	PORT OF R ID DISBURS Other Than An Author	EMENT	S	Of	fice Use Only
1. NAME OF TYPE COMMITTEE (in full)	e or print V	Example: If typir over the lines.	ng, type	12FE4M5	
Public Service Company c	of New Mexico Resp	onsible Citize	ens Group)	
ADDRESS (number and street)	varado Square				
Check if different than previously	S 2701			NM	87158
2. FEC IDENTIFICATION NUMB					
C C00025395	3. IS T REP		N) OR	AMEN (A)	DED
4. TYPE OF REPORT (b) (Choose One) (a) Quarterly Reports:	b) Monthly Report Due On: Mar 20		May 20 (M5) Jun 20 (M6)	Aug 20 Sep 20	(Non-Election Year Only)
April 15	Apr 20	(M4)	Jul 20 (M7)	Oct 20 (
Quarterly Report (Q1) X July 15 Quarterly Report (Q2)	(c) 12-Day PRE-Election	Primary (12P		General (120	
October 15 Quarterly Report (Q3)	Report for the:	Convention (·	Special (12S	
January 31 Year-End Report (YE)	Election o				in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day POST -Election Report for the:	General (300	à)	Runoff (30R)	Special (30S)
Termination Report (TER)	Election o	n /		Y Y Y Y Y	in the State of
5. Covering Period 04	01 / Y Y Y Y 01 2015	through	06	/ D D / Y 30	2015
I certify that I have examined this Re		knowledge and t	pelief it is true	e, correct and co	omplete.
Type or Print Name of Treasurer Jo	oseph Tarry				
Signature of Treasurer	ry	[Electronically	Filed] Da	ate 07	08 / Y Y Y Y 08 2015
NOTE: Submission of false, erroneous,	or incomplete information m	ay subject the pers	son signing thi	s Report to the p	enalties of 2 U.S.C. §437g.
Office Use Only				I	FEC FORM 3X Rev. 12/2004

PAGE 1 / 10

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

Page 2

Write or Type Committee Name

FEC Form 3X (Rev. 02/2003)

Public Service Company of New Mexico Responsible Citizens Group

R	eport Covering the Period: From:	04 01 / Y Y Y Y 2015 T	o: 06 / 0 / Y Y Y Y Y 2015
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2015		15504.46
	(b) Cash on Hand at Beginning of Reporting Period	14283.89	
	(c) Total Receipts (from Line 19)	6663.87	12443.30
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	20947.76	27947.76
7.	Total Disbursements (from Line 31)	1000.00	8000.00
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	19947.76	19947.76
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

X

DETAILED SUMMARY PAGE

of Receipts

Page 3

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Public Service Company of New Mexico Responsible Citizens Group

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
. Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees		
(i) Itemized (use Schedule A)	1963.86	2965.60
		0.177.70
(ii) Unitemized	4700.01	9477.70
(iii) TOTAL (add	6663.87	12443.30
Lines 11(a)(i) and (ii)▶	7 7 7 7 0003.07	7 7 7
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees		
(such as PACs)	0.00	0.00
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry		12442.20
Totals to Line 33, page 5)▶	6663.87	12443.30
2. Transfers From Affiliated/Other		0.00
Party Committees	0.00	0.00
3. All Loans Received	0.00	0.00
Lean Denovmente Dessived	0.00	0.00
Loan Repayments Received Offsets To Operating Expenditures		0.00
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	0.00	0.00
6. Refunds of Contributions Made	7 7	
to Federal Candidates and Other		
Political Committees	0.00	0.00
7. Other Federal Receipts		
(Dividends, Interest, etc.)	0.00	0.00
 Transfers from Non-Federal and Levin Funds 	, , , , , , , , , , , , , , , , , , , ,	
(a) Non-Federal Account		
(from Schedule H3)	0.00	0.00
ΓΓ	0.00	
(b) Levin Funds (from Schedule H5)	7 7 7	0.00
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
	7 7 7	
o. Total Receipts (add Lines 11(d),		
12, 13, 14, 15, 16, 17, and 18(c))	6663.87	12443.30
. Total Federal Receipts		
(subtract Line 18(c) from Line 19) ►	6663.87	12443.30

