

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

RECEIVED  
FEC MAIL ROOM

2000 JUL 13 A 9:47

USE FEC MAILING LABEL  
OR  
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) PNM Responsible Citizens Group		2. FEC IDENTIFICATION NUMBER C00025395
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported Post Office Box 2267		
CITY, STATE and ZIP CODE Albuquerque, NM 87103		
3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)		

## 4. TYPE OF REPORT

(a)  April 15 Quarterly Report

July 15 Quarterly Report

October 15 Quarterly Report

January 31 Year End Report

July 31 Mid Year Report (Non-election Year Only)

Termination Report

Monthly Report Due On:

- |                                      |                                       |                                      |
|--------------------------------------|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> February 20 | <input type="checkbox"/> June 20      | <input type="checkbox"/> October 20  |
| <input type="checkbox"/> March 20    | <input type="checkbox"/> July 20      | <input type="checkbox"/> November 20 |
| <input type="checkbox"/> April 20    | <input type="checkbox"/> August 20    | <input type="checkbox"/> December 20 |
| <input type="checkbox"/> May 20      | <input type="checkbox"/> September 20 | <input type="checkbox"/> January 31  |

12-Day Pre-Election Report for the \_\_\_\_\_  
(Type of Election)

election on \_\_\_\_\_ in the State of \_\_\_\_\_

30-Day Post-Election Report following the General Election

on \_\_\_\_\_ in the State of \_\_\_\_\_

(b) Is this Report an Amendment?  YES  NO

SUMMARY		COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period	4/1/00 through 6/30/00		
6. (a) Cash on Hand January 1, 2000			\$ 10,294.97
(b) Cash on Hand at Beginning of Reporting Period		\$ 8,704.27	
(c) Total Receipts (from Line 19)		\$ 1,479.37	\$ 2,888.67
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)		\$ 10,183.64	\$ 13,183.64
7. Total Disbursements (from Line 30)		\$ 2,084.45	\$ 5,084.65
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))		\$ 8,099.19	\$ 8,099.19
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		\$ .00	For further information contact: Federal Election Commission 990 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-694-3100
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)		\$ .00	

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

Type or Print Name of Treasurer

John R. Loyack

Signature of Treasurer

Date

7-14-00

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

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FEC FORM 3X

(revised 9/99)

# DETAILED SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE		REPORT COVERING PERIOD		
PNM Responsible Citizens Group		FROM 4/1/00	TO: 6/30/00	
		COLUMN A Total This Period	COLUMN B Calendar Year	
<b>I. Receipts</b>				
11.	Contributions (other than loans) From:			
a.	Individual/Persons Other Than Political Committees			
i.	Itemized (use Schedule A) .....	1,479.37	2,888.67	11(a)(i)
ii.	Unitemized .....			11(a)(ii)
ii.	Total .....	1,479.37	2,888.67	11(a)(ii)
b.	Political Party Committees .....			11(b)
c.	Other Political Committees (such as PACs) .....			11(c)
d.	Total Contributions .....	1,479.37	2,888.67	11(d)
12.	Transfers From Affiliated/Other Party Committees .....			12
13.	All Loans Received .....			13
14.	Loan Repayments Received .....			14
15.	Offsets To Operating Expenditures (Refunds, Rebates, etc.) .....			15
16.	Refunds of Contributions Made to Federal Candidates and Other Political Committees .....			16
17.	Other Federal Receipts (Dividends, Interest, etc.) .....			17
18.	Transfers from Nonfederal Account for Joint Activity .....			18
19.	Total Receipts .....	1,479.37	2,888.67	19
20.	Total Federal Receipts .....	1,479.37	2,888.67	20
<b>II. Disbursements</b>				
21.	Operating Expenditures:			
a.	Shared Federal/Non-Federal Activity (from Schedule H4)			
i.	Federal Share .....			21(a)(i)
ii.	Non-Federal Share .....			21(a)(ii)
b.	Other Federal Operating Expenditures .....	84.45	84.45	21(b)
c.	Total Operating Expenditures .....	84.45	84.45	21(c)
22.	Transfers to Affiliated/Other Party Committees .....			22
23.	Contributions to Federal Candidates/Committees and Other Political Committees .....	2,000.00	5,000.00	23
24.	Independent Expenditures (use Schedule E) .....			24
25.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441 a(d)) (use Schedule F) ..			25
26.	Loan Repayments Made .....			26
27.	Loans Made .....			27
28.	Refunds of Contributions To:			
a.	Individuals/Persons Other Than Political Committees .....			28(a)
b.	Political Party Committees .....			28(b)
c.	Other Political Committees (such as PACs) .....			28(c)
d.	Total Contribution Refunds .....			28(d)
29.	Other Disbursements .....			29
30.	Total Disbursements .....	2,084.45	5,084.45	30
31.	Total Federal Disbursements .....			31
<b>III. Net Contributions/Operating Expenditures</b>				
32.	Total Contributions (other than loans)(from line 11d) .....	1,479.37	2,888.67	32
33.	Total Contribution Refunds (from line 28d) .....	.00	.00	33
34.	Net Contributions (other than loans)(subtract line 33 from 32) .....	1,479.37	2,888.67	34
35.	Total Federal Operating Expenditures .....	.00	.00	35
36.	Offsets to Operating Expenditures (from line 15) .....	.00	.00	36
37.	Net Operating Expenditures .....	.00	.00	37

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 2  
FOR LINE NUMBER 23

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)**

PNM Responsible Citizens Group

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Heather Wilson 625 Silver Avenue SW Albuquerque, NM 87102	Campaign donation Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/7/00	1,000.00
B. Full Name, Mailing Address and ZIP Code William Davis 11035 Bridgepoint NE Albuquerque, NM 87111	Campaign donation Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/18/00	500.00
C. Full Name, Mailing Address and ZIP Code Steve Pearce Post Office Box 1406 Hobbs, NM 88240	Campaign donation Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/1/00	500.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

**SUBTOTAL** of Disbursements This Page (optional) .....

2,000.00

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

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 2 OF 2  
FOR LINE NUMBER 21 (b)

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**NAME OF COMMITTEE (in Full)**

PWM Responsible Citizens Group

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Supplies	Date (month, day, year)	Amount of Each Disbursement This Period
Compass Bank 505 Marquette NW Albuquerque, NM 87102	Checks/deposit slips	4/4/08	84.45
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

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

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

2,084.45

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE  
FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

<input checked="" type="checkbox"/>	Hand Delivered	Date of Receipt
		7-13-00
<input type="checkbox"/>	First Class Mail	POSTMARKED
<input type="checkbox"/>	Registered/Certified Mail	POSTMARKED (R/C)
<input type="checkbox"/>	No Postmark	
<input type="checkbox"/>	Postmark Illegible	
<input type="checkbox"/>	Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/>	Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/>	Other ( Specify):	Postmarked
		<u>        </u> and/or Date of Receipt
<input type="checkbox"/>	Electronic Filing	
SL PREPARER		7-13-00 DATE PREPARED