code 16061-2020</p> <p>Purpose of Disbursement Administrative/Salary/Overhead: Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-40334-100019-e</p> <p>Date of Disbursement 11 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 1149.51</p> <p>Category/Type 001</p>
<p>B. Full Name (Last, First, Middle Initial) Ms. Ana Maria Salazar</p> <p>Mailing Address 2948 Missouri Avenue</p> <p>City Las Cruces State NM Zip Code 88011-4814</p> <p>Purpose of Disbursement Reimbursements: Mileage and under \$200</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-40432-99773-e</p> <p>Date of Disbursement 11 / 03 / 2010</p> <p>Amount of Each Disbursement this Period 575.99</p> <p>Category/Type 001</p>
<p>C. Full Name (Last, First, Middle Initial) Comcast Cable</p> <p>Mailing Address PO Box 34744</p> <p>City Seattle State WA Zip Code 98124-1744</p> <p>Purpose of Disbursement Administrative/Salary/Overhead: Internet</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-40385-99866-e</p> <p>Date of Disbursement 11 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 102.07</p> <p>Category/Type 001</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1827.57

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

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

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

FOR LINE NUMBER: (check only one)

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

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

A. Full Name (Last, First, Middle Initial) Fiesta Del Norte One, LLC <hr/> Mailing Address C/O NAI Horizon Real Estate Group 2944 North 44th St, Ste 200 <hr/> City Phoenix State AZ Zip Code 85018 <hr/> Purpose of Disbursement Administrative/Salary/Overhead: Rent Candidate Name	Transaction ID: SB21B-25551-99629-e Date of Disbursement 10 / 29 / 2010 <hr/> Amount of Each Disbursement this Period 2174.76		
		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type: 001	
		Disbursement For:	
B. Full Name (Last, First, Middle Initial) Joshua Weber <hr/> Mailing Address 1241 Orchard Park Circle <hr/> City Pflugerville State TX Zip Code 78660-2431 <hr/> Purpose of Disbursement Administrative/Salary/Overhead: Salary Candidate Name	Transaction ID: SB21B-40308-100015-e Date of Disbursement 11 / 15 / 2010 <hr/> Amount of Each Disbursement this Period 1461.97		
		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type: 001	
		Disbursement For:	
C. Full Name (Last, First, Middle Initial) Taxation & Revenue Department <hr/> Mailing Address PO Box 25128 <hr/> City Santa Fe State NM Zip Code 87504-5128 <hr/> Purpose of Disbursement WC 3Q 2010 Candidate Name	Transaction ID: SB21B-18771-99446-e Date of Disbursement 10 / 22 / 2010 <hr/> Amount of Each Disbursement this Period 30.10		
		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type: 001	
		Disbursement For:	

SUBTOTAL of Disbursements This Page (optional) ▶

3666.83

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Ms. Ana Maria Salazar</p> <p>Mailing Address 2948 Missouri Avenue</p> <p>City Las Cruces State NM Zip Code 88011-4814</p> <p>Purpose of Disbursement Political Consulting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-40432-100013-e Date of Disbursement 11 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>001 Category/ Type</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) US Airways</p> <p>Mailing Address 799 Hanes Mall Boulevard</p> <p>City Winston Salem State NC Zip Code 27103-5637</p> <p>Purpose of Disbursement Flights for deployments</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-38899-99399-e Date of Disbursement 10 / 21 / 2010</p> <p>Amount of Each Disbursement this Period 4876.80</p> <p>001 Category/ Type</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Mr. Ash Wright</p> <p>Mailing Address 6001 San Mateo Boulevard NE Suite 1B</p> <p>City Albuquerque State NM Zip Code 87109-3447</p> <p>Purpose of Disbursement Reimbursement: Office Depot (see below) and other under \$200</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-40310-99360-e Date of Disbursement 10 / 18 / 2010</p> <p>Amount of Each Disbursement this Period 235.44</p> <p>001 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

7112.24

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

A. Full Name (Last, First, Middle Initial) Office Depot <hr/> Mailing Address 1405 N Renaissance Boulevard NE <hr/> City Albuquerque State NM Zip Code 87107-7006 <hr/> Purpose of Disbursement Office Supplies Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-40410-96738-V Date of Disbursement 10 / 15 / 2010
	Amount of Each Disbursement this Period 216.22
	[MEMO ITEM] Subitemization of Ash Wright (10/18/10)
	Category/Type 001
B. Full Name (Last, First, Middle Initial) Hotwire <hr/> Mailing Address 655 Montgomery Street Suite 600 <hr/> City San Francisco State CA Zip Code 94111-2627 <hr/> Purpose of Disbursement Hotel Room Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-40564-96750-V Date of Disbursement 10 / 29 / 2010
	Amount of Each Disbursement this Period 241.73
	[MEMO ITEM] Subitemization of Ash Wright (11/03/10)
	Category/Type 001
C. Full Name (Last, First, Middle Initial) Mr. Ash Wright <hr/> Mailing Address 6001 San Mateo Boulevard NE Suite 1B <hr/> City Albuquerque State NM Zip Code 87109-3447 <hr/> Purpose of Disbursement Reimbursements: Hotel and under \$200 Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-40310-99771-e Date of Disbursement 11 / 03 / 2010
	Amount of Each Disbursement this Period 616.77
	[MEMO ITEM] Subitemization of Ash Wright (11/03/10)
	Category/Type 001

SUBTOTAL of Disbursements This Page (optional) ▶

616.77

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Presbyterian Insurance Company</p> <p>Mailing Address 1600 PO Box</p> <p>City Denver State CO Zip Code 80291-0001</p> <p>Purpose of Disbursement Health Insurance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-22713-96749-V</p> <p>Date of Disbursement 10 / 13 / 2010</p> <p>Amount of Each Disbursement this Period 136.62</p> <p>[MEMO ITEM] Subitemization of Tiffany Kardeen (11/02/10)</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Miss Tiffany Kardeen</p> <p>Mailing Address 11804 Palo Duro Avenue NE</p> <p>City Albuquerque State NM Zip Code 87111-4145</p> <p>Purpose of Disbursement Reimbursement: Insurance(Non FEA)</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-34571-99660-e</p> <p>Date of Disbursement 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 136.62</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) PNM</p> <p>Mailing Address PO Box 17970</p> <p>City Denver State CO Zip Code 80217-0970</p> <p>Purpose of Disbursement Utilities: Electricity</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-23373-100007-e</p> <p>Date of Disbursement 11 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 16.86</p>

SUBTOTAL of Disbursements This Page (optional) ▶

153.48

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

<p>A. Full Name (Last, First, Middle Initial) Wells Fargo Bank, NA</p> <p>Mailing Address 7412 Jefferson Street NE</p> <p>City Albuquerque State NM Zip Code 87109-4336</p> <p>Purpose of Disbursement Bank Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-39724-100044-e</p> <p>Date of Disbursement 10 / 21 / 2010</p> <p>Amount of Each Disbursement this Period 3.00</p> <p>Category/Type 001</p>
<p>B. Full Name (Last, First, Middle Initial) Scott Zacheus</p> <p>Mailing Address 406 E Arriba Drive</p> <p>City Hobbs State NM Zip Code 88240-3433</p> <p>Purpose of Disbursement Reimbursements: Mileage and under \$200</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-40377-99617-e</p> <p>Date of Disbursement 10 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 784.64</p> <p>Category/Type 001</p>
<p>C. Full Name (Last, First, Middle Initial) Ms. Ana Maria Salazar</p> <p>Mailing Address 2948 Missouri Avenue</p> <p>City Las Cruces State NM Zip Code 88011-4814</p> <p>Purpose of Disbursement Staff Expenses: under \$200</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-40432-99512-e</p> <p>Date of Disbursement 10 / 25 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Category/Type 001</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1787.64

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

<p>A. Full Name (Last, First, Middle Initial) Scott Zacheus</p> <p>Mailing Address 406 E Arriba Drive</p> <p>City Hobbs State NM Zip Code 88240-3433</p> <p>Purpose of Disbursement Reimbursement: Hotel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-40377-99800-e Date of Disbursement 11 / 05 / 2010</p> <p>Amount of Each Disbursement this Period 244.74</p> <p>001 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Comfort Suites</p> <p>Mailing Address 3348 Cerrillos Road</p> <p>City Santa Fe State NM Zip Code 87507-2902</p> <p>Purpose of Disbursement Hotel Room</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-40639-96751-V Date of Disbursement 11 / 03 / 2010</p> <p>Amount of Each Disbursement this Period 244.74</p> <p>[MEMO ITEM] Subitemization of Scott Zacheus (11/05/10)</p> <p>001 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Miss Tiffany Kardeen</p> <p>Mailing Address 11804 Palo Duro Avenue NE</p> <p>City Albuquerque State NM Zip Code 87111-4145</p> <p>Purpose of Disbursement Reimbursement: Shipping</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-34571-99430-e Date of Disbursement 10 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 28.35</p> <p>001 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

273.09

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

A. Full Name (Last, First, Middle Initial) FedEx Kinko's <hr/> Mailing Address 6220 San Mateo Boulevard NE Suite E <hr/> City Albuquerque State NM Zip Code 87109-3314 <hr/> Purpose of Disbursement Administrative/Salary/Overhead: Postage Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-24806-96739-V Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 1 0
	Amount of Each Disbursement this Period 28.35
	[MEMO ITEM] Subitemization of Tiffany Kardeen (10/22/10)
	Category/Type 001
B. Full Name (Last, First, Middle Initial) PNM <hr/> Mailing Address PO Box 17970 <hr/> City Denver State CO Zip Code 80217-0970 <hr/> Purpose of Disbursement Utilities: Electric Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-23373-99869-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 9 / 2 0 1 0
	Amount of Each Disbursement this Period 194.48
	Category/Type 001
	Category/Type 001
C. Full Name (Last, First, Middle Initial) All Type Printing <hr/> Mailing Address 4835 Erin Street NE <hr/> City Albuquerque State NM Zip Code 87109-3063 <hr/> Purpose of Disbursement Postage: Non-Allocable Mail Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-20812-99302-e Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 1 0
	Amount of Each Disbursement this Period 8416.17
	Category/Type 001
	Category/Type 001

SUBTOTAL of Disbursements This Page (optional) ▶

8610.65

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

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

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

FOR LINE NUMBER: (check only one)

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

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

<p>A. Full Name (Last, First, Middle Initial) NM Department of Workforce Solutions</p> <p>Mailing Address PO Box 2281</p> <p>City Albuquerque State NM Zip Code 87103-2281</p> <p>Purpose of Disbursement SUTA 3Q 2010</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-2868-99444-e</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1138.50"/></p>
<p>B. Full Name (Last, First, Middle Initial) Robert Salazar</p> <p>Mailing Address PO Box 59</p> <p>City Youngsville State NM Zip Code 87064-0059</p> <p>Purpose of Disbursement Reimbursements: Under \$200</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-40333-99357-e</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="31.95"/></p>
<p>C. Full Name (Last, First, Middle Initial) Postmaster</p> <p>Mailing Address 6255 San Antonio Drive NE</p> <p>City Albuquerque State NM Zip Code 87109-9211</p> <p>Purpose of Disbursement PO Box Fee-6mo</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-7798-99788-e</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="35.00"/></p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="1205.45"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

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

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

FOR LINE NUMBER: (check only one)

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

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

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

A. Full Name (Last, First, Middle Initial) Scott Zacheus <hr/> Mailing Address 406 E Arriba Drive <hr/> City Hobbs State NM Zip Code 88240-3433 <hr/> Purpose of Disbursement Reimbursements: Under \$200 Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-40377-99358-e Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 1 0
	Amount of Each Disbursement this Period 281.05
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Sigma Chi <hr/> Mailing Address 1855 Sigma Chi Road NE <hr/> City Albuquerque State NM Zip Code 87106-3816 <hr/> Purpose of Disbursement Paid volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-40640-99821-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 8 / 2 0 1 0
	Amount of Each Disbursement this Period 2000.00
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Joshua Weber <hr/> Mailing Address 1241 Orchard Park Circle <hr/> City Pflugerville State TX Zip Code 78660-2431 <hr/> Purpose of Disbursement Reimbursements: mileage and phone use Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-40308-99622-e Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 1 0
	Amount of Each Disbursement this Period 188.50
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

2469.55

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 48 / 139

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

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

A.	Full Name (Last, First, Middle Initial) Linda Bartelsmeyer	Transaction ID: SB21B-40324-99510-e
	Mailing Address 5983 Moon View Drive	Date of Disbursement 10 / 25 / 2010
	City Las Cruces State NM Zip Code 88012-7164	Amount of Each Disbursement this Period 1500.00
	Purpose of Disbursement Staff Expenses: Under \$200 Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Targeted Creative Communications, Inc.	Transaction ID: SB21B-272-99596-e
	Mailing Address 106 S Columbus Street	Date of Disbursement 10 / 28 / 2010
	City Alexandria State VA Zip Code 22314-3036	Amount of Each Disbursement this Period 7495.70
	Purpose of Disbursement Printing/Postage: Non-Alloc Mail Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Ms. Kial Vidic	Transaction ID: SB21B-40334-100006-e
	Mailing Address 1230 Mahood Road	Date of Disbursement 11 / 19 / 2010
	City West Sunbury State PA Zip Code 16061-2020	Amount of Each Disbursement this Period 300.00
	Purpose of Disbursement Reimbursement: Mileage Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	9295.70
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

<p>A. Full Name (Last, First, Middle Initial) Fiesta Del Norte One, LLC</p> <p>Mailing Address C/O NAI Horizon Real Estate Group 2944 North 44th St, Ste 200</p> <p>City Phoenix State AZ Zip Code 85018</p> <p>Purpose of Disbursement Administrative/Salary/Overhead: Key Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-25551-99824-e Date of Disbursement 11 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 100.58</p> <p>Category/Type 001</p>
<p>B. Full Name (Last, First, Middle Initial) Robert Salazar</p> <p>Mailing Address PO Box 59</p> <p>City Youngsville State NM Zip Code 87064-0059</p> <p>Purpose of Disbursement Staff Expenses: under \$200 and mileage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-40333-99511-e Date of Disbursement 10 / 25 / 2010</p> <p>Amount of Each Disbursement this Period 1500.00</p> <p>Category/Type 001</p>
<p>C. Full Name (Last, First, Middle Initial) Roman's Quality Movers</p> <p>Mailing Address 1909 Golf Course Road SE</p> <p>City Rio Rancho State NM Zip Code 87124-1611</p> <p>Purpose of Disbursement Moving Expenses</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-40315-96764-V Date of Disbursement 11 / 07 / 2010</p> <p>Amount of Each Disbursement this Period 195.27</p> <p>Category/Type 001</p> <p>[MEMO ITEM] Subitemization of Robert Salazar (10/25/10)</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1600.58