I

DETAILED SUMMARY PAGE

		COLUMN A	Page 4
	II. Disbursements	Total This Period	COLUMN B Calendar Year-to-Date
. Op (a)	perating Expenditures: Allocated Federal/Non-Federal		
	Activity (from Schedule H4) (i) Federal Share	0.00	0.0
	(ii) Non-Federal Share	0.00	0.00
(b)	Other Federal Operating Expenditures	0.00	0.00
(c)			
_	(add 21(a)(i), (a)(ii), and (b)) >	0.00	0.00
	ansfers to Affiliated/Other Party	0.00	0.00
Cc Fe	ontributions to deral Candidates/Committees d Other Political Committees	1000.00	9000.00
	d Other Political Committees	1000.00	8000.00
(นร	se Schedule E) pordinated Party Expenditures	0.00	0.0
(2 (us	U.S.C. §441a(d)) se Schedule F)	0.00	0.00
Lo	an Repayments Made	0.00	0.00
	ans Made funds of Contributions To:	0.00	0.00
	Individuals/Persons Other Than Political Committees	0.00	0.00
(b) (c)	, , , , , , , , , , , , , , , , , , , ,	0.00	0.00
()	(such as PACs)	0.00	0.0
(d)	Total Contribution Refunds		
(u)	(add Lines 28(a), (b), and (c))►	0.00	0.00
Ot	her Disbursements	0.00	0.00
01		7 7 7	7 7 7
	deral Election Activity (2 U.S.C. §431(20))		
(a)	Allocated Federal Election Activity (from Schedule H6)		
	(i) Federal Share	0.00	0.00
	(ii) "Levin" Share	0.00	0.00
(b)			
(α)	With Federal Funds Total Federal Election Activity (add	0.00	0.0
(C)	Lines $30(a)(i)$, $30(a)(ii)$ and $30(b)) \blacktriangleright$	0.00	0.00
To	tal Disbursements (add Lines 21(c), 22,		
	, 24, 25, 26, 27, 28(d), 29 and 30(c)).	1000.00	8000.0
Te	tal Federal Disbursements		
	ubtract Line 21(a)(ii) and Line 30(a)(ii)		
fro	m Line 31)	1000.00	8000.00

L

DETAILED SUMMARY PAGE

of Disbursements

II. Net Contributions/Operating Ex- penditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date				
. Total Contributions (other than loans) (from Line 11(d), page 3)	6663.87	12443.30				
. Total Contribution Refunds (from Line 28(d))	0.00	0.00				
. Net Contributions (other than loans) (subtract Line 34 from Line 33)	6663.87	12443.30				
Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))►	0.00	0.00				
Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00				
Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00				

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER:

(check only one)

PAGE 6 OF

10

			Detailed Summary Page		11a		11b	11c		12		
					13		14	15		16		7
An or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any pe ddress of any political committee	erson fo to soli	or the icit cor	purp ntrib	oose of utions f	soliciting from such	cor 1 CO	ntribut	ions ee.	
\backslash	NAME OF COMMITTEE (In Full)		-	_								
	Public Service Company of New	Mexico	Responsible Citizens (Group	2							
Α.	Full Name (Last, First, Middle Initial) Patricia Collawn			C	ate of	Re	ceipt					
	Mailing Address Alvarado Square				м м 06	/	30) / Y	Y 20	ү 015	Y	
	City	State	Zip Code				-	SA11AI.				
	Albuquerque	NM	87158	A	mount	of	Each F	leceipt th	is P	eriod		
	FEC ID number of contributing federal political committee.	С				_	,	7	_	336	56	
	Name of Employer	Occupation		- Er	nploye	e P	ayroll C	ontributio	ns			
	PNM	Chairman &	CEO									
	Receipt For:	Aggregate	Year-to-Date V									
	Primary General Other (specify) ▼		336.56									
В.	Full Name (Last, First, Middle Initial) Ronald Darnell				ate of	Re	ceipt					
	Mailing Address Alvarado Square				м м 06	/	30) / Y	ү 20) 15	Y	
	City	State	Zip Code		Transa	acti	on ID :	SA11AI.1	1283	36		
	Albuquerque	NM	87158	A	mount	of	Each F	Receipt th	is P	eriod		
	FEC ID number of contributing federal political committee.	С					,		_	140.	00	
	Name of Employer	Occupation		- En	nploye	e Pa	ayroll C	ontributio	ns			
	PNM	VP, Regulat	tory Affairs									
	Receipt For:	Aggregate	Year-to-Date 🔻									
	Primary General Other (specify) ▼		, 260.00									
C.	Full Name (Last, First, Middle Initial)				ate of	Re	ceipt					
	Mailing Address Alvarado Square				м м 06	/	30)15	Y	
	City	State NM	Zip Code					SA11AI.				
	Albuquerque	INIVI	87158	A	mount	of	Each F	leceipt th	is P	eriod		
	FEC ID number of contributing federal political committee.	С			malayo			ontributio	_	271	.25	
	Name of Employer	Occupation			прюуе	e P	ayroli C	ontributio	ns			
	PNM	SVP & CFC)									
	Receipt For:	Aggregate	Year-to-Date V									
	Primary General		271.25									
	Other (specify)		7									
s	UBTOTAL of Receipts This Page (optional)		······				7		_	747.	81]
т	OTAL This Period (last page this line number c	only)	•••••	. [,	7				

