

**FEC  
FORM 3X**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.   
Public Service Company of New Mexico Responsible Citizens Group

ADDRESS (number and street)   
MS 2701  
 Check if different than previously reported. (ACC)  
   -

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

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

5. Covering Period  /  /  through  /  /

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 Mr. Thomas Sategna

Signature of Treasurer Mr. Thomas Sategna [Electronically Filed] Date  /  /

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**Public Service Company of New Mexico Responsible Citizens Group**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2012"/>	<input type="text" value="20944.18"/>	<input type="text" value="20944.18"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="16481.36"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="3916.51"/>	<input type="text" value="11453.69"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="20397.87"/>	<input type="text" value="32397.87"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="14000.00"/>	<input type="text" value="26000.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="6397.87"/>	<input type="text" value="6397.87"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="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

**Public Service Company of New Mexico Responsible Citizens Group**

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

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).....	1981.80	4294.99
(ii) Unitemized .....	1934.71	7158.70
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	3916.51	11453.69
(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 Totals to Line 33, page 5) .....	3916.51	11453.69
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
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).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	3916.51	11453.69
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	3916.51	11453.69

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	14000.00	26000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	14000.00	26000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	14000.00	26000.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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) .....	3916.51	11453.69
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	3916.51	11453.69
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ▶	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....▶	0.00	0.00

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

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)  
**Public Service Company of New Mexico Responsible Citizens Group**

**A. Ernest C'de Baca**  
Full Name (Last, First, Middle Initial)

Mailing Address Alvarado Square

City Albuquerque State NM Zip Code 87158

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

Name of Employer PNM Occupation Vi ce President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **243.75**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 30 / 2012**

**Transaction ID : SA11AI.9855**

Amount of Each Receipt this Period  
**97.50**

Payroll Deduction

**B. Patricia Collawn**  
Full Name (Last, First, Middle Initial)

Mailing Address Alvarado Square

City Albuquerque State NM Zip Code 87158

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

Name of Employer PNM Occupation President & Chief Operating Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **913.52**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 30 / 2012**

**Transaction ID : SA11AI.9857**

Amount of Each Receipt this Period  
**288.48**

Payroll Deduction

**C. Mary Collins**  
Full Name (Last, First, Middle Initial)

Mailing Address Alvarado Square

City Albuquerque State NM Zip Code 87158

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

Name of Employer PNM Occupation Director, Regulatory Affairs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **282.15**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 30 / 2012**

**Transaction ID : SA11AI.9858**

Amount of Each Receipt this Period  
**89.10**

Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **475.08**

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

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NAME OF COMMITTEE (In Full)  
**Public Service Company of New Mexico Responsible Citizens Group**

**A. Michael D'Antonio**  
Full Name (Last, First, Middle Initial)

Mailing Address Alvarado Square

City Albuquerque State NM Zip Code 87158

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

Name of Employer PNM Occupation Admin. gov. Affairs Sr.

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **283.67**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2012  
**Transaction ID : SA11AI.9862**

Amount of Each Receipt this Period  
**89.58**

Payroll Deduction

**B. Ronald Darnell**  
Full Name (Last, First, Middle Initial)

Mailing Address Alvarado Square

City Albuquerque State NM Zip Code 87158

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

Name of Employer PNM Occupation VP, Regulatory Affairs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **369.24**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2012  
**Transaction ID : SA11AI.9863**

Amount of Each Receipt this Period  
**120.00**

Payroll Deduction

**C. Charles Eldred**  
Full Name (Last, First, Middle Initial)

Mailing Address Alvarado Square

City Albuquerque State NM Zip Code 87158

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

Name of Employer PNM Occupation EVP, CFO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **669.45**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2012  
**Transaction ID : SA11AI.9868**

Amount of Each Receipt this Period  
**232.50**

Payroll Deduction

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>442.08</b>
<b>TOTAL</b> 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 8 OF 12
<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)  
**Public Service Company of New Mexico Responsible Citizens Group**

Full Name (Last, First, Middle Initial) <b>A. Terry Horn</b>		Date of Receipt MM / DD / YYYY 09 / 30 / 2012 <b>Transaction ID : SA11AI.9888</b>
Mailing Address Alvarado Square		Amount of Each Receipt this Period 105.00
City Albuquerque	State NM	Zip Code 87158
FEC ID number of contributing federal political committee. C		Payroll Deduction
Name of Employer PNM	Occupation VP, Customer Service	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 309.24	

Full Name (Last, First, Middle Initial) <b>B. Roy Jackson</b>		Date of Receipt MM / DD / YYYY 09 / 30 / 2012 <b>Transaction ID : SA11AI.9889</b>
Mailing Address Alvarado Square		Amount of Each Receipt this Period 70.14
City Albuquerque	State NM	Zip Code 87158
FEC ID number of contributing federal political committee. C		Payroll Deduction
Name of Employer PNM	Occupation Admin.Gov. Affairs Sr.	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 222.11	