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

<p>A. Full Name (Last, First, Middle Initial) Walmart</p> <p>Mailing Address 4500 N Main Street</p> <p>City Roswell State NM Zip Code 88201-0305</p> <p>Purpose of Disbursement Check Cashing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-40411-96768-V Date of Disbursement 10 / 27 / 2010</p> <p>Amount of Each Disbursement this Period 6.43</p> <p>[MEMO ITEM] Subitemization of Robert Salazar (10/25/10)</p>
<p>B. Full Name (Last, First, Middle Initial) Scott Zacheus</p> <p>Mailing Address 406 E Arriba Drive</p> <p>City Hobbs State NM Zip Code 88240-3433</p> <p>Purpose of Disbursement Administrative/Salary/Overhead: Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-40377-100020-e Date of Disbursement 11 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 1028.91</p>
<p>C. Full Name (Last, First, Middle Initial) Postmaster</p> <p>Mailing Address 6255 San Antonio Drive NE</p> <p>City Albuquerque State NM Zip Code 87109-9211</p> <p>Purpose of Disbursement Administrative/Salary/Overhead: Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-7798-96802-V Date of Disbursement 10 / 04 / 2010</p> <p>Amount of Each Disbursement this Period 4.72</p> <p>[MEMO ITEM] Subitemization of Marjorie Teague (10/22/10)</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1028.91

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Perennials	Transaction ID: SB21B-40541-96740-V
	Mailing Address 6001 San Mateo Boulevard NE	Date of Disbursement 10 / 02 / 2010
	City Albuquerque State NM Zip Code 87109-3397	Amount of Each Disbursement this Period 285.37
	Purpose of Disbursement: Meals for County Chair meeting Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM] Subitemization of Marjorie Teague (10/22/10)

B.	Full Name (Last, First, Middle Initial) Mrs. Marjorie Teague	Transaction ID: SB21B-7860-99439-e
	Mailing Address 4910 Simon Drive NW	Date of Disbursement 10 / 22 / 2010
	City Albuquerque State NM Zip Code 87114-4329	Amount of Each Disbursement this Period 309.04
	Purpose of Disbursement: Reimbursement: meals and postage for meeting Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Ms. Ana Maria Salazar	Transaction ID: SB21B-40432-99355-e
	Mailing Address 2948 Missouri Avenue	Date of Disbursement 10 / 18 / 2010
	City Las Cruces State NM Zip Code 88011-4814	Amount of Each Disbursement this Period 567.96
	Purpose of Disbursement: Reimbursements: under \$200 Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	877.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

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

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

A. Full Name (Last, First, Middle Initial) Wells Fargo Bank, NA <hr/> Mailing Address 7412 Jefferson Street NE <hr/> City Albuquerque State NM Zip Code 87109-4336 Purpose of Disbursement Bank Fees Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-39724-100046-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 5 / 2 0 1 0
	Amount of Each Disbursement this Period 333.90
	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Linda Bartelsmeyer <hr/> Mailing Address 5983 Moon View Drive <hr/> City Las Cruces State NM Zip Code 88012-7164 Purpose of Disbursement Reimbursements: under \$200 Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-40324-99616-e Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 1 0
	Amount of Each Disbursement this Period 363.61
	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Alicia Pompa <hr/> Mailing Address 4913 Northridge Place NE <hr/> City Albuquerque State NM Zip Code 87111-2105 Purpose of Disbursement Administrative/Salary/Overhead: Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-40326-100017-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 1 0
	Amount of Each Disbursement this Period 998.65
	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

1696.16

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

A. Full Name (Last, First, Middle Initial) Hilton Albuquerque <hr/> Mailing Address 1901 University Boulevard NE <hr/> City Albuquerque State NM Zip Code 87102-1713 <hr/> Purpose of Disbursement Election Night Returns watch Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-23477-99666-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 6459.64
	<input type="text" value="001"/> Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Ms. Julia Ruetten <hr/> Mailing Address 6110 Academy Road NE Apt. 86 <hr/> City Albuquerque State NM Zip Code 87109-2800 <hr/> Purpose of Disbursement Reimbursement: Postage Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-40307-99984-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 6 / 2 0 1 0
	Amount of Each Disbursement this Period 36.68
	<input type="text" value="001"/> Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Mesa Detection Agency, Inc. <hr/> Mailing Address PO Box 27561 <hr/> City Albuquerque State NM Zip Code 87125-7561 <hr/> Purpose of Disbursement Administrative/Salary/Overhead: Security Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-40567-99639-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 1 0
	Amount of Each Disbursement this Period 2047.98
	<input type="text" value="001"/> Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

8544.30

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

<p>A. Full Name (Last, First, Middle Initial) Qwest Business Services</p> <p>Mailing Address PO Box 52187</p> <p>City Phoenix State AZ Zip Code 85072-2187</p> <p>Purpose of Disbursement Administrative/Salary/Overhead: Phones</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-39854-99659-e</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="653.38"/></p>
<p>B. Full Name (Last, First, Middle Initial) Ms. Kial Vidic</p> <p>Mailing Address 1230 Mahood Road</p> <p>City West Sunbury State PA Zip Code 16061-2020</p> <p>Purpose of Disbursement Reimbursements: under \$200</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-40334-99623-e</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="556.30"/></p>
<p>C. Full Name (Last, First, Middle Initial) Ms. Ana Maria Salazar</p> <p>Mailing Address 2948 Missouri Avenue</p> <p>City Las Cruces State NM Zip Code 88011-4814</p> <p>Purpose of Disbursement Reimbursements: under \$200</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-40432-99431-e</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="236.59"/></p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1446.27"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: (check only one)

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

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

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

A.	Full Name (Last, First, Middle Initial) Wells Fargo Bank, NA Mailing Address 7412 Jefferson Street NE City Albuquerque State NM Zip Code 87109-4336 Purpose of Disbursement Bank Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-39724-100045-e Date of Disbursement 11 / 05 / 2010 Amount of Each Disbursement this Period 22.47 001 Category/ Type
B.	Full Name (Last, First, Middle Initial) Direct Mail Systems, Inc. Mailing Address 12450 Automobile Boulevard City Clearwater State FL Zip Code 33762-4427 Purpose of Disbursement Postage and Mail Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-13349-99982-e Date of Disbursement 11 / 16 / 2010 Amount of Each Disbursement this Period 2124.32 001 Category/ Type
C.	Full Name (Last, First, Middle Initial) Robert Salazar Mailing Address PO Box 59 City Youngsville State NM Zip Code 87064-0059 Purpose of Disbursement Administrative/Salary/Overhead: Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-40333-100018-e Date of Disbursement 11 / 15 / 2010 Amount of Each Disbursement this Period 1154.38 001 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

3301.17

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

A. Full Name (Last, First, Middle Initial) North Rim International, Inc. dba Southwest Mail Center <hr/> Mailing Address 2527 Comanche Road NE <hr/> City Albuquerque State NM Zip Code 87107-4720 Purpose of Disbursement Printing/processing: Non-Alloc Mail Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-40503-99627-e Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 1 0
	Amount of Each Disbursement this Period 628.92
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Ms. Julia Ruetten <hr/> Mailing Address 6110 Academy Road NE Apt. 86 <hr/> City Albuquerque State NM Zip Code 87109-2800 Purpose of Disbursement Reimbursement: Office Supplies Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-40307-99359-e Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 1 0
	Amount of Each Disbursement this Period 41.30
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Robert Salazar <hr/> Mailing Address PO Box 59 <hr/> City Youngsville State NM Zip Code 87064-0059 Purpose of Disbursement Reimbursements: itemized or below \$200 Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-40333-99615-e Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 1 0
	Amount of Each Disbursement this Period 815.08
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

1485.30

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

<p>A. Full Name (Last, First, Middle Initial) Walmart</p> <p>Mailing Address 4500 N Main Street</p> <p>City Roswell State NM Zip Code 88201-0305</p> <p>Purpose of Disbursement Volunteer food Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-40411-96747-V Date of Disbursement 09 / 17 / 2010</p> <p>Amount of Each Disbursement this Period 283.33</p> <p>[MEMO ITEM] Subitemization of Robert Salazar (10/28/10)</p>
<p>B. Full Name (Last, First, Middle Initial) Wells Fargo Bank, NA</p> <p>Mailing Address 7412 Jefferson Street NE</p> <p>City Albuquerque State NM Zip Code 87109-4336</p> <p>Purpose of Disbursement Bank Fees Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-39724-99808-e Date of Disbursement 10 / 31 / 2010</p> <p>Amount of Each Disbursement this Period 62.57</p>
<p>C. Full Name (Last, First, Middle Initial) Verizon Wireless</p> <p>Mailing Address PO Box 660108</p> <p>City Dallas State TX Zip Code 75266-0108</p> <p>Purpose of Disbursement Cell Phones Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-6914-99662-e Date of Disbursement 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 207.32</p>

SUBTOTAL of Disbursements This Page (optional) ▶

269.89

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

<p>A. Full Name (Last, First, Middle Initial) Enterprise Rent-A-Car</p> <p>Mailing Address 1340 S Valley Drive</p> <p>City Las Cruces State NM Zip Code 88005-3158</p> <p>Purpose of Disbursement : Van rental</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-40858-96804-V</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>0</td><td>3</td><td>/</td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">943.15</td> </tr> </table> <p>[MEMO ITEM] Subitemization of Linda Bartelsmeyer (10/25/10)</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	3	/	2	0	1	1	943.15
M	M	/	D	D	/	Y	Y	Y	Y													
1	1	/	0	3	/	2	0	1	1													
943.15																						
<p>B. Full Name (Last, First, Middle Initial) Linda Bartelsmeyer</p> <p>Mailing Address 5983 Moon View Drive</p> <p>City Las Cruces State NM Zip Code 88012-7164</p> <p>Purpose of Disbursement Reimbursement: Van rental and receipts under \$200</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-40324-99514-e</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td>/</td><td>2</td><td>5</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">1089.77</td> </tr> </table> <p>001 Category/Type</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	2	5	/	2	0	1	0	1089.77
M	M	/	D	D	/	Y	Y	Y	Y													
1	0	/	2	5	/	2	0	1	0													
1089.77																						
<p>C. Full Name (Last, First, Middle Initial) Qwest</p> <p>Mailing Address PO Box 29039</p> <p>City Phoenix State AZ Zip Code 85038-9039</p> <p>Purpose of Disbursement Administrative/Salary/Overhead: Phones</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-19150-99789-e</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>0</td><td>4</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">514.46</td> </tr> </table> <p>001 Category/Type</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	4	/	2	0	1	0	514.46
M	M	/	D	D	/	Y	Y	Y	Y													
1	1	/	0	4	/	2	0	1	0													
514.46																						

SUBTOTAL of Disbursements This Page (optional) ▶

1604.23

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

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

A. Full Name (Last, First, Middle Initial) EFTPS Mailing Address Internal Revenue Serv Center City Ogden State UT Zip Code 84201-0001 Purpose of Disbursement 941 Taxes: FEA Employees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-20457-99335-e Date of Disbursement 10 / 15 / 2010
	Amount of Each Disbursement this Period 2606.14
	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Postmaster Mailing Address 6255 San Antonio Drive NE City Albuquerque State NM Zip Code 87109-9211 Purpose of Disbursement Administrative/Salary/Overhead: Stamps Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-7798-99945-e Date of Disbursement 11 / 10 / 2010
	Amount of Each Disbursement this Period 440.00
	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Targeted Creative Communications, Inc. Mailing Address 106 S Columbus Street City Alexandria State VA Zip Code 22314-3036 Purpose of Disbursement Printing/Postage: Non-Alloc Mail Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-272-99578-e Date of Disbursement 10 / 26 / 2010
	Amount of Each Disbursement this Period 22993.75
	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

26039.89

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

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

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

FOR LINE NUMBER: (check only one)

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

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

A. Full Name (Last, First, Middle Initial) Ms. Julia Ruetten <hr/> Mailing Address 6110 Academy Road NE Apt. 86 <hr/> City Albuquerque State NM Zip Code 87109-2800 <hr/> Purpose of Disbursement Administrative/Salary/Overhead: Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-40307-100014-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 1 0
	Amount of Each Disbursement this Period 1620.18
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Cable One <hr/> Mailing Address PO Box 78407 <hr/> City Phoenix State AZ Zip Code 85062-8407 <hr/> Purpose of Disbursement Administrative/Salary/Overhead: Internet Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-40389-100053-e Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 1 0
	Amount of Each Disbursement this Period 169.92
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Mr. Marco Gonzales <hr/> Mailing Address 1201 Bishops Lodge Road <hr/> City Santa Fe State NM Zip Code 87501-6900 <hr/> Purpose of Disbursement Reimbursement: Records Request Information Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B-23389-99448-e Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 1 0
	Amount of Each Disbursement this Period 750.25
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

2540.35

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

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

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

FOR LINE NUMBER: (check only one)

