PAGE 1 / 15

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

| FORM 3 | | Authorized Co | | | | Office Use Only |
|----------------------------|----------------------------|----------------------|-------------------------|------------------|------------------|---------------------------------|
| NAME OF COMMITTEE (in | TYPE OR PR | · | xample: If typin | g, type | 12FE4M5 | |
| GRIEGO FOR | CONGRESS | | | | | ı |
| | | | | | | |
| | | | | | | |
| ADDRESS (number an | * | 352 | | | | |
| Check if diff | ferent 87119 | | | | | |
| than previous reported. (A | | RQUE | | | NM L | 87119 |
| 2. FEC IDENTIFIC | CATION NUMBER | CITY ▲ | | ; | STATE A | ZIP CODE A STATE ▼ DISTRICT |
| C C0049585 | 3 | 3. IS THIS REPORT | NEW (N) | OR | × AMEND (A) | |
| 4. TYPE OF REI | PORT (Choose One) | (b) 10 Day DD | E Floation Dona | ut for the | | |
| (a) Quarterly Re | eports: | (b) 12-Day PR | E -Election Repo | | 1 | |
| April 15 | Quarterly Report (Q1) | | Primary (12P |) | General (1 | 2G) Runoff (12R) |
| July 15 | Quarterly Report (Q2) | | Convention (| 12C) | Special (1 | 2S) |
| | 15 Quarterly Report (Q3) | Election o | n | D D / | Y " Y " Y " Y | in the State of |
| January | 31 Year-End Report (YE) | (c) 30-Day PC | ST-Election Rep | port for the: | | |
| | | | General (300 | i) | Runoff (30 | Special (30S) |
| Termina | tion Report (TER) | Election o | n M M M | D D / | Y " Y " Y | in the State of |
| 5. Covering Period | M M / D D D 01 | / Y Y Y Y 2012 | through | M M 09 | 30 | Y Y Y Y 2012 |
| I certify that I have e. | xamined this Report and | I to the best of my | knowledge and | belief it is tru | ue, correct and | d complete. |
| Type or Print Name of | of Treasurer Susan Var | nce | | | | |
| Signature of Treasure | sr Susan Vance | | [Electronically | Filed] D | ate 07 | / D D / Y Y Y Y 15 2013 |
| NOTE: Submission of | false, erroneous, or incom | plete information ma | / subject the per | son signing t | his Report to th | ne penalties of 2 U.S.C. §437g. |
| Office Use Only | | | | | | FEC FORM 3 (Revised 02/2003) |

SUMMARY PAGE

of Receipts and Disbursements

PAGE 2 / 15

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

GRIEGO FOR CONGRESS

07 09 30 2012 01 2012 Report Covering the Period: From: To: **COLUMN B COLUMN A Election Cycle-to-Date** This Period Net Contributions (other than loans) **Total Contributions** (a) 0.00 1102827.97 (other than loans) (from Line 11(e)) (b) Total Contribution Refunds 3000.00 16681.81 (from Line 20(d)) (c) Net Contributions (other than loans) -3000.00 1086146.16 (subtract Line 6(b) from Line 6(a)) Net Operating Expenditures (a) Total Operating Expenditures 1890.30 1083522.75 (from Line 17) (b) Total Offsets to Operating 0.00 577.05 Expenditures (from Line 14)..... (c) Net Operating Expenditures 1890.30 1082945.70 (subtract Line 7(b) from Line 7(a)) Cash on Hand at Close of 270.91 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 1700.00 Schedule C and/or Schedule D).....

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

FEC Form 3 (Revised 12/2003)

PAGE 3 / 15

| | | , | |
|----------|------|-----------|------|
| Write or | Type | Committee | Name |