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 7 OF

10

••			Detailed Summary Page		< 11a		11b	11c		12		
Ar	ny information copied from such Reports and Sta	atements ma	ay not be sold or used by any p	erson	13 for the	 puri	14 pose of	15 soliciting		16 ntribut		17
	for commercial purposes, other than using the											
\backslash	NAME OF COMMITTEE (In Full)			_								
	Public Service Company of New	Mexico	Responsible Citizens (Grou	ıp							
Α.	Full Name (Last, First, Middle Initial) Thomas Fallgren				Date of	Re	eceipt					
	Mailing Address Alvarado Square				м м 06	/	30) / Y		ү 015	Y	
	City	State	Zip Code		Trans	acti	ion ID :	SA11AI.	128	48		
	Albuquerque	NM	87158	_	Amount	of	Each R	leceipt th	is P	'eriod		
	FEC ID number of contributing federal political committee.	С					7	7	_	124.		
	Name of Employer	Occupation	1		Employe	e P	ayroll C	ontributio	ns			
	PNM	Director, Pla	ant Management II									
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General			11								
	Other (specify)		228.15	4								
B	Full Name (Last, First, Middle Initial)				Date of	Bo	oceint					
υ.	Mailing Address Alvarado Square			-		110			V	Y	V	
	Avaiado Square				06	ľ	30			015	1	
	City	State	Zip Code		Trans	acti	ion ID :	SA11AI.1				
	Albuquerque	NM	87158		Amount	of	Each R	leceipt th	is P	'eriod		
	FEC ID number of contributing federal political committee.	С					, .		_	122.	50	
	Name of Employer	Occupation		— E	mploye	e Pa	ayroll Co	ontributio	ns			
	PNM	VP, Custom	ner Service									
	Receipt For:		Year-to-Date ▼									
	Primary General	, iggi eguie		11								
	Other (specify) V		, 227.50	1								
с.	Full Name (Last, First, Middle Initial) Aubrey Johnson				Date of	Re	eceipt					
	Mailing Address Alvarado Square				м м 06	/	30) / Y)15	Y	
	City	State	Zip Code			act		SA11AL				
	Albuquerque	NM	87158		Amount	of	Each R	leceipt th	is F	'eriod		_
	FEC ID number of contributing federal political committee.	С					7			131.	.25	
	Name of Employer	Occupation	I	-								
	PNM	VP, PNM N	M Operations									
	Receipt For:		Year-to-Date ▼									
	Primary General	riggrogato		11								
	Other (specify)	L	243.75									
s	UBTOTAL of Receipts This Page (optional)			<u> </u>			7	5	-	378.4	40	ļ
												10.0

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

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER:

(check only one)