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

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

<p>A. Full Name (Last, First, Middle Initial) NM Department of Finance and Administration</p> <p>Mailing Address Battan Memorial Building</p> <p>City Santa Fe State NM Zip Code 87503-0001</p> <p>Purpose of Disbursement Reimbursement: Records Request Information</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-40536-96794-V Date of Disbursement 10 / 21 / 2011</p> <p>Amount of Each Disbursement this Period 750.25</p> <p>[MEMO ITEM] Subitemization of Marco Gonzales (10/22/10)</p>
<p>B. Full Name (Last, First, Middle Initial) Qwest Business Services</p> <p>Mailing Address PO Box 52187</p> <p>City Phoenix State AZ Zip Code 85072-2187</p> <p>Purpose of Disbursement Administrative/Salary/Overhead: Phones</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-39854-99304-e Date of Disbursement 10 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 460.00</p>
<p>C. Full Name (Last, First, Middle Initial) Partida & Associates</p> <p>Mailing Address 3212 Smith Street Suite 206</p> <p>City Houston State TX Zip Code 77006-6622</p> <p>Purpose of Disbursement Printing and Production: Non-Alloc Mail</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-40543-99456-e Date of Disbursement 10 / 25 / 2010</p> <p>Amount of Each Disbursement this Period 29528.02</p>

SUBTOTAL of Disbursements This Page (optional) ▶

29988.02

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

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

<p>A. Full Name (Last, First, Middle Initial) Hampton Inn</p> <p>Mailing Address 2350 E Griggs Avenue</p> <p>City Las Cruces State NM Zip Code 88001-2641</p> <p>Purpose of Disbursement Volunteer Hotel Rooms</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-40542-99455-e</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3611.64"/></p>
<p>B. Full Name (Last, First, Middle Initial) Scott Zacheus</p> <p>Mailing Address 406 E Arriba Drive</p> <p>City Hobbs State NM Zip Code 88240-3433</p> <p>Purpose of Disbursement Reimbursement: Hotel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-40377-99625-e</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="407.90"/></p>
<p>C. Full Name (Last, First, Middle Initial) Comfort Suites</p> <p>Mailing Address 3348 Cerrillos Road</p> <p>City Santa Fe State NM Zip Code 87507-2902</p> <p>Purpose of Disbursement Hotel Room</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-40639-96752-V</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="407.90"/></p> <p>[MEMO ITEM] Subitemization of Scott Zacheus (10/29/10)</p>

SUBTOTAL of Disbursements This Page (optional) ▶

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

<p>A. Full Name (Last, First, Middle Initial) Alicia Pompa</p> <p>Mailing Address 4913 Northridge Place NE</p> <p>City Albuquerque State NM Zip Code 87111-2105</p> <p>Purpose of Disbursement Reimbursement: Under \$200</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-40326-99356-e Date of Disbursement 10 / 18 / 2010</p> <p>Amount of Each Disbursement this Period 91.28</p> <p>001 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) McMillan New Mexico Heritage Foundation</p> <p>Mailing Address 500 4th Street NW Suite 1000</p> <p>City Albuquerque State NM Zip Code 87102-2186</p> <p>Purpose of Disbursement Rent- November</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-22986-99667-e Date of Disbursement 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 2150.00</p> <p>001 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) FedEx Kinko's</p> <p>Mailing Address 6220 San Mateo Boulevard NE Suite E</p> <p>City Albuquerque State NM Zip Code 87109-3314</p> <p>Purpose of Disbursement Administrative/Salary/Overhead: Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-24806-96745-V Date of Disbursement 10 / 25 / 2010</p> <p>Amount of Each Disbursement this Period 25.00</p> <p>001 Category/ Type</p> <p>[MEMO ITEM] Subitemization of Ash Wright (10/28/10)</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2241.28

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

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

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

FOR LINE NUMBER: (check only one)

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

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

<p>A. Full Name (Last, First, Middle Initial) Mr. Ash Wright</p> <p>Mailing Address 6001 San Mateo Boulevard NE Suite 1B</p> <p>City Albuquerque State NM Zip Code 87109-3447</p> <p>Purpose of Disbursement Reimbursements: under \$200 and itemized</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-40310-99612-e Date of Disbursement 10 / 28 / 2010</p> <p>Amount of Each Disbursement this Period 1373.89</p> <p>001 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Sam's Club</p> <p>Mailing Address 1421 N Renaissance Boulevard NE</p> <p>City Albuquerque State NM Zip Code 87107-7018</p> <p>Purpose of Disbursement Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-39091-96741-V Date of Disbursement 10 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 42.80</p> <p>001 Category/ Type</p> <p>[MEMO ITEM] Subitemization of Ash Wright (10/28/10)</p>
<p>C. Full Name (Last, First, Middle Initial) Sam's Club</p> <p>Mailing Address 1421 N Renaissance Boulevard NE</p> <p>City Albuquerque State NM Zip Code 87107-7018</p> <p>Purpose of Disbursement Volunteer Food</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B-39091-96742-V Date of Disbursement 10 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 76.15</p> <p>001 Category/ Type</p> <p>[MEMO ITEM] Subitemization of Ash Wright (10/28/10)</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1373.89

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

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

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

C.	Full Name (Last, First, Middle Initial) Linda Bartelsmeyer	Transaction ID: SB21B-40324-100016-e
	Mailing Address 5983 Moon View Drive	Date of Disbursement 11 / 15 / 2010
	City Las Cruces State NM Zip Code 88012-7164	Amount of Each Disbursement this Period 1046.64
	Purpose of Disbursement Administrative/Salary/Overhead: Salary	[MEMO ITEM] Subitemization of Ash Wright (10/28/10)
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	1046.64
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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

A. Full Name (Last, First, Middle Initial) Ms. Julia Ruetten <hr/> Mailing Address 6110 Academy Road NE Apt. 86 <hr/> City Albuquerque State NM Zip Code 87109-2800 <hr/> Purpose of Disbursement Reimbursements: Under \$200 Candidate Name	Transaction ID: SB21B-40307-99613-e Date of Disbursement 10 / 28 / 2010 <hr/> Amount of Each Disbursement this Period 92.87		
		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type: 001	
		Disbursement For:	
B. Full Name (Last, First, Middle Initial) Lincoln Strategy Group LLC <hr/> Mailing Address 80 E Rio Salado Parkway Suite 814 <hr/> City Tempe State AZ Zip Code 85281-9111 <hr/> Purpose of Disbursement Consulting: Non-Alloc Mail Candidate Name	Transaction ID: SB21B-39383-99636-e Date of Disbursement 11 / 01 / 2010 <hr/> Amount of Each Disbursement this Period 440.00		
		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type: 001	
		Disbursement For:	
C. Full Name (Last, First, Middle Initial) Hampton Inn <hr/> Mailing Address 2350 E Griggs Avenue <hr/> City Las Cruces State NM Zip Code 88001-2641 <hr/> Purpose of Disbursement Volunteer Hotel Rooms Candidate Name	Transaction ID: SB21B-40542-99614-e Date of Disbursement 10 / 28 / 2010 <hr/> Amount of Each Disbursement this Period 1203.88		
		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type: 001	
		Disbursement For:	

SUBTOTAL of Disbursements This Page (optional)	1736.75
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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

A.

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

Mailing Address 4913 Northridge Place NE

City State Zip Code
Albuquerque NM 87111-2105

Purpose of Disbursement
Staff Expenses: under \$200 and mileage (875.86 returned)

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B-40326-99509-e
Date of Disbursement

10 / 25 / 2010

Amount of Each Disbursement this Period

1500.00

SUBTOTAL of Disbursements This Page (optional) ▶

1500.00

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

143170.28

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

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

FOR LINE NUMBER: (check only one)

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

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

A. Full Name (Last, First, Middle Initial) Republican National Committee (tsfs)	Mailing Address 310 1st Street SE	Transaction ID: SB22-2878-99941-e Date of Disbursement 11 / 09 / 2010
	City Washington State DC Zip Code 20003-1885 Purpose of Disbursement See line 12- In-Kind Transfer Candidate Name Republican National Committee (tsfs) Category/Type 001 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:	Amount of Each Disbursement this Period 1440.00
B. Full Name (Last, First, Middle Initial) Republican Party of Sandoval County	Mailing Address PO Box 1064	Transaction ID: SB22-2312-99632-e Date of Disbursement 10 / 29 / 2010
	City Bernalillo State NM Zip Code 87004-1064 Purpose of Disbursement Administrative/Salary/Overhead: Rent Candidate Name Republican Party of Sandoval County Category/Type 001 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:	Amount of Each Disbursement this Period 600.00
C. Full Name (Last, First, Middle Initial) Republican Party of Dona Ana County	Mailing Address 121 Wyatt Drive Suite 16	Transaction ID: SB22-17208-99631-e Date of Disbursement 10 / 29 / 2010
	City Las Cruces State NM Zip Code 88005-2960 Purpose of Disbursement Administrative/Salary/Overhead: Rent Candidate Name Republican Party of Dona Ana County Category/Type 001 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:	Amount of Each Disbursement this Period 1500.00

SUBTOTAL of Disbursements This Page (optional)	3540.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

A. Full Name (Last, First, Middle Initial) Republican National Committee (tsfs) <hr/> Mailing Address 310 1st Street SE <hr/> City Washington State DC Zip Code 20003-1885 Purpose of Disbursement See Line 12- In-Kind Transfer Candidate Name Republican National Committee (tsfs) Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB22-2878-99307-e Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 1 0
	Amount of Each Disbursement this Period 1440.00 Category/Type 001
B. Full Name (Last, First, Middle Initial) Republican Party of Lea County <hr/> Mailing Address PO Box 1934 <hr/> City Hobbs State NM Zip Code 88241-1934 Purpose of Disbursement Administrative/Salary/Overhead: Rent Candidate Name Republican Party of Lea County Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB22-16223-99630-e Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 1 0
	Amount of Each Disbursement this Period 1300.00 Category/Type 001
C. Full Name (Last, First, Middle Initial) Republican Party of Santa Fe County <hr/> Mailing Address PO Box 31995 <hr/> City Santa Fe State NM Zip Code 87594-1995 Purpose of Disbursement Reimbursement: Internet bill Candidate Name Republican Party of Santa Fe County Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB22-2313-99624-e Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 1 0
	Amount of Each Disbursement this Period 102.67 Category/Type 001

SUBTOTAL of Disbursements This Page (optional)	2842.67
TOTAL This Period (last page this line number only)	6382.67

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

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

FOR LINE NUMBER:
(check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Republican Party of San Juan County			Transaction ID: SB29-16065-99513-e	
	Mailing Address PO Box 5417			Date of Disbursement 10 / 25 / 2010	
City Farmington		State NM	Zip Code 87499-5417		Amount of Each Disbursement this Period 1500.00
Purpose of Disbursement Charitable Donation: Contribution			012 Category/ Type		
Candidate Name Republican Party of San Juan County					
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)

1500.00

TOTAL This Period (last page this line number only)

1500.00

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

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

FOR LINE NUMBER:
(check only one)

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

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

<p>A. Full Name (Last, First, Middle Initial) Richard Tirado</p> <p>Mailing Address 3003 W 8th Street</p> <p>City Roswell State NM Zip Code 88201-1307</p> <p>Purpose of Disbursement FEA 100% Federal: Paid Volunteer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30b-40591-99703-e Date of Disbursement 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 40.00</p>
<p>B. Full Name (Last, First, Middle Initial) Campaign Marketing Strategies</p> <p>Mailing Address 125 N Oakland Street</p> <p>City Arlington State VA Zip Code 22203-3510</p> <p>Purpose of Disbursement GOTV autodial: No Fed Candidates</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30b-40538-99638-e Date of Disbursement 11 / 01 / 2010</p> <p>Amount of Each Disbursement this Period 2271.06</p>
<p>C. Full Name (Last, First, Middle Initial) Taxation & Revenue Department</p> <p>Mailing Address PO Box 25128</p> <p>City Santa Fe State NM Zip Code 87504-5128</p> <p>Purpose of Disbursement CRS - September (FEA Employees)</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30b-18771-99988-e Date of Disbursement 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 473.78</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2784.84

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

A. Full Name (Last, First, Middle Initial) Ms. Agnes Gaffney <hr/> Mailing Address 5905 Prenda De Oro NW <hr/> City Albuquerque State NM Zip Code 87120-1337 Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40442-99365-e Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 1 0
	Amount of Each Disbursement this Period 110.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Mr. Shane Maier <hr/> Mailing Address 3348 N Hoisington Road <hr/> City Winnebago State IL Zip Code 61088-8638 Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40450-99572-e Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 1 0
	Amount of Each Disbursement this Period 110.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Edward Amador <hr/> Mailing Address 7970 Inca Dove Avenue <hr/> City Las Cruces State NM Zip Code 88012-7978 Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40629-99763-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 100.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	320.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

<p>A. Full Name (Last, First, Middle Initial) Campaign Marketing Strategies</p> <p>Mailing Address 125 N Oakland Street</p> <p>City Arlington State VA Zip Code 22203-3510</p> <p>Purpose of Disbursement GOTV Calls: State Candidates only</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30b-40538-99438-e Date of Disbursement 10 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 4000.00</p>
<p>B. Full Name (Last, First, Middle Initial) Sandra Garcia</p> <p>Mailing Address PO Box 3384</p> <p>City Sunland Park State NM Zip Code 88063-3384</p> <p>Purpose of Disbursement FEA 100% Federal: Paid Volunteer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30b-40623-99757-e Date of Disbursement 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 120.00</p>
<p>C. Full Name (Last, First, Middle Initial) Shannon Cardillo</p> <p>Mailing Address 1320 Penasco Road NE</p> <p>City Rio Rancho State NM Zip Code 87144-6317</p> <p>Purpose of Disbursement FEA 100% Federal: Paid Volunteer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30b-40580-99693-e Date of Disbursement 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 190.00</p>

SUBTOTAL of Disbursements This Page (optional)	4310.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

A. Full Name (Last, First, Middle Initial) EFTPS Mailing Address Internal Revenue Serv Center City Ogden State UT Zip Code 84201-0001 Purpose of Disbursement 941 Taxes- FEA Employees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB30b-20457-99811-e Date of Disbursement 10 / 31 / 2010
	Amount of Each Disbursement this Period 2606.16
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Abel Olivas Mailing Address 3102 Barcelona Drive City Roswell State NM Zip Code 88201-8337 Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB30b-40593-99705-e Date of Disbursement 11 / 02 / 2010
	Amount of Each Disbursement this Period 40.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Ms. Pamela Navarette Mailing Address 5320 San Mateo Boulevard NE Apt. F75 City Albuquerque State NM Zip Code 87109-6319 Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB30b-40464-99362-e Date of Disbursement 10 / 18 / 2010
	Amount of Each Disbursement this Period 110.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