Full Name (Last, First, Middle Initial) <b>C. Sayuri Yamada Matthews</b>		Date of Receipt MM / DD / YYYY 09 / 30 / 2012 <b>Transaction ID : SA11AI.9901</b>
Mailing Address Alvarado Square		Amount of Each Receipt this Period 70.80
City Albuquerque	State NM	Zip Code 87158
FEC ID number of contributing federal political committee. C		Payroll Deduction
Name of Employer PNM	Occupation Admin. Gov. Affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 224.20	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	245.94
<b>TOTAL</b> 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 9 OF 12
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Public Service Company of New Mexico Responsible Citizens Group**

**A. Mr. Thomas Sategna**  
Full Name (Last, First, Middle Initial)

Mailing Address Alvarado Square

City Albuquerque State NM Zip Code 87158

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

Name of Employer PNM Occupation VP & Corporate Controller

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **397.50**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2012

**Transaction ID : SA11AI.9939**

Amount of Each Receipt this Period  
**135.00**

Payroll Deduction

**B. Gary Stone**  
Full Name (Last, First, Middle Initial)

Mailing Address Alvarado Square

City Albuquerque State NM Zip Code 87158

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

Name of Employer PNM Occupation VP, NM

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **837.50**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2012

**Transaction ID : SA11AI.9951**

Amount of Each Receipt this Period  
**315.00**

Payroll Deduction

**C. Ronald Talbot**  
Full Name (Last, First, Middle Initial)

Mailing Address Alvarado Square

City Albuquerque State NM Zip Code 87158

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

Name of Employer PNM Occupation SVP, Chief Operations Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **576.90**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2012

**Transaction ID : SA11AI.9952**

Amount of Each Receipt this Period  
**230.76**

Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **680.76**

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

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

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

FOR LINE NUMBER: PAGE 10 OF 12  
(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)  
**Public Service Company of New Mexico Responsible Citizens Group**

**A. James Walker**  
Full Name (Last, First, Middle Initial)  
Mailing Address Alvarado Square  
City Albuquerque State NM Zip Code 87158  
FEC ID number of contributing federal political committee. C  
Name of Employer PNM Occupation VP Texas Operations  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 436.81

Date of Receipt 09 / 30 / 2012  
Transaction ID : SA11AI.9963  
Amount of Each Receipt this Period 137.94  
Payroll Deduction

**B.**  
Full Name (Last, First, Middle Initial)  
Mailing Address  
City State Zip Code  
FEC ID number of contributing federal political committee. C  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼

Date of Receipt  
Amount of Each Receipt this Period

**C.**  
Full Name (Last, First, Middle Initial)  
Mailing Address  
City State Zip Code  
FEC ID number of contributing federal political committee. C  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼

Date of Receipt  
Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	137.94
<b>TOTAL</b> This Period (last page this line number only).....▶	1981.80

**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 checked="" 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)

**Public Service Company of New Mexico Responsible Citizens Group**

Full Name (Last, First, Middle Initial)

**A. COMMITTEE TO ELECT MICHELLE LUJAN GRISHAM**

Mailing Address 2015 DIETZ PL NW

City ALBUQUERQUE State NM Zip Code 87107

Purpose of Disbursement  
Contribution

012

Candidate Name

**COMMITTEE TO ELECT MICHELLE LUJAN GRISHAM**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: NM District: 01

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
07 / 11 / 2012

**Transaction ID : SB23.9991**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**B. JANICE ARNOLD-JONES FOR CONGRESS**

Mailing Address PO BOX 20460

City ALBUQUERQUE State NM Zip Code 87154

Purpose of Disbursement  
Contribution

012

Candidate Name

**JANICE ARNOLD-JONES FOR CONGRESS**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: NM District: 01

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
07 / 11 / 2012

**Transaction ID : SB23.9973**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**C. HEINRICH MARTIN**

Mailing Address 2118 CENTRAL AVE. SE, #71

City ALBUQUERQUE State NM Zip Code 87106

Purpose of Disbursement  
Contribution

012

Candidate Name

**HEINRICH MARTIN**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: NM District: 01

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
07 / 11 / 2012

**Transaction ID : SB23.9980**

Amount of Each Disbursement this Period

5000.00

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

10000.00

**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 checked="" 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)

**Public Service Company of New Mexico Responsible Citizens Group**

Full Name (Last, First, Middle Initial)

**A. WILSON FOR SENATE**

Mailing Address PO BOX 10248

City ALBUQUERQUE State NM Zip Code 87184

Purpose of Disbursement  
Contribution

012

Category/  
Type

Candidate Name

**WILSON FOR SENATE**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	11	/	2012

Transaction ID : SB23.9981

Amount of Each Disbursement this Period

4000.00
---------

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

--

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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

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

4000.00
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14000.00
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