GRIEGO FOR CONGRESS

| I. RECEIPTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|---|-------------------------------|------------------------------------|
| . CONTRIBUTIONS (other than loans) FRO | OM: | |
| (a) Individuals/Persons Other Than | | |
| Political Committees | 0.00 | 513964.63 |
| (i) Itemized (use Schedule A) | 9 9 9 | 9 9 9 |
| (ii) Unitemized | 0.00 | 510474.92 |
| (iii) TOTAL of contributions from individuals | 0.00 | 1024439.55 |
| nom muividuais | | 7 |
| (b) Political Party Committees | 0.00 | 72.27 |
| (c) Other Political Committees (such as PACs) | 0.00 | 78316.15 |
| (Such as TAOs) | | |
| (d) The Candidate | 0.00 | 0.00 |
| (e) TOTAL CONTRIBUTIONS (other than loans) | | |
| (add Lines 11(a)(iii), (b), (c), and (d)) | 0.00 | 1102827.97 |
| 2. TRANSFERS FROM OTHER | | |
| AUTHORIZED COMMITTEES | 0.00 | 0.00 |
| B. LOANS: | _ | |
| (a) Made or Guaranteed by the | 1700.00 | 4700.00 |
| Candidate | 1700.00 | 1700.00 |
| (b) All Other Loans | 0.00 | 0.00 |
| (c) TOTAL LOANS | 1700.00 | 1700.00 |
| (add Lines 13(a) and (b)) | | 1700.00 |
| I. OFFSETS TO OPERATING | | |
| EXPENDITURES (Refunds, Rebates, etc.) | 0.00 | 577.05 |
| (Horariae, Hosares, etc.) | | 9 9 |
| 5. OTHER RECEIPTS | 0.00 | 0.00 |
| (Dividends, Interest, etc.) | | 0.00 |
| 5. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) | 1700.00 | 4405405.00 |
| (Carry Total to Line 24, page 4) | 1700.00 | 1105105.02 |

DETAILED SUMMARY PAGE

FEC Form 3 (Revised 02/2003)

of Disbursements

PAGE 4 / 15

| | II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|----------|---|-------------------------------|------------------------------------|
| 17. | OPERATING EXPENDITURES | 1890.30 | 1083522.75 |
| 18. | TRANSFERS TO OTHER AUTHORIZED COMMITTEES | 0.00 | 0.00 |
| 19. | LOAN REPAYMENTS: | | |
| | (a) Of Loans Made or Guaranteed by the Candidate | 0.00 | 0.00 |
| | (b) Of All Other Loans | 0.00 | 0.00 |
| | (c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)) | 0.00 | 0.00 |
| 20. | REFUNDS OF CONTRIBUTIONS TO: | | |
| | (a) Individuals/Persons Other Than Political Committees | 3000.00 | 14681.81 |
| | (b) Political Party Committees | 0.00 | 0.00 |
| | (c) Other Political Committees (such as PACs) | 0.00 | 2000.00 |
| | (d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)) | 3000.00 | 16681.81 |
| <u> </u> | OTHER DISBURSEMENTS | 4250.00 | 4250.00 |
| 22. | TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) | 9140.30 | 1104454.56 |
| | III. CASH SU | UMMARY | |
| 23. | CASH ON HAND AT BEGINNING OF REPO | PRTING PERIOD | 7711.21 |
| 24 | TOTAL RECEIPTS THIS PERIOD (from Line | 16, page 3) | 1700.00 |
| 25. | SUBTOTAL (add Line 23 and Line 24) | | 9411.21 |
| 26. | TOTAL DISBURSEMENTS THIS PERIOD (fro | om Line 22) | 9140.30 |
| 27. | CASH ON HAND AT CLOSE OF REPORTIN (subtract Line 26 from Line 25) | IG PERIOD | 270.91 |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| lmage# 1394 | 11126959 | _ | | |
|---|--|--------------------------------------|---|--|
| | JLE A (FEC Form 3) D RECEIPTS | | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 5 OF 15 (check only one) 11a 11b 11c 11d 11d 12 X 13a 13b 14 15 |
| or for comm | | | | erson for the purpose of soliciting contributions to solicit contributions from such committee. |
| Full Nam Eric G Mailing A City Albuque FEC ID r federal p Name of | e (Last, First, Middle Initial) riego Address 1003 Santa Fe SW rque number of contributing olitical committee. Employer | State NM C Occupation Election Cy | Zip Code 87102 Icle-to-Date | Date of Receipt M M J 2012 Transaction ID: SA13A.9055 Amount of Each Receipt this Period 1200.00 |
| Eric G Mailing A City Albuque FEC ID r federal p Name of | rque number of contributing olitical committee. Employer | State NM C Occupation Election Cy | | Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| Full Nam C. Mailing A | e (Last, First, Middle Initial) | State | Zip Code | Date of Receipt |