2756.16

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

A. Full Name (Last, First, Middle Initial) Trumaine Smith <hr/> Mailing Address 6723 Photinia Place NW <hr/> City Albuquerque State NM Zip Code 87121-8457 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40587-99699-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 130.00
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) Jessica Giron <hr/> Mailing Address 7970 Inca Dove Avenue <hr/> City Las Cruces State NM Zip Code 88012-7978 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40632-99768-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 70.00
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) Ms. Ana Maria Salazar <hr/> Mailing Address 2948 Missouri Avenue <hr/> City Las Cruces State NM Zip Code 88011-4814 <hr/> Purpose of Disbursement FEA 100% Federal: Political Consulting Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40432-99336-e Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 1 0
	Amount of Each Disbursement this Period 2000.00
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	2200.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

<p>A. Full Name (Last, First, Middle Initial) William Palombi</p> <p>Mailing Address 2104 E 19th Street</p> <p>City Roswell State NM Zip Code 88201-9565</p> <p>Purpose of Disbursement FEA 100% Federal: Paid Volunteer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30b-40608-99721-e Date of Disbursement 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 120.00</p>
<p>B. Full Name (Last, First, Middle Initial) Hilton Albuquerque</p> <p>Mailing Address 1901 University Boulevard NE</p> <p>City Albuquerque State NM Zip Code 87102-1713</p> <p>Purpose of Disbursement EDO legal offices/phones</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30b-23477-99669-e Date of Disbursement 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 3667.66</p>
<p>C. Full Name (Last, First, Middle Initial) Margo Nava</p> <p>Mailing Address 3815 S Main Street # 47</p> <p>City Mesilla Park State NM Zip Code 88047-9715</p> <p>Purpose of Disbursement FEA 100% Federal: Paid Volunteer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30b-40622-99756-e Date of Disbursement 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 310.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

4097.66

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Terri Price	Transaction ID: SB30b-40582-99695-e
	Mailing Address 210 Dorothy Street NE	Date of Disbursement MM / DD / YYYY 11 / 02 / 2010
	City Albuquerque State NM Zip Code 87123-2813	Amount of Each Disbursement this Period 365.00
	Purpose of Disbursement FEA 100% Federal: Paid Volunteer	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) EFTPS	Transaction ID: SB30b-20457-99985-e
	Mailing Address Internal Revenue Serv Center	Date of Disbursement MM / DD / YYYY 10 / 15 / 2010
	City Ogden State UT Zip Code 84201-0001	Amount of Each Disbursement this Period 288.00
	Purpose of Disbursement 940 taxes 3Q 2010 (FEA Employees)	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) Silvia Bobadilla	Transaction ID: SB30b-40572-99671-e
	Mailing Address 222 1/2 N Guadalupe Street	Date of Disbursement MM / DD / YYYY 11 / 02 / 2010
	City Santa Fe State NM Zip Code 87501-1851	Amount of Each Disbursement this Period 475.00
	Purpose of Disbursement FEA 100% Federal: Paid Volunteer	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	1128.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

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

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

<p>A. Full Name (Last, First, Middle Initial) Mrs. Marjorie Teague</p> <p>Mailing Address 4910 Simon Drive NW</p> <p>City Albuquerque State NM Zip Code 87114-4329</p> <p>Purpose of Disbursement FEA 100% Federal: Political Consulting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30b-7860-99796-e Date of Disbursement 11 / 05 / 2010</p> <p>Amount of Each Disbursement this Period 5998.90</p>
<p>B. Full Name (Last, First, Middle Initial) Susan Quintana</p> <p>Mailing Address 435 HC 74</p> <p>City Pecos State NM Zip Code 87552-9511</p> <p>Purpose of Disbursement FEA 100% Federal: Paid Volunteer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30b-40579-99678-e Date of Disbursement 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 145.00</p>
<p>C. Full Name (Last, First, Middle Initial) Carolyn Fambrough</p> <p>Mailing Address 44 Dogwood Road</p> <p>City Roswell State NM Zip Code 88201-8802</p> <p>Purpose of Disbursement FEA 100% Federal: Paid Volunteer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30b-40598-99711-e Date of Disbursement 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 90.00</p>

SUBTOTAL of Disbursements This Page (optional)	6233.90
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

A. Full Name (Last, First, Middle Initial) Mary Palombi <hr/> Mailing Address 2104 E 19th Street <hr/> City Roswell State NM Zip Code 88201-9565 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40607-99720-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 90.00
	Category/ Type
	State: District:
B. Full Name (Last, First, Middle Initial) Terri Giron <hr/> Mailing Address 265 Pedro Madrid <hr/> City Las Cruces State Nm Zip Code 88007 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40631-99767-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 90.00
	Category/ Type
	State: District:
C. Full Name (Last, First, Middle Initial) Western Data Services, Inc. <hr/> Mailing Address PO Box 423 <hr/> City Carlsbad State NM Zip Code 88221-0423 <hr/> Purpose of Disbursement Printing/Postage: (State Candidate Mail featuring Pelosi/Reid) Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40563-99609-e Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 1 0
	Amount of Each Disbursement this Period 12543.19
	Category/ Type
	State: District:

SUBTOTAL of Disbursements This Page (optional) ▶	12723.19
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

A. Full Name (Last, First, Middle Initial) Christina King <hr/> Mailing Address 3204 Delicado Drive <hr/> City Roswell State NM Zip Code 88201-6632 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40609-99722-e Date of Disbursement 11 / 02 / 2010
	Amount of Each Disbursement this Period 240.00
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) Eryn Frosch <hr/> Mailing Address 5 Lost Trail Road <hr/> City Roswell State NM Zip Code 88201-9579 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40605-99718-e Date of Disbursement 11 / 02 / 2010
	Amount of Each Disbursement this Period 210.00
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) Joe Hicks <hr/> Mailing Address 5104 East 19th <hr/> City Roswell State NM Zip Code 88201 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40596-99708-e Date of Disbursement 11 / 02 / 2010
	Amount of Each Disbursement this Period 150.00
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	600.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

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

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

A. Full Name (Last, First, Middle Initial) Rebekah Bitner <hr/> Mailing Address 411 N Kansas Avenue <hr/> City Roswell State NM Zip Code 88201-3945 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40611-99724-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 50.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Lisa Reeves <hr/> Mailing Address 1906 S Lea Avenue <hr/> City Roswell State NM Zip Code 88203-4227 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40615-99728-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 80.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Ms. Julia Ruetten <hr/> Mailing Address 6110 Academy Road NE Apt. 86 <hr/> City Albuquerque State NM Zip Code 87109-2800 <hr/> Purpose of Disbursement FEA 100% Federal: Salary- FEA Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40307-99735-e Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 1 0
	Amount of Each Disbursement this Period 1620.18
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	1750.18
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

A. Full Name (Last, First, Middle Initial) Angela Martinez <hr/> Mailing Address PO Box 252 <hr/> City Chamberino State NM Zip Code 88027-0252 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40635-99774-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 1 0
	Amount of Each Disbursement this Period 255.00
	Category/ Type
	Category/ Type

B. Full Name (Last, First, Middle Initial) Ms. Janie Lyn Ott <hr/> Mailing Address 3509 Alaska Place NE <hr/> City Albuquerque State NM Zip Code 87111-5201 <hr/> Purpose of Disbursement Election Day Operations Consulting Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-7523-99400-e Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 1 0
	Amount of Each Disbursement this Period 1070.00
	Category/ Type
	Category/ Type

C. Full Name (Last, First, Middle Initial) Oxford Communications, LLC <hr/> Mailing Address PO Box 1214 <hr/> City Alexandria State VA Zip Code 22313-1214 <hr/> Purpose of Disbursement GOTV Calls: No Federal Candidate Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40658-99983-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 6 / 2 0 1 0
	Amount of Each Disbursement this Period 509.14
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	1834.14
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Alexander Bohlin	Transaction ID: SB30b-40606-99719-e
	Mailing Address 22 Loma Vista Road	Date of Disbursement MM / DD / YYYY 11 / 02 / 2010
	City Roswell State NM Zip Code 88201-8803	Amount of Each Disbursement this Period 30.00
	Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B.	Full Name (Last, First, Middle Initial) Mr. Shane Maier	Transaction ID: SB30b-40450-99798-e
	Mailing Address 3348 N Hoisington Road	Date of Disbursement MM / DD / YYYY 11 / 05 / 2010
	City Winnebago State IL Zip Code 61088-8638	Amount of Each Disbursement this Period 220.00
	Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C.	Full Name (Last, First, Middle Initial) Scott Zacheus	Transaction ID: SB30b-40377-99343-e
	Mailing Address 406 E Arriba Drive	Date of Disbursement MM / DD / YYYY 10 / 15 / 2010
	City Hobbs State NM Zip Code 88240-3433	Amount of Each Disbursement this Period 1028.91
	Purpose of Disbursement FEA 100% Federal: Salary: FEA Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶

1278.91

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

A. Full Name (Last, First, Middle Initial) Cathy Alling <hr/> Mailing Address 5905 Prenda De Oro NW <hr/> City Albuquerque State NM Zip Code 87120-1337 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40443-99571-e Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 1 0
	Amount of Each Disbursement this Period 110.00
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) Santa Fe County Clerk <hr/> Mailing Address 102 Grant Avenue <hr/> City Santa Fe State NM Zip Code 87501-2061 <hr/> Purpose of Disbursement FEA 100% Federal: Voter Lists Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-340-99389-e Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 1 0
	Amount of Each Disbursement this Period 200.00
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) Zanoni Contreras <hr/> Mailing Address PO Box 417 <hr/> City Mesilla State NM Zip Code 88046-0417 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40628-99762-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 115.00
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	425.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

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

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

<p>A. Full Name (Last, First, Middle Initial) Mary Reeves</p> <p>Mailing Address 1007 Ave del Sumbre</p> <p>City Roswell State NM Zip Code 88203</p> <p>Purpose of Disbursement FEA 100% Federal: Paid Volunteer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30b-40614-99727-e Date of Disbursement 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 80.00</p>
<p>B. Full Name (Last, First, Middle Initial) Linda Bartelsmeyer</p> <p>Mailing Address 5983 Moon View Drive</p> <p>City Las Cruces State NM Zip Code 88012-7164</p> <p>Purpose of Disbursement FEA 100% Federal: Salary- FEA</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30b-40324-99737-e Date of Disbursement 10 / 31 / 2010</p> <p>Amount of Each Disbursement this Period 1046.63</p>
<p>C. Full Name (Last, First, Middle Initial) Mr. Brock Phillips</p> <p>Mailing Address 3741 Big Bend Road NE</p> <p>City Albuquerque State NM Zip Code 87111-4361</p> <p>Purpose of Disbursement Political Consulting: EDO</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30b-34780-99349-e Date of Disbursement 10 / 18 / 2010</p> <p>Amount of Each Disbursement this Period 1259.63</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2386.26

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Benjamin Sanchez</p> <p>Mailing Address PO Box 2332</p> <p>City Roswell State NM Zip Code 88202-2332</p> <p>Purpose of Disbursement FEA 100% Federal: Paid Volunteer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30b-40603-99716-e Date of Disbursement 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 240.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Dora Luchini-Lucero</p> <p>Mailing Address 2051 Mass Ave</p> <p>City Las Cruces State NM Zip Code 88012</p> <p>Purpose of Disbursement FEA 100% Federal: Paid Volunteer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30b-40619-99753-e Date of Disbursement 10 / 31 / 2010</p> <p>Amount of Each Disbursement this Period 405.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Felicia Nieves</p> <p>Mailing Address PO Box 11</p> <p>City Dona Ana State NM Zip Code 88032-0011</p> <p>Purpose of Disbursement FEA 100% Federal: Paid Volunteer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30b-40636-99775-e Date of Disbursement 11 / 03 / 2010</p> <p>Amount of Each Disbursement this Period 215.00</p>

SUBTOTAL of Disbursements This Page (optional)	860.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

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

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

A. Full Name (Last, First, Middle Initial) D. Rael Sanchez <hr/> Mailing Address PO Box 2332 <hr/> City Roswell State NM Zip Code 88202-2332 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40602-99715-e Date of Disbursement MM / DD / YYYY 11 / 02 / 2010
	Amount of Each Disbursement this Period 240.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Colfax County Clerk <hr/> Mailing Address PO Box 159 <hr/> City Raton State NM Zip Code 87740-0159 <hr/> Purpose of Disbursement FEA 100% Federal: Voter Lists Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-6920-99386-e Date of Disbursement MM / DD / YYYY 10 / 20 / 2010
	Amount of Each Disbursement this Period 40.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Rosalie Herrera <hr/> Mailing Address 3000 El Camino Real <hr/> City Las Cruces State NM Zip Code 88007-7236 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40621-99755-e Date of Disbursement MM / DD / YYYY 10 / 31 / 2010
	Amount of Each Disbursement this Period 20.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	300.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

A. Full Name (Last, First, Middle Initial) Carolyn Johnson <hr/> Mailing Address 200 E 22nd Street Trailer 45 <hr/> City Roswell State NM Zip Code 88201-6401 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40610-99723-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 80.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Ms. Agnes Gaffney <hr/> Mailing Address 5905 Prenda De Oro NW <hr/> City Albuquerque State NM Zip Code 87120-1337 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40442-99526-e Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 1 0
	Amount of Each Disbursement this Period 110.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Campaign Marketing Strategies <hr/> Mailing Address 125 N Oakland Street <hr/> City Arlington State VA Zip Code 22203-3510 <hr/> Purpose of Disbursement GOTV Autodials: State Candidates Only Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40538-99415-e Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 1 0
	Amount of Each Disbursement this Period 305.29
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

495.29

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

A. Full Name (Last, First, Middle Initial) FLS Connect, LLC <hr/> Mailing Address 7300 Hudson Boulevard N Suite 270 <hr/> City Saint Paul State MN Zip Code 55128-7143 <hr/> Purpose of Disbursement GOTV Autodial: State Candidate only Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-12697-99657-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 300.00
	Category/ Type
	Category/ Type