PAGE

8 OF

10

			Detailed Summary Page		11a		11b	11c		12		
					13		14	15		16		7
An or	y information copied from such Reports and S for commercial purposes, other than using the	tatements ma name and a	ay not be sold or used by any pe ddress of any political committee	erson fo e to soli	or the icit cor	purp ntrib	oose of utions f	soliciting from such	cor 1 CO	ntribut mmitt	ions ee.	
\backslash	NAME OF COMMITTEE (In Full)			_								
	Public Service Company of New	/ Mexico	Responsible Citizens (Group	о С							
Α.	Full Name (Last, First, Middle Initial) Mr. Thomas Sategna				ate of	Re	ceipt					
	Mailing Address Alvarado Square				м м 06	/	30) / Y	Y 20	ү 015	Y	
	City	State	Zip Code		Trans	acti	on ID :	SA11AI.	129	55		
	Albuquerque	NM	87158	A	mount	of	Each F	Receipt th	is P	'eriod		
	FEC ID number of contributing federal political committee.	С					7	7	_	157	50	
	Name of Employer	Occupation		- Er	nploye	e P	ayroll C	ontributio	ns			
	PNM	VP & Corpo	orate Controller									
	Receipt For:	Aggregate	Year-to-Date V									
	Primary General Other (specify) ▼		292.50									
B.	Full Name (Last, First, Middle Initial) Donald Schwanz				ate of	Re	ceipt					
	Mailing Address 9964 E. Sienna Hills Drive				м м 04	/	01) / Y	ү 20) 15	Y	
	City	State	Zip Code		Transa	acti	on ID :	SA11AI.1	1300)7		
	Scottsdale	AZ	85262	A	mount	of	Each F	Receipt th	is P	eriod		
	FEC ID number of contributing federal political committee.	С				_	7	,	_	250	00	1
	Name of Employer PNM Board of Directors	Occupation Retired		— Bo	ard Me	emb	er Cont	tributtion				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00									
с.	Full Name (Last, First, Middle Initial) Ronald Talbot				ate of	Re	ceipt					
	Mailing Address Alvarado Square				м м 06	/	30)15	Y	
	City	State	Zip Code		Trans	acti	ion ID :	SA11AI.	129	72		
	Albuquerque	NM	87158	A	mount	of	Each F	Receipt th	is P	eriod		
	FEC ID number of contributing federal political committee.	С					,	,	_	269	.22	1
	Name of Employer	Occupation			mploye	e P	ayroll C	ontributio	ns			
	PNM	SVP, Chief	Operations Officer									
	Receipt For:	Aggregate	Year-to-Date 🔻									
	Primary General		499.98									
	Other (specify)		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1									
s	UBTOTAL of Receipts This Page (optional)						7		_	676.	72	
т	OTAL This Period (last page this line number	only)		. [,					

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

FOR LINE NUMBER:

(check only one)

PAGE 9 OF

10

ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, oth	her than using the name and a	ay not be sold or used by any p ddress of any political committe	berson for the purpose of soliciting contributions be to solicit contributions from such committee.
NAME OF COMMITTEE (In Public Service Com		Responsible Citizens	Group
Full Name (Last, First, Middle James Walker Mailing Address Alvarado Sq			Date of Receipt
City Albuquerque	State NM	Zip Code 87158	Transaction ID : SA11AI.12989 Amount of Each Receipt this Period
FEC ID number of contributin federal political committee.	ng C		160.93
Name of Employer PNM Receipt For: Primary Gene Other (specify) v			Employee Payroll Contributions
Full Name (Last, First, Middle Mailing Address City	e Initial) State	Zip Code	Date of Receipt
FEC ID number of contributin federal political committee. Name of Employer			Amount of Each Receipt this Period
Receipt For: Primary Gene Other (specify) ▼		Year-to-Date V]
Full Name (Last, First, Middle	e Initial)		Date of Receipt
Mailing Address	State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributin federal political committee. Name of Employer	ng C Occupation		
Receipt For: Primary Gene Other (specify) ▼	Aggregate	Year-to-Date ▼]
SUBTOTAL of Receipts This F	Page (optional)		160.93
TOTAL This Period (last page	this line number only)		1963.86

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 10 OF 10					
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)					
	Detailed Summary Page	210	22 X 23 24 25 26 28a 28b 28c 29 30b					
Any information copied from such Reports and Stater or for commercial purposes, other than using the nam								
Public Service Company of New M	lexico Responsible C	Citizens Gro	oup					
Full Name (Last, First, Middle Initial)			Date of Disbursement					
A. MICHELLE LUJAN GRISHAM								
Mailing Address 7240 Evans Mill Road			04 01 2015					
City S McLean	State Zip Code VA 22101		Transaction ID : SB23.13012					
Purpose of Disbursement	22101							
Campaign Donation			Amount of Each Disbursement this Period					
Candidate Name MICHELLE LUJAN GRISHAM		Category/ Type	1000.00					
	ment For: 2016	Турс						
	Primary General							
State: NM District: 01	Other (specify)							
Full Name (Last, First, Middle Initial)								
В.			Date of Disbursement					
Mailing Address								
City	City State Zip Code							
Purpose of Disbursement								
			Amount of Each Disbursement this Period					
Candidate Name		Category/ Type						
Office Sought: House Disburser								
President	Primary General Other (specify)							
State: District:								
Full Name (Last, First, Middle Initial)								
C.			Date of Disbursement					
Mailing Address								
City	State Zip Code							
Purpose of Disbursement								
Candidate Name		Category/	Amount of Each Disbursement this Period					
Office Sought: House Disburser	Office Sought: House Disbursement For:							
Office Sought: House Disburser Senate	Primary General							
President	Other (specify)							
State: District:								
SUBTOTAL of Disbursements This Page (optional)		••••••	1000.00					
TOTAL This Period (last page this line number only))	••••••	1000.00					