FEC ID number of contributing C federal political committee. Name of Employer Occupat Receipt For: Election Primary General Other (specify) Full Name (Last, First, Middle Initial) Eric Griego Mailing Address 1003 Santa Fe SW City State Albuquerque NM FEC ID number of contributing C federal political committee. Name of Employer Occupat Receipt For: Election Primary General Other (specify) Full Name (Last, First, Middle Initial) Mailing Address City State FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Receipt For: Election Cycle-to-Date Primary General Other (specify) 1700.00 SUBTOTAL of Receipts This Page (optional)..... 1700.00 TOTAL This Period (last page this line number only).....

1mage# 13941126960 PAGE 6 / 15

: 97 'A = G7 9 @ 5 B9 CI G'H9 LH'F9 @ 5 H98 'HC'5 'F9 DCFHZ'G7 < 98 I @ 'CF' + H9 A = N5 H+ CB

Form/Schedule: SA13A Transaction ID: SA13A.9055

(Current loan amount of 101.91 from a balance of 101.91 has been forgiven)

Form/Schedule: Transaction ID:

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

| | EOD III | .IE | NIIMDE | D. | | РΔ | GE | 7 | OF | 15 |
|--|---------------------|-----|--------|------|-----|----|----|-----|-------|--------|
| Use separate schedule(s) for each category of the | FOR LINE (check onl | | | | 18 | | | 19a | [| 19b |
| Detailed Summary Page | | | 20a | | 20b | | | 20c | Ī | 21 |
| y not be sold or used by any ddress of any political commit | • | | | | | | _ | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |

| | | | | Detailed Suffiffia | iy i age | | | 20a | <u> </u> 2 | 20b | 20c | 21 | | | |
|--|---|----------------------------------|--|--------------------|----------------------------------|--------------------------------------|----------------------------|-----------|-------------|-----------|---------------------|--------|--|--|--|
| | | | ts and Statements makes and the same and a | | | | | the purp | ose c | of solici | ting contrib | utions | | | |
| \rangle | | R CONGRES | S | | | | | | | | | | | | |
| ۹. | Full Name (Last, F Comcast | irst, Middle Initial) | | | Date of Disbursement | | | | | | | Y | | | |
| Mailing Address 4611 Montbel Place NE City State Zip Code Albuquerque NM 87107 Purpose of Disbursement Phones/Internet | | | | | | | 09 12 2012 | | | | | | | | |
| | | | | | Amount of Each Disbursement this | | | | | | ment this P | eriod | | | |
| | | | | | Transaction ID : SB17.9059 | | | | | 337. | 08 | | | | |
| | Candidate Name | | | | Category/ Type | | 1150 | otion ib | . 05 | | | | | | |
| | Office Sought: | House Senate President District: | Disbursement For: X Primary Other (sp | General | , , , , , , | | | | | | | | | | |
| 3. | Full Name (Last, F Audrey Edm | irst, Middle Initial) onds | | | | | | of Disbu | ursem | | YYY | Y | | | |
| | Mailing Address 5 | 5905 48th Ave. | | | | _ L | 07 | 7 | 15 | | 2012 | | | | |
| | City Riverdale | | State MD | Zip Code 20737 | | _ A | mou | unt of Ea | ach D | isburse | ment this P | - | | | |
| Purpose of Disbursement Payroll Candidate Name | | | | Category/ | | 350.00 Transaction ID : SB17.9060 | | | | | 00 | | | | |
| | Office Sought: | House Senate President District: | Disbursement For: Primary Other (sp | General | Туре | | | | | | | | | | |
| | Full Name (Last, F | irst, Middle Initial) | | | | | \ | of Diah | | | | | | | |
| | Audrey Edm | | | | | _ ' | | of Disbu | ursem | | Y Y Y | Y | | | |
| | Mailing Address 5 | 905 48th Ave. | | | | | 30 | 3 | 15 | | 2012 | | | | |
| | City State Zip Code Riverdale MD 20737 Purpose of Disbursement | | | | | _ A | mou | unt of Ea | ach D | isburse | ment this P 250. | - | | | |
| | | | | | Category/ Type | | Transaction ID : SB17.9061 | | | | | | | | |
| | Office Sought: | House Senate President District: | Disbursement For: Primary Other (sp | General | 1,190 | | | | | | | | | | |
| _ | | | (antional) | | | - | - | | | | 937. | 08 | | | |
| | | | e (optional) | | | - | Ŧ | 7 | ÷ | | | Ħ | | | |
| T | UIAL This Period (| last page this line r | umber only) | | | | | - 1 | | | | | | | |