B. Full Name (Last, First, Middle Initial) Christine Padilla <hr/> Mailing Address PO Box 302 <hr/> City Pecos State NM Zip Code 87552-0302 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40576-99675-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 247.50
	Category/ Type
	Category/ Type

C. Full Name (Last, First, Middle Initial) Jacob Perry <hr/> Mailing Address 1604 S Lea Avenue <hr/> City Roswell State NM Zip Code 88203-3741 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40616-99729-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 40.00
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	587.50
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Rebecca Melton Mailing Address 521 E 19th Street City Roswell State NM Zip Code 88201-5156 Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40656-99969-e Date of Disbursement 11 / 12 / 2010 Amount of Each Disbursement this Period 165.00 Category/ Type
B.	Full Name (Last, First, Middle Initial) Angel Sanchez Mailing Address 606 Evista Perchway City Roswell State NM Zip Code 88701 Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40594-99706-e Date of Disbursement 11 / 02 / 2010 Amount of Each Disbursement this Period 40.00 Category/ Type
C.	Full Name (Last, First, Middle Initial) Alicia Pompa Mailing Address 4913 Northridge Place NE City Albuquerque State NM Zip Code 87111-2105 Purpose of Disbursement FEA 100% Federal: Salary- FEA Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40326-99738-e Date of Disbursement 10 / 31 / 2010 Amount of Each Disbursement this Period 998.64 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	1203.64
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

A. Full Name (Last, First, Middle Initial) Margot Lawler <hr/> Mailing Address 172 Galisteo Lane <hr/> City Santa Fe State NM Zip Code 87505-4634 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40575-99674-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 40.00
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) Colfax County Clerk <hr/> Mailing Address PO Box 159 <hr/> City Raton State NM Zip Code 87740-0159 <hr/> Purpose of Disbursement FEA 100% Federal: Voter Lists Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-6920-99388-e Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 1 0
	Amount of Each Disbursement this Period 60.00
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) Rita Carbajal <hr/> Mailing Address 3810 Yellowstone Drive <hr/> City Las Cruces State NM Zip Code 88011-9064 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40627-99761-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 60.00
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	160.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

A. Full Name (Last, First, Middle Initial) Linda Bartelsmeyer <hr/> Mailing Address 5983 Moon View Drive <hr/> City Las Cruces State NM Zip Code 88012-7164 <hr/> Purpose of Disbursement FEA 100% Federal: Salary: FEA Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40324-99339-e Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 1 0
	Amount of Each Disbursement this Period 1046.64
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) Valerie Lopez <hr/> Mailing Address 707 S Delaware Avenue <hr/> City Roswell State NM Zip Code 88203-2917 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40612-99725-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 55.00
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) Luther Whelan <hr/> Mailing Address 1708 Sequoia Avenue <hr/> City Las Cruces State NM Zip Code 88005-3066 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40625-99764-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 45.00
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	1146.64
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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

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

A. Full Name (Last, First, Middle Initial) Lazarus Graphics <hr/> Mailing Address 2011 Shadowbrook Circle <hr/> City Round Rock State TX Zip Code 78681-7140 <hr/> Purpose of Disbursement NM slate door hangers, 3 versions each with a different CD candidate (John Barela, Tom Mullins, or S Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40540-99432-e Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 1 0
	Amount of Each Disbursement this Period 28834.55
	Category/ Type
	Category/ Type

B. Full Name (Last, First, Middle Initial) Robert Salazar <hr/> Mailing Address PO Box 59 <hr/> City Youngsville State NM Zip Code 87064-0059 <hr/> Purpose of Disbursement FEA 100% Federal: Salary: FEA Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40333-99341-e Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 1 0
	Amount of Each Disbursement this Period 1154.38
	Category/ Type
	Category/ Type

C. Full Name (Last, First, Middle Initial) Virginia Contreras <hr/> Mailing Address PO Box 417 <hr/> City Mesilla State NM Zip Code 88046-0417 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40637-99776-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 1 0
	Amount of Each Disbursement this Period 110.00
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	30098.93
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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

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

A. Full Name (Last, First, Middle Initial) Judy Sadler <hr/> Mailing Address PO Box 80633 <hr/> City Albuquerque State NM Zip Code 87198-0633 Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40634-99772-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 1 0
	Amount of Each Disbursement this Period 400.00
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) Ms. Kial Vidic <hr/> Mailing Address 1230 Mahood Road <hr/> City West Sunbury State PA Zip Code 16061-2020 Purpose of Disbursement FEA 100% Federal: Salary: FEA Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40334-99342-e Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 1 0
	Amount of Each Disbursement this Period 1149.51
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) Secretary of State <hr/> Mailing Address 325 Don Gaspar Avenue Suite 300 <hr/> City Santa Fe State NM Zip Code 87503-0001 Purpose of Disbursement FEA 100% Federal: Voter Lists Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-2880-99414-e Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 1 0
	Amount of Each Disbursement this Period 125.00
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	1674.51
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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

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

<p>A. Full Name (Last, First, Middle Initial) Sergio Carrillo</p> <p>Mailing Address 117 Father Luis Catano</p> <p>City Sunland Park State NM Zip Code 88063</p> <p>Purpose of Disbursement FEA 100% Federal: Paid Volunteer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30b-40624-99758-e</p> <p>Date of Disbursement 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 170.00</p>
<p>B. Full Name (Last, First, Middle Initial) Nathan Rael Sanchez</p> <p>Mailing Address PO Box 2332</p> <p>City Roswell State NM Zip Code 88202-2332</p> <p>Purpose of Disbursement FEA 100% Federal: Paid Volunteer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30b-40604-99717-e</p> <p>Date of Disbursement 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 210.00</p>
<p>C. Full Name (Last, First, Middle Initial) Linnea Keyes</p> <p>Mailing Address 422 Mockingbird Lane</p> <p>City Corrales State NM Zip Code 87048-7637</p> <p>Purpose of Disbursement FEA 100% Federal: Paid Volunteer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30b-40633-99770-e</p> <p>Date of Disbursement 11 / 03 / 2010</p> <p>Amount of Each Disbursement this Period 110.00</p>

SUBTOTAL of Disbursements This Page (optional)	490.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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

A. Full Name (Last, First, Middle Initial) Joe Trujillo <hr/> Mailing Address 506 S Cypress Avenue <hr/> City Roswell State NM Zip Code 88203-1570 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40592-99704-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 40.00
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) John Huggard, IV <hr/> Mailing Address 2302 Carolina Way <hr/> City Roswell State NM Zip Code 88201-9762 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40600-99713-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 60.00
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) Mr. Jacob Clements <hr/> Mailing Address 500 1/2 S Kentucky Avenue <hr/> City Roswell State NM Zip Code 88203-4527 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-36251-99710-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 180.00
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	280.00
TOTAL This Period (last page this line number only) ▶	280.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

A. Full Name (Last, First, Middle Initial) Ms. Agnes Gaffney <hr/> Mailing Address 5905 Prenda De Oro NW <hr/> City Albuquerque State NM Zip Code 87120-1337 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40442-99797-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 5 / 2 0 1 0
	Amount of Each Disbursement this Period 154.00
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) Jalisa White <hr/> Mailing Address 220 Wstrn Skies Drive SE Apt. 2046 <hr/> City Albuquerque State NM Zip Code 87123-4909 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40583-99696-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 420.00
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) Ian Sproul <hr/> Mailing Address 8 Camino Del Prado <hr/> City Santa Fe State NM Zip Code 87507-0199 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40571-99670-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 232.50
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	806.50
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

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

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

A. Full Name (Last, First, Middle Initial) Mr. Brock Phillips <hr/> Mailing Address 3741 Big Bend Road NE <hr/> City Albuquerque State NM Zip Code 87111-4361 Purpose of Disbursement Political Consulting: EDO Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-34780-99793-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 5 / 2 0 1 0
	Amount of Each Disbursement this Period 1250.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Toni Augburn <hr/> Mailing Address 7151 Mesa Del Oro <hr/> City Santa Fe State NM Zip Code 87507-3551 Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40574-99673-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 245.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Andrea Eskeli <hr/> Mailing Address 5701 Kincaid Road <hr/> City Roswell State NM Zip Code 88203-0932 Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40601-99714-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 90.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

1585.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

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

A.	Full Name (Last, First, Middle Initial) Robert Fambrough Mailing Address 44 Dogwood Road City Roswell State NM Zip Code 88201-8802 Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40599-99712-e Date of Disbursement 11 / 02 / 2010 Amount of Each Disbursement this Period 60.00
B.	Full Name (Last, First, Middle Initial) Luther Whelan Mailing Address 1708 Sequoia Avenue City Las Cruces State NM Zip Code 88005-3066 Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40625-99759-e Date of Disbursement 11 / 02 / 2010 Amount of Each Disbursement this Period 60.00
C.	Full Name (Last, First, Middle Initial) Alexander Tenski Mailing Address 1201 Madeira Drive SE Apt. 202 City Albuquerque State NM Zip Code 87108-6603 Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40585-99698-e Date of Disbursement 11 / 02 / 2010 Amount of Each Disbursement this Period 340.00

SUBTOTAL of Disbursements This Page (optional) ▶

460.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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

A. Full Name (Last, First, Middle Initial) Ms. Pamela Navarette <hr/> Mailing Address 5320 San Mateo Boulevard NE Apt. F75 <hr/> City Albuquerque State NM Zip Code 87109-6319 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40464-99576-e Date of Disbursement 10 / 26 / 2010
	Amount of Each Disbursement this Period 110.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Deanna Renteria <hr/> Mailing Address 501 S Beech <hr/> City Roswell State NM Zip Code 88202 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40597-99709-e Date of Disbursement 11 / 02 / 2010
	Amount of Each Disbursement this Period 60.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Ruben Carbajal <hr/> Mailing Address 3810 Yellowstone Drive <hr/> City Las Cruces State NM Zip Code 88011-9064 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40630-99766-e Date of Disbursement 11 / 02 / 2010
	Amount of Each Disbursement this Period 20.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	190.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

A. Full Name (Last, First, Middle Initial) Rosa Teresa Miranda <hr/> Mailing Address 1267 Fountain Loop <hr/> City Las Cruces State NM Zip Code 88007-8093 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40620-99754-e Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 1 0
	Amount of Each Disbursement this Period 60.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Justin Kirby <hr/> Mailing Address 605 La Fonda Drive <hr/> City Roswell State NM Zip Code 88201-6655 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40590-99702-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 40.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Alicia Pompa <hr/> Mailing Address 4913 Northridge Place NE <hr/> City Albuquerque State NM Zip Code 87111-2105 <hr/> Purpose of Disbursement FEA 100% Federal: Salary: FEA Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40326-99340-e Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 1 0
	Amount of Each Disbursement this Period 998.65
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

1098.65

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

<p>A. Full Name (Last, First, Middle Initial) Chris Cardillo</p> <p>Mailing Address 1320 Penasco Road NE</p> <p>City Rio Rancho State NM Zip Code 87144-6317</p> <p>Purpose of Disbursement FEA 100% Federal: Paid Volunteer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30b-40581-99694-e Date of Disbursement 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 150.00</p>
<p>B. Full Name (Last, First, Middle Initial) Margaret Whelan</p> <p>Mailing Address 1708 Sequoia Avenue</p> <p>City Las Cruces State NM Zip Code 88005-3066</p> <p>Purpose of Disbursement FEA 100% Federal: Paid Volunteer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30b-40626-99760-e Date of Disbursement 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 125.00</p>
<p>C. Full Name (Last, First, Middle Initial) EFTPS</p> <p>Mailing Address Internal Revenue Serv Center</p> <p>City Ogden State UT Zip Code 84201-0001</p> <p>Purpose of Disbursement FEA 100% Federal: 941 Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30b-20457-100021-e Date of Disbursement 11 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 2606.14</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2881.14

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

<p>A. Full Name (Last, First, Middle Initial) Joshua Weber</p> <p>Mailing Address 1241 Orchard Park Circle</p> <p>City Pflugerville State TX Zip Code 78660-2431</p> <p>Purpose of Disbursement FEA 100% Federal: Salary: FEA</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30b-40308-99338-e Date of Disbursement 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 1461.97</p>
<p>B. Full Name (Last, First, Middle Initial) Robert Salazar</p> <p>Mailing Address PO Box 59</p> <p>City Youngsville State NM Zip Code 87064-0059</p> <p>Purpose of Disbursement FEA 100% Federal: Salary- FEA</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30b-40333-99739-e Date of Disbursement 10 / 31 / 2010</p> <p>Amount of Each Disbursement this Period 1154.37</p>
<p>C. Full Name (Last, First, Middle Initial) Jason Deleau</p> <p>Mailing Address 714 1/2 Kathryn Avenue</p> <p>City Santa Fe State NM Zip Code 87505-1038</p> <p>Purpose of Disbursement FEA 100% Federal: Paid Volunteer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30b-40578-99677-e Date of Disbursement 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 42.50</p>

SUBTOTAL of Disbursements This Page (optional)	2658.84
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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

A. Full Name (Last, First, Middle Initial) San Juan County Clerk <hr/> Mailing Address PO Box 550 <hr/> City Aztec State NM Zip Code 87410-0550 <hr/> Purpose of Disbursement FEA 100% Federal: Voter Lists Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-341-99387-e Date of Disbursement 10 / 20 / 2010
	Amount of Each Disbursement this Period 40.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Scott Zacheus <hr/> Mailing Address 406 E Arriba Drive <hr/> City Hobbs State NM Zip Code 88240-3433 <hr/> Purpose of Disbursement FEA 100% Federal: Salary- FEA Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40377-99741-e Date of Disbursement 10 / 31 / 2010
	Amount of Each Disbursement this Period 1028.92
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Rosalie Herrera <hr/> Mailing Address 3000 El Camino Real <hr/> City Las Cruces State NM Zip Code 88007-7236 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40621-99769-e Date of Disbursement 11 / 02 / 2010
	Amount of Each Disbursement this Period 200.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

1268.92

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

A. Full Name (Last, First, Middle Initial) Terrence Shields <hr/> Mailing Address 704 Three Cross Drive <hr/> City Roswell State NM Zip Code 88201-7832 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40588-99700-e Date of Disbursement 11 / 02 / 2010
	Amount of Each Disbursement this Period 40.00
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) Ms. Ana Maria Salazar <hr/> Mailing Address 2948 Missouri Avenue <hr/> City Las Cruces State NM Zip Code 88011-4814 <hr/> Purpose of Disbursement Political Consulting-FEA Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40432-99742-e Date of Disbursement 10 / 31 / 2010
	Amount of Each Disbursement this Period 2000.00
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) Clifton Green <hr/> Mailing Address 370 Aspen Road <hr/> City Glorieta State NM Zip Code 87535-7128 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40577-99676-e Date of Disbursement 11 / 02 / 2010
	Amount of Each Disbursement this Period 62.50
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

2102.50

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

<p>A. Full Name (Last, First, Middle Initial) Alexandro Olivas</p> <p>Mailing Address 3102 Barcelona Drive</p> <p>City Roswell State NM Zip Code 88201-8337</p> <p>Purpose of Disbursement FEA 100% Federal: Paid Volunteer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30b-40589-99701-e Date of Disbursement 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 40.00</p>
<p>B. Full Name (Last, First, Middle Initial) Melissa Wells</p> <p>Mailing Address 1501 Tramway Boulevard NE Apt. 137C</p> <p>City Albuquerque State NM Zip Code 87112-6146</p> <p>Purpose of Disbursement FEA 100% Federal: Paid Volunteer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30b-40584-99697-e Date of Disbursement 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 280.00</p>
<p>C. Full Name (Last, First, Middle Initial) Mr. Victor Contreras</p> <p>Mailing Address PO Box 417</p> <p>City Mesilla State NM Zip Code 88046-0417</p> <p>Purpose of Disbursement FEA 100% Federal: Paid Volunteer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB30b-16253-99765-e Date of Disbursement 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 145.00</p>

SUBTOTAL of Disbursements This Page (optional)	465.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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

A. Full Name (Last, First, Middle Initial) Ms. Pamela Navarette <hr/> Mailing Address 5320 San Mateo Boulevard NE Apt. F75 <hr/> City Albuquerque State NM Zip Code 87109-6319 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40464-99799-e Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 5 / 2 0 1 0
	Amount of Each Disbursement this Period 176.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) David Giron <hr/> Mailing Address 765 Pedro Madrid Road <hr/> City Las Cruces State NM Zip Code 88007-5861 <hr/> Purpose of Disbursement FEA 100% Federal: Paid Volunteer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40618-99752-e Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 1 0
	Amount of Each Disbursement this Period 320.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Ms. Julia Ruetten <hr/> Mailing Address 6110 Academy Road NE Apt. 86 <hr/> City Albuquerque State NM Zip Code 87109-2800 <hr/> Purpose of Disbursement FEA 100% Federal: Salary: FEA Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30b-40307-99337-e Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 1 0
	Amount of Each Disbursement this Period 1620.18
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ►

2116.18

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

103421.91

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

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

NAME OF ACCOUNT WF Allocation	DATE OF RECEIPT M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 1 0	TOTAL AMOUNT TRANSFERRED 5035.00
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BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	5035.00	Transaction ID: H3A-40476-82208
ii) Generic Voter Drive		Transaction ID:
iii) Exempt Activities		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising		
v) Direct Candidate Support (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support		
vi) Public Communications Referring Only to Party (Made by PAC)		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred)	

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

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

NAME OF ACCOUNT WF Allocation	DATE OF RECEIPT M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 1 0	TOTAL AMOUNT TRANSFERRED 7315.00
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BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	7315.00	Transaction ID: H3A-40482-82211
ii) Generic Voter Drive		Transaction ID:
iii) Exempt Activities		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising		
v) Direct Candidate Support (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support		
vi) Public Communications Referring Only to Party (Made by PAC)		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred)	

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

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

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
WF Allocation	M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 1 0	1165.00

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative		1165.00	Transaction ID: H3A-40481-82210
ii) Generic Voter Drive			Transaction ID:
iii) Exempt Activities			Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)			
a) _____			Transaction ID:
b) _____			Transaction ID:
c) Total Amount Transferred for Direct Fundraising			
v) Direct Candidate Support (List of Activity or Event Identifier)			
a) _____			Transaction ID:
b) _____			Transaction ID:
c) Total Amount Transferred For Direct Candidate Support			
vi) Public Communications Referring Only to Party (Made by PAC)			Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred)	

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

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

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
WF Allocation	M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 1 0	1905.00

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	1905.00	Transaction ID: H3A-40471-82205
ii) Generic Voter Drive		Transaction ID:
iii) Exempt Activities		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising		
v) Direct Candidate Support (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support		
vi) Public Communications Referring Only to Party (Made by PAC)		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred)	

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

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

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
WF Allocation	M M / D D / Y Y Y Y 11 / 19 / 2010	2500.00

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative		2500.00	Transaction ID: H3A-40499-82217
ii) Generic Voter Drive			Transaction ID:
iii) Exempt Activities			Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)			
a) _____			Transaction ID:
b) _____			Transaction ID:
c) Total Amount Transferred for Direct Fundraising			
v) Direct Candidate Support (List of Activity or Event Identifier)			
a) _____			Transaction ID:
b) _____			Transaction ID:
c) Total Amount Transferred For Direct Candidate Support			
vi) Public Communications Referring Only to Party (Made by PAC)			Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred)	

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

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

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
WF Allocation	M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 1 0	-3979.00

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	-3979.00	Transaction ID: H3A-40474-82206
ii) Generic Voter Drive		Transaction ID:
iii) Exempt Activities		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising		
v) Direct Candidate Support (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support		
vi) Public Communications Referring Only to Party (Made by PAC)		
		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred)	

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

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

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
WF Allocation	M M / D D / Y Y Y Y 11 / 11 / 2010	5437.00

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	5035.00	Transaction ID: H3A-40491-82215
ii) Generic Voter Drive	402.00	Transaction ID: H340491-82215
iii) Exempt Activities		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising		
v) Direct Candidate Support (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support		
vi) Public Communications Referring Only to Party (Made by PAC)		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred)	

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

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

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
WF Allocation	M M / D D / Y Y Y Y 11 / 08 / 2010	1960.00

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	1960.00	Transaction ID: H3A-40488-82213
ii) Generic Voter Drive		Transaction ID:
iii) Exempt Activities		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising		
v) Direct Candidate Support (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support		
vi) Public Communications Referring Only to Party (Made by PAC)		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	20936.00
TOTAL This Period (Generic Voter Drive)	402.00
TOTAL This Period (Exempt Activities)	0.00
TOTAL This Period (Direct Fundraising)	0.00
TOTAL This Period (Direct Candidate Support)	0.00
TOTAL This Period (Public Communications Referring Only to Party)	0.00
TOTAL This Period (Total Amount Transferred)	21338.00

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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

A. Full Name (Last, First, Middle Initial) Miss Tiffany Kardeen			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 11804 Palo Duro Avenue NE			Allocated Activity or Event Year-To-Date 203805.92	
City	State	Zip Code	Date M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 1 0 Transaction ID: H4-34571-99330-e	
Albuquerque	NM	87111-4145		
Purpose of Disbursement: Salary: Non FEA			Category/ Type	
Activity or Event Identifier: ADMINISTRATION B 411 - 1200				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
176.97		1002.80		1179.77

B. Full Name (Last, First, Middle Initial) Print Mart, LLC			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2408 Candelaria Road NE			Allocated Activity or Event Year-To-Date 203805.92	
City	State	Zip Code	Date M M / D D / Y Y Y Y 1 1 / 1 9 / 2 0 1 0 Transaction ID: H4-34496-10002-e	
Albuquerque	NM	87107-2037		
Purpose of Disbursement: Letterhead and envelopes			Category/ Type	
Activity or Event Identifier: ADMINISTRATION B 411 - 1200				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
103.20		584.81		688.01

C. Full Name (Last, First, Middle Initial) EFTPS			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address Internal Revenue Serv Center			Allocated Activity or Event Year-To-Date 203805.92	
City	State	Zip Code	Date M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 1 0 Transaction ID: H4-20457-99334-e	
Ogden	UT	84201-0001		
Purpose of Disbursement: Payroll taxes (Non FEA Employees)			Category/ Type	
Activity or Event Identifier: ADMINISTRATION B 411 - 1200				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
217.95		1235.04		1452.99

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
498.12		2822.65		3320.77

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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

A. Full Name (Last, First, Middle Initial) Ms. Heather Hall			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 142 Big Horn Ridge Court NE			Allocated Activity or Event Year-To-Date 203805.92	
City	State	Zip Code	Date M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 1 0 Transaction ID: H4-40332-100026-e	
Albuquerque	NM	87122-1902		
Purpose of Disbursement: Salary - Non FEA			Category/ Type	
Activity or Event Identifier: ADMINISTRATION B 411 - 1200				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
109.03		617.86		726.89

B. Full Name (Last, First, Middle Initial) Midway Office Supply Center, Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 5900 Midway Park Boulevard NE			Allocated Activity or Event Year-To-Date 203805.92	
City	State	Zip Code	Date M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 1 0 Transaction ID: H4-20381-99447-e	
Albuquerque	NM	87109-5805		
Purpose of Disbursement: Office Supplies			Category/ Type	
Activity or Event Identifier: ADMINISTRATION B 411 - 1200				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
18.15		102.88		121.03

C. Full Name (Last, First, Middle Initial) EFTPS			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address Internal Revenue Serv Center			Allocated Activity or Event Year-To-Date 203805.92	
City	State	Zip Code	Date M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 1 0 Transaction ID: H4-20457-100022-e	
Ogden	UT	84201-0001		
Purpose of Disbursement: Payroll taxes (Non FEA employees)			Category/ Type	
Activity or Event Identifier: ADMINISTRATION B 411 - 1200				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
217.95		1235.04		1452.99

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
345.13		1955.78		2300.91

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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

A. Full Name (Last, First, Middle Initial) Mrs. Janel Causey			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 13116 Bear Dancer Trail NE			Allocated Activity or Event Year-To-Date 203805.92		
City Albuquerque	State NM	Zip Code 87112-3725	Date <input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Salary - Non FEA			Transaction ID: H4-39238-100024-e		
Activity or Event Identifier: ADMINISTRATION B 411 - 1200					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
219.30		1242.67		1461.97

B. Full Name (Last, First, Middle Initial) Mrs. Janel Causey			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 13116 Bear Dancer Trail NE			Allocated Activity or Event Year-To-Date 203805.92		
City Albuquerque	State NM	Zip Code 87112-3725	Date <input type="text" value="10"/> / <input type="text" value="22"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Reimbursement: Insurance			Transaction ID: H4-39238-99441-e		
Activity or Event Identifier: ADMINISTRATION B 411 - 1200					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
25.58		144.92		170.50

C. Full Name (Last, First, Middle Initial) Miss Tiffany Kardeen			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 11804 Palo Duro Avenue NE			Allocated Activity or Event Year-To-Date 203805.92		
City Albuquerque	State NM	Zip Code 87111-4145	Date <input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Salary - Non FEA			Transaction ID: H4-34571-100023-e		
Activity or Event Identifier: ADMINISTRATION B 411 - 1200					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
176.97		1002.80		1179.77

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
421.85		2390.39		2812.24

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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

A. Full Name (Last, First, Middle Initial) Pitney Bowes Global Financial Svcs LLC			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 371887			Allocated Activity or Event Year-To-Date 203805.92		
City Pittsburgh	State PA	Zip Code 15250-7887	Date <input type="text" value="10"/> / <input type="text" value="22"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Equipment Lease			Transaction ID: H4-2872-99442-e		
Activity or Event Identifier: ADMINISTRATION B 411 - 1200					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
194.43		1101.76		1296.19

B. Full Name (Last, First, Middle Initial) PNM			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 17970			Allocated Activity or Event Year-To-Date 203805.92		
City Denver	State CO	Zip Code 80217-0970	Date <input type="text" value="11"/> / <input type="text" value="08"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Utilities: Electricity			Transaction ID: H4-23373-99817-e		
Activity or Event Identifier: ADMINISTRATION B 411 - 1200					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
25.92		146.85		172.77

C. Full Name (Last, First, Middle Initial) Marlin Business Bank			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 13604			Allocated Activity or Event Year-To-Date 203805.92		
City Philadelphia	State PA	Zip Code 19101-3604	Date <input type="text" value="10"/> / <input type="text" value="22"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: xerox lease			Transaction ID: H4-39721-99440-e		
Activity or Event Identifier: ADMINISTRATION B 411 - 1200					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
47.15		267.17		314.32

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
267.50		1515.78		1783.28

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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

A. Full Name (Last, First, Middle Initial) LexisNexis			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 894166			Allocated Activity or Event Year-To-Date 203805.92		
City Los Angeles	State CA	Zip Code 90189-4166	Date <input type="text" value="11"/> / <input type="text" value="19"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Online Subscription			Transaction ID: H4-24366-100000-e		
Activity or Event Identifier: ADMINISTRATION B 411 - 1200			Category/Type		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
63.71		360.99		424.70

B. Full Name (Last, First, Middle Initial) Mrs. Pam Wolfe			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 15129			Allocated Activity or Event Year-To-Date 203805.92		
City Las Cruces	State NM	Zip Code 88004-5129	Date <input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Salary- Non FEA			Transaction ID: H4-2665-99733-e		
Activity or Event Identifier: ADMINISTRATION B 411 - 1200			Category/Type		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
165.32		936.84		1102.16

C. Full Name (Last, First, Middle Initial) Marlin Business Bank			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 13604			Allocated Activity or Event Year-To-Date 203805.92		
City Philadelphia	State PA	Zip Code 19101-3604	Date <input type="text" value="11"/> / <input type="text" value="19"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Xerox Lease			Transaction ID: H4-39721-100005-e		
Activity or Event Identifier: ADMINISTRATION B 411 - 1200			Category/Type		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
47.15		267.17		314.32

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
276.18		1565.00		1841.18

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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