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

| | FOR LINE | NUMBER | ₹: | PAGE | 8 | OF | 15 |
|---|-----------|---------|----|------|-----|----|-----|
| Use separate schedule(s) | (check on | ly one) | | | | | |
| for each category of the Detailed Summary Page | X | 17 | 18 | | 19a | | 19b |
| Detailed Suffillary Fage | | 20a | 20 | b | 20c | | 21 |
| | | | | | | | |

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) GRIEGO FOR CONGRESS Full Name (Last, First, Middle Initial) Date of Disbursement A. Zachary Heinselman 2012 Mailing Address 611 Lead Ave SW, Apt. 429 15 City State Zip Code Amount of Each Disbursement this Period NM Albuquerque 87102-3167 Purpose of Disbursement 375.00 Payroll Transaction ID: SB17.9062 Candidate Name Category/ Type Disbursement For: 2012 Office Sought: House Senate Primary General Other (specify) President District: State: Full Name (Last, First, Middle Initial) New Mexico Bank & Trust Date of Disbursement Mailing Address 320 Gold SW, Suite 100 80 24 2012 City State Zip Code Amount of Each Disbursement this Period NM 87102 Albuquerque 32.00 Purpose of Disbursement Bank Service Charge Transaction ID: SB17.9063 Candidate Name Category/ Type Disbursement For: Office Sought: 2012 House Senate Primary General Other (specify) President State: District: Full Name (Last, First, Middle Initial) C. New Mexico Bank & Trust Date of Disbursement Mailing Address 320 Gold SW, Suite 100 08 28 2012 City State Zip Code Amount of Each Disbursement this Period Albuquerque NM 87102 32.00 Purpose of Disbursement Bank Service Charge Transaction ID : SB17.9064 Candidate Name Category/ Type Disbursement For: 2012 Office Sought: House General Senate Primary President Other (specify) State: District: 439.00 SUBTOTAL of Disbursements This Page (optional)..... TOTAL This Period (last page this line number only).....

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

| | | Detailed Suffiffia | iy i age | | 20a | 20b | 20c | 21 | | | | |
|-------------------------|--|---|-------------------|------------|------------|-----------------|---------------|--------|--|--|--|--|
| | ny information copied from such Reports and Statemer for commercial purposes, other than using the name | | | | the purp | ose of solic | iting contrib | utions | | | | |
| \rangle | NAME OF COMMITTEE (In Full) GRIEGO FOR CONGRESS | | | | | | | | | | | |
| ۸. | Full Name (Last, First, Middle Initial) New Mexico Bank & Trust | | | | e of Disb | | | | | | | |
| | Mailing Address 320 Gold SW, Suite 100 | | | 09 04 2012 | | | | | | | | |
| | Albuquerque | , | | | | ach Disburs | ement this P | - | | | | |
| | Purpose of Disbursement Bank Service Charge | | Trans | action ID | : SB17.906 | 32. 5 | 00 | | | | | |
| | Candidate Name | nt For: 2012 | Category/ Type | | | | | | | | | |
| | Senate President Of | ent For: 2012 rimary General ther (specify) | | | | | | | | | | |
| | State: District: Full Name (Last, First, Middle Initial) | | | | | | | | | | | |
| 3. | . S | | | | e of Disb | | v v v | v. | | | | |
| | Mailing Address | | | M | M / | D D / | Y " Y " Y | Y | | | | |
| | City Sta | ate Zip Code | | Amo | ount of E | ach Disburs | ement this P | eriod | | | | |
| Purpose of Disbursement | | | | | j | | | | | | | |
| | Candidate Name | | Category/ Type | | | | | | | | | |
| | President Of | ent For: rimary General ther (specify) | | | | | | | | | | |
| | State: District: | | | | | | | | | | | |
| Э. | Full Name (Last, First, Middle Initial) | | | Date | e of Disb | ursement | | | | | | |
| | Mailing Address | | | М | M / | D D / | YYY | Y | | | | |
| | City State | Zip Code | | Amo | ount of E | ach Disburs | ement this P | eriod | | | | |
| | Purpose of Disbursement | | | | | | | | | | | |
| | Candidate Name | | Category/ Type | | | | | | | | | |
| | | rimary General | | | | | | | | | | |
| | State: President Of State: | ther (specify) | | | | | | | | | | |
| | 1 | | | | | | | | | | | |
| s | SUBTOTAL of Disbursements This Page (optional) | | | | | | 32. | 00 | | | | |
| | | | | | | | 1408. | 08 | | | | |