A. Full Name (Last, First, Middle Initial)
EFTPS
Mailing Address
Internal Revenue Serv Center
City State Zip Code
Ogden UT 84201-0001
Purpose of Disbursement:
Payroll taxes - Non FEA Employees
Activity or Event Identifier:
ADMINISTRATION B 411 - 1200

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
203805.92
Date 10 / 31 / 2010
Transaction ID: H4-20457-99812-e

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
217.95		1235.04		1452.99

B. Full Name (Last, First, Middle Initial)
Mrs. Janel Causey
Mailing Address
13116 Bear Dancer Trail NE
City State Zip Code
Albuquerque NM 87112-3725
Purpose of Disbursement:
Salary: Non FEA
Activity or Event Identifier:
ADMINISTRATION B 411 - 1200

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
203805.92
Date 10 / 15 / 2010
Transaction ID: H4-39238-99331-e

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
219.30		1242.67		1461.97

C. Full Name (Last, First, Middle Initial)
Mrs. Pam Wolfe
Mailing Address
PO Box 15129
City State Zip Code
Las Cruces NM 88004-5129
Purpose of Disbursement:
Salary: Non FEA
Activity or Event Identifier:
ADMINISTRATION B 411 - 1200

Type of Allocated Activity:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
203805.92
Date 10 / 15 / 2010
Transaction ID: H4-2665-99332-e

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
165.32		936.83		1102.15

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
602.57		3414.54		4017.11

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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

A. Full Name (Last, First, Middle Initial) Pitney Bowes Purchase Power			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 371874			Allocated Activity or Event Year-To-Date 203805.92	
City	State	Zip Code	Date M M / D D / Y Y Y Y 1 1 / 1 9 / 2 0 1 0 Transaction ID: H4-18829-100004-e	
Pittsburgh	PA	15250-7874		
Purpose of Disbursement: Meter Refill			Category/ Type	
Activity or Event Identifier: ADMINISTRATION B 411 - 1200				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
30.00		170.00		200.00

B. Full Name (Last, First, Middle Initial) Ms. Heather Hall			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 142 Big Horn Ridge Court NE			Allocated Activity or Event Year-To-Date 203805.92	
City	State	Zip Code	Date M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 1 0 Transaction ID: H4-40332-99333-e	
Albuquerque	NM	87122-1902		
Purpose of Disbursement: Salary: Non FEA			Category/ Type	
Activity or Event Identifier: ADMINISTRATION B 411 - 1200				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
109.03		617.86		726.89

C. Full Name (Last, First, Middle Initial) New Mexico Gas Company			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 173341			Allocated Activity or Event Year-To-Date 203805.92	
City	State	Zip Code	Date M M / D D / Y Y Y Y 1 1 / 0 8 / 2 0 1 0 Transaction ID: H4-39214-99820-e	
Denver	CO	80217-3341		
Purpose of Disbursement: Utilities: Gas			Category/ Type	
Activity or Event Identifier: ADMINISTRATION B 411 - 1200				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.69		20.88		24.57

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
142.72		808.74		951.46

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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

A. Full Name (Last, First, Middle Initial) NM Department of Workforce Solutions			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 2281			Allocated Activity or Event Year-To-Date 203805.92	
City Albuquerque	State NM	Zip Code 87103-2281	Category/ Type	
Purpose of Disbursement: State Unemployment Tax 3Q 2010				
Activity or Event Identifier: ADMINISTRATION B 411 - 1200			Date M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 1 0 Transaction ID: H4-2868-99443-e	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
48.31		273.74		322.05

B. Full Name (Last, First, Middle Initial) Mrs. Janel Causey			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 13116 Bear Dancer Trail NE			Allocated Activity or Event Year-To-Date 203805.92	
City Albuquerque	State NM	Zip Code 87112-3725	Category/ Type	
Purpose of Disbursement: Salary- Non FEA				
Activity or Event Identifier: ADMINISTRATION B 411 - 1200			Date M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 1 0 Transaction ID: H4-39238-99732-e	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
219.30		1242.67		1461.97

C. Full Name (Last, First, Middle Initial) Mountain States Mutual Casualty Co.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 93254			Allocated Activity or Event Year-To-Date 203805.92	
City Albuquerque	State NM	Zip Code 87199-3254	Category/ Type	
Purpose of Disbursement: BAP, CPP, WCI insurance				
Activity or Event Identifier: ADMINISTRATION B 411 - 1200			Date M M / D D / Y Y Y Y 1 1 / 1 9 / 2 0 1 0 Transaction ID: H4-34706-100001-e	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
186.49		1056.80		1243.29

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
454.10		2573.21		3027.31

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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

A. Full Name (Last, First, Middle Initial) PNM			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 17970			Allocated Activity or Event Year-To-Date 203805.92		
City Denver	State CO	Zip Code 80217-0970	Date <input type="text" value="11"/> / <input type="text" value="08"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Utilities: Electricity			Transaction ID: H4-23373-99818-e		
Activity or Event Identifier: ADMINISTRATION B 411 - 1200					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
32.11		181.94		214.05

B. Full Name (Last, First, Middle Initial) Taxation & Revenue Department			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 25128			Allocated Activity or Event Year-To-Date 203805.92		
City Santa Fe	State NM	Zip Code 87504-5128	Date <input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: State gross receipts tax - September (No			Transaction ID: H4-18771-99987-e		
Activity or Event Identifier: ADMINISTRATION B 411 - 1200					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
52.92		299.90		352.82

C. Full Name (Last, First, Middle Initial) EFTPS			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address Internal Revenue Serv Center			Allocated Activity or Event Year-To-Date 203805.92		
City Ogden	State UT	Zip Code 84201-0001	Date <input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2010"/>		
Purpose of Disbursement: Federal Unemployment taxes 3Q 2010 (non			Transaction ID: H4-20457-99986-e		
Activity or Event Identifier: ADMINISTRATION B 411 - 1200					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.60		37.40		44.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
91.63		519.24		610.87

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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

A. Full Name (Last, First, Middle Initial) Xerox Corporation			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC			
Mailing Address PO Box 7405			Allocated Activity or Event Year-To-Date 203805.92			
City Pasadena	State CA	Zip Code 91109-7405	Date M M / D D / Y Y Y Y 1 1 / 0 8 / 2 0 1 0 Transaction ID: H4-7801-99816-e			
Purpose of Disbursement: Printing Charges						
Activity or Event Identifier: ADMINISTRATION B 411 - 1200						
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
31.88			180.64			212.52

B. Full Name (Last, First, Middle Initial) Howard & Koval, PC			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC			
Mailing Address PO Box 30850			Allocated Activity or Event Year-To-Date 203805.92			
City Albuquerque	State NM	Zip Code 87190-0850	Date M M / D D / Y Y Y Y 1 1 / 0 8 / 2 0 1 0 Transaction ID: H4-20380-99819-e			
Purpose of Disbursement: Accounting Services						
Activity or Event Identifier: ADMINISTRATION B 411 - 1200						
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
252.79			1432.46			1685.25

C. Full Name (Last, First, Middle Initial) Taxation & Revenue Department			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC			
Mailing Address PO Box 25128			Allocated Activity or Event Year-To-Date 203805.92			
City Santa Fe	State NM	Zip Code 87504-5128	Date M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 1 0 Transaction ID: H4-18771-99445-e			
Purpose of Disbursement: Workers Compensation fee 3Q 2010						
Activity or Event Identifier: ADMINISTRATION B 411 - 1200						
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
2.58			14.62			17.20

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
287.25		1627.72		1914.97

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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

A. Full Name (Last, First, Middle Initial) Mrs. Pam Wolfe			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 15129			Allocated Activity or Event Year-To-Date 203805.92		
City	State	Zip Code	Category/ Type		
Las Cruces	NM	88004-5129			
Purpose of Disbursement: Salary - Non FEA			Date <input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2010"/>		
Activity or Event Identifier: ADMINISTRATION B 411 - 1200			Transaction ID: H4-2665-100025-e		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
165.32		936.83		1102.15

B. Full Name (Last, First, Middle Initial) Miss Tiffany Kardeen			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 11804 Palo Duro Avenue NE			Allocated Activity or Event Year-To-Date 203805.92		
City	State	Zip Code	Category/ Type		
Albuquerque	NM	87111-4145			
Purpose of Disbursement: Salary- Non FEA			Date <input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2010"/>		
Activity or Event Identifier: ADMINISTRATION B 411 - 1200			Transaction ID: H4-34571-99731-e		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
176.97		1002.80		1179.77

C. Full Name (Last, First, Middle Initial) Midway Office Supply Center, Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 5900 Midway Park Boulevard NE			Allocated Activity or Event Year-To-Date 203805.92		
City	State	Zip Code	Category/ Type		
Albuquerque	NM	87109-5805			
Purpose of Disbursement: Office Supplies			Date <input type="text" value="11"/> / <input type="text" value="19"/> / <input type="text" value="2010"/>		
Activity or Event Identifier: ADMINISTRATION B 411 - 1200			Transaction ID: H4-20381-100003-e		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.20		57.78		67.98

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
352.49		1997.41		2349.90

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

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

A. Full Name (Last, First, Middle Initial) Ms. Heather Hall			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 142 Big Horn Ridge Court NE			Allocated Activity or Event Year-To-Date 203805.92		
City Albuquerque	State NM	Zip Code 87122-1902	Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Purpose of Disbursement: Salary- Non FEA			Category/ Type		
Activity or Event Identifier: ADMINISTRATION B 411 - 1200			Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
			Transaction ID: H4-40332-99734-e		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
109.03		617.85		726.88

B. Full Name (Last, First, Middle Initial) Mr. Mitch Meyers			Type of Allocated Activity: <input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input checked="" type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1713 Gabaldon Drive NW			Allocated Activity or Event Year-To-Date 4467.00		
City Albuquerque	State NM	Zip Code 87104-2770	Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
Purpose of Disbursement: Staffing Voter Registration Table			Category/ Type		
Activity or Event Identifier: GENERIC VOTER DRIVE			Date <input type="text"/> / <input type="text"/> / <input type="text"/>		
			Transaction ID: H4-25022-99964-e		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
70.95		402.05		473.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
179.98		1019.90		1199.88

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
3919.52		22210.36		26129.88

**SCHEDULE H5 (FEC Form 3X)
 TRANSFERS OF LEVIN FUNDS FOR
 SHARED FEDERAL ELECTION ACTIVITY**
 (To be used by State, District and Local Party Committees Only)

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

NAME OF ACCOUNT WF Allocation Tsfs	DATE OF RECEIPT M M / D D / Y Y Y Y 1 1 / 0 4 / 2 0 1 0	TOTAL AMOUNT TRANSFERRED 510.00 Transaction ID: H540484-82212
---------------------------------------	---	---

BREAKDOWN OF THIS TRANSFER

i) Voter Registration		VOTER REGISTRATION
Total Amount Transferred for Voter Registration.....	510.00	
ii) Voter ID		VOTER ID
Total Amount Transferred for Voter ID.....	0.00	
iii) GOTV		GOTV
Total Amount Transferred for GOTV.....	0.00	
iv) Generic Campaign Activity		GENERIC CAMPAIGN ACTIVITY
Total Amount Transferred for Generic Campaign Activity.....	0.00	

NAME OF ACCOUNT WF Allocation Tsfs	DATE OF RECEIPT M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 1 0	TOTAL AMOUNT TRANSFERRED 625.00 Transaction ID: H540477-82209
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BREAKDOWN OF THIS TRANSFER

i) Voter Registration		VOTER REGISTRATION
Total Amount Transferred for Voter Registration.....	625.00	
ii) Voter ID		VOTER ID
Total Amount Transferred for Voter ID.....	0.00	
iii) GOTV		GOTV
Total Amount Transferred for GOTV.....	0.00	
iv) Generic Campaign Activity		GENERIC CAMPAIGN ACTIVITY
Total Amount Transferred for Generic Campaign Activity.....	0.00	

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED (Last Page Only)

TOTAL This Period (Voter Registration).....	
TOTAL This Period (Voter ID).....	
TOTAL This Period (GOTV).....	
TOTAL This Period (Generic Campaign Activity).....	
TOTAL This Period (Total Amount of Transfers Received).....	

**SCHEDULE H5 (FEC Form 3X)
 TRANSFERS OF LEVIN FUNDS FOR
 SHARED FEDERAL ELECTION ACTIVITY**

(To be used by State, District and Local Party Committees Only)

NAME OF COMMITTEE (In Full)

Republican Campaign Committee Of New Mexico

NAME OF ACCOUNT

WF Allocation Tsfs

DATE OF RECEIPT

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

TOTAL AMOUNT TRANSFERRED

520.00

Transaction ID: H540463-82203

BREAKDOWN OF THIS TRANSFER

i) **Voter Registration**

Total Amount Transferred for Voter Registration.....

VOTER REGISTRATION

520.00

ii) **Voter ID**

Total Amount Transferred for Voter ID.....

VOTER ID

0.00

iii) **GOTV**

Total Amount Transferred for GOTV.....

GOTV

0.00

iv) **Generic Campaign Activity**

Total Amount Transferred for Generic Campaign Activity.....

GENERIC CAMPAIGN ACTIVITY

0.00

NAME OF ACCOUNT

WF Allocation Tsfs

DATE OF RECEIPT

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

TOTAL AMOUNT TRANSFERRED

616.00

Transaction ID: H540470-82204

BREAKDOWN OF THIS TRANSFER

i) **Voter Registration**

Total Amount Transferred for Voter Registration.....

VOTER REGISTRATION

616.00

ii) **Voter ID**

Total Amount Transferred for Voter ID.....

VOTER ID

0.00

iii) **GOTV**

Total Amount Transferred for GOTV.....

GOTV

0.00

iv) **Generic Campaign Activity**

Total Amount Transferred for Generic Campaign Activity.....

GENERIC CAMPAIGN ACTIVITY

0.00

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED (Last Page Only)

TOTAL This Period (Voter Registration).....

TOTAL This Period (Voter ID).....

TOTAL This Period (GOTV).....

TOTAL This Period (Generic Campaign Activity).....

TOTAL This Period (Total Amount of Transfers Received).....

**SCHEDULE H5 (FEC Form 3X)
 TRANSFERS OF LEVIN FUNDS FOR
 SHARED FEDERAL ELECTION ACTIVITY**
 (To be used by State, District and Local Party Committees Only)

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

NAME OF ACCOUNT WF Allocation Tsfs	DATE OF RECEIPT <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	5		2	0	1	0	TOTAL AMOUNT TRANSFERRED <table border="1"> <tr> <td>735.00</td> </tr> </table> Transaction ID: H540495-82216	735.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	1		1	5		2	0	1	0														
735.00																							

BREAKDOWN OF THIS TRANSFER

		VOTER REGISTRATION		
i) Voter Registration	Total Amount Transferred for Voter Registration.....	<table border="1"><tr><td>735.00</td></tr></table>	735.00	
735.00				
		VOTER ID		
ii) Voter ID	Total Amount Transferred for Voter ID.....	<table border="1"><tr><td>0.00</td></tr></table>	0.00	
0.00				
		GOTV		
iii) GOTV	Total Amount Transferred for GOTV.....	<table border="1"><tr><td>0.00</td></tr></table>	0.00	
0.00				
		GENERIC CAMPAIGN ACTIVITY		
iv) Generic Campaign Activity	Total Amount Transferred for Generic Campaign Activity.....	<table border="1"><tr><td>0.00</td></tr></table>	0.00	
0.00				

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED (Last Page Only)

TOTAL This Period (Voter Registration).....	<table border="1"><tr><td>3006.00</td></tr></table>	3006.00
3006.00		
TOTAL This Period (Voter ID).....	<table border="1"><tr><td>0.00</td></tr></table>	0.00
0.00		
TOTAL This Period (GOTV).....	<table border="1"><tr><td>0.00</td></tr></table>	0.00
0.00		
TOTAL This Period (Generic Campaign Activity).....	<table border="1"><tr><td>0.00</td></tr></table>	0.00
0.00		
TOTAL This Period (Total Amount of Transfers Received).....	<table border="1"><tr><td>3006.00</td></tr></table>	3006.00
3006.00		

**SCHEDULE H6 (FEC Form 3X)
DISBURSEMENTS OF FEDERAL AND LEVIN FUNDS
FOR SHARED FEDERAL ELECTION ACTIVITY**

(To be used by State, District and Local Party Committees Only)

NAME OF COMMITTEE (In Full)

Republican Campaign Committee Of New Mexico

A. Full Name (Last ,First, Middle Initial) / Full Organization Name

Mr. Mitch Meyers

Type of Allocated Activity or Event:

Voter Registration GOTV
 Voter ID Generic Campaign

Mailing Address
1713 Gabaldon Drive NW

Allocated Activity or Event Year-To-Date

23529.00

City State Zip Code
Albuquerque NM 87104-2770

Purpose of Disbursement
Voter Registration Table

Category/
Type

Date / /

FEDERAL SHARE + LEVIN SHARE = TOTAL AMOUNT

92.40 + 523.60 = 616.00

Transaction ID: H6-25022-99305-e

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

Mr. Mitch Meyers

Type of Allocated Activity or Event:

Voter Registration GOTV
 Voter ID Generic Campaign

Mailing Address
1713 Gabaldon Drive NW

Allocated Activity or Event Year-To-Date

23529.00

City State Zip Code
Albuquerque NM 87104-2770

Purpose of Disbursement
Voter Registration Table

Category/
Type

Date / /

FEDERAL SHARE + LEVIN SHARE = TOTAL AMOUNT

108.90 + 617.10 = 726.00

Transaction ID: H6-25022-99397-e

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

Dona Ana County FRW

Type of Allocated Activity or Event:

Voter Registration GOTV
 Voter ID Generic Campaign

Mailing Address
15 Happy Trails Drive

Allocated Activity or Event Year-To-Date

23529.00

City State Zip Code
Las Cruces NM 88005-3973

Purpose of Disbursement
Voter Registration Table

Category/
Type

Date / /

FEDERAL SHARE + LEVIN SHARE = TOTAL AMOUNT

7.20 + 40.80 = 48.00

Transaction ID: H6-30466-99980-e

SUBTOTAL of Shared Federal and Levin Activity This Page

FEDERAL SHARE + LEVIN SHARE = TOTAL AMOUNT

208.50 + 1181.50 = 1390.00

TOTAL This Period (last page for each line only)(Federal share to 30(a)(i) and Levin share to 30(a)(ii))

FEDERAL SHARE TOTAL AMOUNT

LEVIN SHARE

TOTAL This Period for the Levin Share

**SCHEDULE H6 (FEC Form 3X)
DISBURSEMENTS OF FEDERAL AND LEVIN FUNDS
FOR SHARED FEDERAL ELECTION ACTIVITY**

(To be used by State, District and Local Party Committees Only)

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

A. Full Name (Last ,First, Middle Initial) / Full Organization Name Mr. Mitch Meyers			Type of Allocated Activity or Event: <input checked="" type="checkbox"/> Voter Registration <input type="checkbox"/> GOTV <input type="checkbox"/> Voter ID <input type="checkbox"/> Generic Campaign	
Mailing Address 1713 Gabaldon Drive NW			Allocated Activity or Event Year-To-Date _____ 23529.00 _____	
City Albuquerque	State NM	Zip Code 87104-2770	Date <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/>	
Purpose of Disbursement Voter Registration Table		Category/ Type		
FEDERAL SHARE _____ 90.75 _____		+ LEVIN SHARE _____ 514.25 _____	= TOTAL AMOUNT _____ 605.00 _____	
Transaction ID: H6-25022-99790-e				

B. Full Name (Last ,First, Middle Initial) / Full Organization Name Dona Ana County FRW			Type of Allocated Activity or Event: <input checked="" type="checkbox"/> Voter Registration <input type="checkbox"/> GOTV <input type="checkbox"/> Voter ID <input type="checkbox"/> Generic Campaign	
Mailing Address 15 Happy Trails Drive			Allocated Activity or Event Year-To-Date _____ 23529.00 _____	
City Las Cruces	State NM	Zip Code 88005-3973	Date <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/>	
Purpose of Disbursement Lost Check: original date 10/7/10		Category/ Type		
FEDERAL SHARE _____ -19.20 _____		+ LEVIN SHARE _____ -108.80 _____	= TOTAL AMOUNT _____ -128.00 _____	
Transaction ID: H6-30466-99967-e				

C. Full Name (Last ,First, Middle Initial) / Full Organization Name Dona Ana County FRW			Type of Allocated Activity or Event: <input checked="" type="checkbox"/> Voter Registration <input type="checkbox"/> GOTV <input type="checkbox"/> Voter ID <input type="checkbox"/> Generic Campaign	
Mailing Address 15 Happy Trails Drive			Allocated Activity or Event Year-To-Date _____ 23529.00 _____	
City Las Cruces	State NM	Zip Code 88005-3973	Date <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/>	
Purpose of Disbursement Replace lost check: original date 10/7/10		Category/ Type		
FEDERAL SHARE _____ 19.20 _____		+ LEVIN SHARE _____ 108.80 _____	= TOTAL AMOUNT _____ 128.00 _____	
Transaction ID: H6-30466-99968-e				

SUBTOTAL of Shared Federal and Levin Activity This Page

FEDERAL SHARE _____ 90.75 _____		+ LEVIN SHARE _____ 514.25 _____	= TOTAL AMOUNT _____ 605.00 _____	
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TOTAL This Period (last page for each line only)(Federal share to 30(a)(i) and Levin share to 30(a)(ii))

FEDERAL SHARE _____		+ LEVIN SHARE _____	= TOTAL AMOUNT _____	
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TOTAL This Period for the Levin Share

LEVIN SHARE _____				
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**SCHEDULE H6 (FEC Form 3X)
DISBURSEMENTS OF FEDERAL AND LEVIN FUNDS
FOR SHARED FEDERAL ELECTION ACTIVITY**

(To be used by State, District and Local Party Committees Only)

NAME OF COMMITTEE (In Full)

Republican Campaign Committee Of New Mexico

A. Full Name (Last ,First, Middle Initial) / Full Organization Name

FRW of Lincoln County

Type of Allocated Activity or Event:

Voter Registration GOTV
 Voter ID Generic Campaign

Mailing Address
PO Box 987

Allocated Activity or Event Year-To-Date

23529.00

City State Zip Code
Alto NM 88312-0987

Category/
Type

Date / /

FEDERAL SHARE + LEVIN SHARE = TOTAL AMOUNT
106.80 + 605.20 = 712.00

Transaction ID: H6-29518-99979-e

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

Mr. Mitch Meyers

Type of Allocated Activity or Event:

Voter Registration GOTV
 Voter ID Generic Campaign

Mailing Address
1713 Gabaldon Drive NW

Allocated Activity or Event Year-To-Date

23529.00

City State Zip Code
Albuquerque NM 87104-2770

Category/
Type

Date / /

FEDERAL SHARE + LEVIN SHARE = TOTAL AMOUNT
110.55 + 626.45 = 737.00

Transaction ID: H6-25022-99599-e

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

Valencia County FRW

Type of Allocated Activity or Event:

Voter Registration GOTV
 Voter ID Generic Campaign

Mailing Address
PO Box 1282

Allocated Activity or Event Year-To-Date

23529.00

City State Zip Code
Los Lunas NM 87031-1282

Category/
Type

Date / /

FEDERAL SHARE + LEVIN SHARE = TOTAL AMOUNT
15.60 + 88.40 = 104.00

Transaction ID: H6-40655-99978-e

SUBTOTAL of Shared Federal and Levin Activity This Page

FEDERAL SHARE + LEVIN SHARE = TOTAL AMOUNT
232.95 + 1320.05 = 1553.00

TOTAL This Period (last page for each line only)(Federal share to 30(a)(i) and Levin share to 30(a)(ii))

FEDERAL SHARE TOTAL AMOUNT
532.20 3548.00

TOTAL This Period for the Levin Share 3015.80

SCHEDULE L (FEC Form 3X)

AGGREGATION PAGE: LEVIN FUNDS

Transaction ID: Levin-1

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

NAME OF ACCOUNT
Levin

	COLUMN A TOTAL THIS PERIOD	COLUMN B YEAR-TO-DATE
1. RECEIPTS FROM PERSONS		
a. Itemized..... (Use Schedule L-A)	0.00	85000.00
b. Unitemized.....	0.00	0.00
c. Total.....	0.00	85000.00
2. OTHER RECEIPTS.....	0.00	23750.00
3. TOTAL RECEIPTS..... (Add Lines 1c and 2)	0.00	108750.00
4. TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT (Use Schedule L-B)		
a. Voter Registration.....	3006.00	18728.00
b. Voter ID.....	0.00	13130.00
c. GOTV.....	0.00	7140.00
d. Generic Campaign.....	0.00	0.00
e. Total.....	3006.00	38998.00
5. OTHER DISBURSEMENTS.....	0.00	65266.00
6. TOTAL DISBURSEMENTS..... (Add Lines 4e and 5)	3006.00	104264.00
7. BEGINNING CASH ON HAND..... (for Column B, use cash as of January 1st)	7492.00	0.00
8. RECEIPTS..... (from Line 3)	0.00	108750.00
9. SUBTOTAL..... (Add Lines 7 and 8)	7492.00	108750.00
10. DISBURSEMENTS..... (From Line 6)	3006.00	104264.00
11. ENDING CASH ON HAND..... (Subtract Line 10 From Line 9)	4486.00	4486.00

**SCHEDULE L-B (FEC Form 3X)
ITEMIZED DISBURSEMENTS
OF LEVIN FUNDS**

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

FOR LINE NUMBER:
(check only one)

4a 4c 5
 4b 4d

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

A.	Full Name (Last, First, Middle Initial) / Full Organization Name Republican Campaign Committee Of New Mexico	Transaction ID: SBSL4A-82204 Date of Disbursement
	Mailing Address PO Box 94083	<input type="text" value="10"/> <input type="text" value="01"/> / <input type="text" value="21"/> <input type="text" value="04"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City State Zip Code Albuquerque NM 87199-4083	Amount of Each Disbursement this Period <input type="text" value="616.00"/>
	Purpose of Disbursement Admin Tsf	Account: 1

B.	Full Name (Last, First, Middle Initial) / Full Organization Name Republican Campaign Committee Of New Mexico	Transaction ID: SBSL4A-82212 Date of Disbursement
	Mailing Address PO Box 94083	<input type="text" value="11"/> <input type="text" value="04"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City State Zip Code Albuquerque NM 87199-4083	Amount of Each Disbursement this Period <input type="text" value="510.00"/>
	Purpose of Disbursement Admin Tsf	Account: 1

C.	Full Name (Last, First, Middle Initial) / Full Organization Name Republican Campaign Committee Of New Mexico	Transaction ID: SBSL4A-82203 Date of Disbursement
	Mailing Address PO Box 94083	<input type="text" value="10"/> <input type="text" value="14"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City State Zip Code Albuquerque NM 87199-4083	Amount of Each Disbursement this Period <input type="text" value="520.00"/>
	Purpose of Disbursement Admin Tsf	Account: 1

D.	Full Name (Last, First, Middle Initial) / Full Organization Name Republican Campaign Committee Of New Mexico	Transaction ID: SBSL4A-82209 Date of Disbursement
	Mailing Address PO Box 94083	<input type="text" value="10"/> <input type="text" value="28"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City State Zip Code Albuquerque NM 87199-4083	Amount of Each Disbursement this Period <input type="text" value="625.00"/>
	Purpose of Disbursement Admin Tsf	Account: 1

E.	Full Name (Last, First, Middle Initial) / Full Organization Name Republican Campaign Committee Of New Mexico	Transaction ID: SBSL4A-82216 Date of Disbursement
	Mailing Address PO Box 94083	<input type="text" value="11"/> <input type="text" value="15"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City State Zip Code Albuquerque NM 87199-4083	Amount of Each Disbursement this Period <input type="text" value="735.00"/>
	Purpose of Disbursement Admin Tsf	Account: 1

SUBTOTAL of Disbursements This Page (optional)	3006.00
TOTAL This Period (last page this line number only)	3006.00