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

SCHEDULE B (FEC Form 3)

| | FOR LINE NUM | BER: | PAGE | 10 | OF | 15 |
|---|-----------------|------|------|-----|----|-----|
| Use separate schedule(s) | (check only one |) | | | | |
| for each category of the Detailed Summary Page | 17 | 18 | | 19a | | 19b |
| Detailed Suffiffiary Page | X 20a | 20b | | 20c | | 21 |
| ay not be sold or used by any person for the purpose of soliciting contribution address of any political committee to solicit contributions from such committee | | | | | | |
| | | | | | | |

| TEMIZED DISBURSEMENTS | for each category of the Detailed Summary Page | 17 |
|---|---|---|
| Any information copied from such Reports and Statements or for commercial purposes, other than using the name and | | |
| NAME OF COMMITTEE (In Full) GRIEGO FOR CONGRESS | | |
| Full Name (Last, First, Middle Initial) A. James Butler Mailing Address 6837 Coldwater Canyon Rd | | Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| State: District: | | |
| Full Name (Last, First, Middle Initial) Mark Cavanaugh Mailing Address 816 N Oakland St #709 | Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | |
| City State Arlington VA Purpose of Disbursement Candidate Name | Zip Code 22203 Cate | |
| Office Sought: House Senate President State: Disbursement F Other | | |
| Full Name (Last, First, Middle Initial) C. Regina Griego Mailing Address 816 N Oakland Apt 709 | | Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City State Arlington VA Purpose of Disbursement Candidate Name Office Sought: House Disbursement F Senate Primar | | Amount of Each Disbursement this Period 1000.00 Transaction ID : SB20A.9068 |
| SUBTOTAL of Disbursements This Page (optional) | | 3000.00 |
| TOTAL This Period (last page this line number only) | | 3000.00 |

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| In | nage# 13941126965 | | | |
|----|---|--|-------------------|---|
| | CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS | Use separate sch for each category Detailed Summan | of the | FOR LINE NUMBER: PAGE 11 OF 15 (check only one) 17 18 19a 19b 20a 20b 20c X 21 |
| | ny information copied from such Reports and Statemen for commercial purposes, other than using the name a | | | |
| | NAME OF COMMITTEE (In Full) CONGRESS | | | |
| A. | Full Name (Last, First, Middle Initial) Committee to Elect Linda Allison | | | Date of Disbursement |
| | Mailing Address P.O. Box 15672 | | | 07 13 2012 |
| | City State Rio Rancho NM | Zip Code 87174 | | Amount of Each Disbursement this Period |
| | Purpose of Disbursement Contribution to Nonfederal Candidate | | | 500.00 Transaction ID : SB21.9069 |
| | Candidate Name | | Category/ Type | |
| | Office Sought: House Disbursement Senate Prin President Othe State: District: | | | |
| В. | Full Name (Last, First, Middle Initial) Maestas 2012 Mailing Address 544 61st Street Northwest | | | Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | City State | • | | Amount of Each Disbursement this Period |
| | Albuquerque NM Purpose of Disbursement Nonfederal Contribution | 87105 | | 1000.00 Transaction ID : SB21.9071 |
| | Candidate Name | | Category/ Type | Transaction in . 3521.90/1 |
| | President Oth | For: nary General er (specify) | | |
| _ | State: District: | | | |
| C. | Full Name (Last, First, Middle Initial) Mary Ellen Broderick for House | Date of Disbursement | | |
| | Mailing Address 8522 Flower Place NE | 09 | | |
| | City State | Zip Code 87112 | | Amount of Each Disbursement this Period |
| | Albuquerque NM Purpose of Disbursement Non-Federal Contribution | 250.00 | | |
| | Candidate Name | | Category/ Type | Transaction ID : SB21.9073 |

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

Office Sought:

State:

House

Senate

District:

President

Disbursement For:

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

Primary

Other (specify)

General

1750.00

| SCHEDULE B (FEC Form 3) TEMIZED DISBURSEMENTS | Use separate sch for each category Detailed Summar | nedule(s) (c of the | OR LINE NUMBER: PAGE 12 OF 15 heck only one) 17 |
|---|--|------------------------|---|
| Any information copied from such Reports and S or for commercial purposes, other than using the | | | |
| NAME OF COMMITTEE (In Full) GRIEGO FOR CONGRESS | , | | |
| Full Name (Last, First, Middle Initial) A. Nate Cote for State Rep. | | | Date of Disbursement |
| Mailing Address PO Box 537 | | | 08 02 2012 |
| City Organ | State Zip Code NM 88052 | | Amount of Each Disbursement this Period |
| Purpose of Disbursement Non-federal contribution Candidate Name | | Category/ | 500.00 Transaction ID : SB21.9075 |
| Office Sought: House Senate President State: Disbu | ursement For: Primary General Other (specify) | Type | |
| Full Name (Last, First, Middle Initial) New Mexico House Majority Fu Mailing Address 313 Moon Street NE | nd | | Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City Albuquerque | State Zip Code NM 87123 | | Amount of Each Disbursement this Period |
| Purpose of Disbursement Nonfederal Contribution Candidate Name | | Category/ Type | 1000.00 Transaction ID : SB21.9077 |
| 3 | rsement For: Primary General Other (specify) | 1,1,00 | |
| Full Name (Last, First, Middle Initial) Tim Keller for New Mexico Mailing Address 11023 Vistazo PL SE | | | Date of Disbursement |
| | tate Zip Code | | 07 27 2012 |
| Albuquerque Purpose of Disbursement | NM 87123 | | 1000.00 |
| Candidate Name | | Category/ Type | Transaction ID : SB21.9089 |
| Senate President | orsement For: Primary General Other (specify) | | |
| State: District: | | | |

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

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

2500.00

4250.00

SCHEDULE C (FEC Form 3) **LOANS**

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

PAGE

13

| × | 13a |
|---|-----|
| | 13b |

15

Detailed Summary Page Transaction ID: SC/10.9055 NAME OF COMMITTEE (In Full) GRIEGO FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: [PERSONAL FUNDS] Primary Eric Griego General Mailing Address Other (specify) \blacktriangledown 1003 Santa Fe SW State ZIP Code City NM 87102 Albuquerque Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 1200.00 0.00 1200.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 09^M ^D10^D Ž012 0.00 % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 1200.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

1mage# 13941126968 PAGE 14 / 15

: 97 A = G7 9 @ G B9 C I G H9 L H F 9 @ 5 H9 8 HC 5 F 9 D C F H Z G7 < 98 I @ C F → H9 A = N 5 H = C B

Form/Schedule: SC/10 Transaction ID: SC/10.9055

(Current loan amount of 101.91 from a balance of 101.91 has been forgiven)

Form/Schedule: Transaction ID:

SCHEDULE C (FEC Form 3)

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

PAGE

15

| × | 13a |
|---|-----|
| | 13b |

15

LOANS (check only one) Detailed Summary Page Transaction ID: SC/10.9056 NAME OF COMMITTEE (In Full) GRIEGO FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: [PERSONAL FUNDS] Primary Eric Griego General Mailing Address Other (specify) \blacktriangledown 1003 Santa Fe SW State ZIP Code City NM 87102 Albuquerque Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 500.00 0.00 500.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^D 13^D ^M 09^M Ž012 0.00 % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 500.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

TOTALS This Period (last page in this line only)

1700.00