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Image# 13941126970

FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3		For An	_	ized Comr	nittee	<u> </u>		Office	Use Only
1. NAME OF COMMITTEE (in	full)	TYPE OR PRI	NT ▼		mple: If typing	g, type	12FE4M	5	
GRIEGO FOR	CON	GRESS							
ADDRESS (number ar	nd street)	PO BOX 193	52						
TIBBLIEGO (Hallibel al	ia street,	87119	1 1 1		1 1 1 1		1 1 1 1 1	1 1	
Check if did than previous reported. (A	usly	ALBUQUER	QUE				NM	87119	
2. <b>FEC IDENTIFIC</b>	CATION	NUMBER ▼		CITY			STATE A		ZIP CODE A STATE ▼ DISTRICT
C C0049588	53			IS THIS REPORT	NEW (N)	OR	× AMENI	DED	NM 01
4 TVDE OF DE	DODT (	0, 0,	ı					_	
<ul><li>4. TYPE OF RE</li><li>(a) Quarterly R</li></ul>	·	Choose One)	(b)	12-Day <b>PRE</b> -	Election Repo	rt for the:			
					Primary (12P)		General (	12G)	Runoff (12R)
April 15	Quarterl	y Report (Q1)			Convention (	12C)	Special (1	12S)	
July 15	Quarterly	y Report (Q2)						•	
Octobe	r 15 Qua	rterly Report (Q3)		Election on	M - M /	D D /	Y - Y - Y - Y		in the State of
X January	31 Year-	-End Report (YE)	(c) ;	 30-Day <b>POS</b> 1	-Election Rep	ort for the:			
				П	General (30G		Runoff (3	0R)	Special (30S)
Torming	tion Don	ort (TED)		_				J,	
Terrinia	tion Repo	oit (ILn)		Election on	M M /	D D /	Y		in the State of
5. Covering Period	N	10 / D D D 01		Y Y Y 2012	through	M M M	/ D D /		y y y 2012
I certify that I have e	xamined	this Report and	to the be	est of my kno	owledge and l	belief it is tr	ue, correct an	d com	plete.
Type or Print Name	of Treasu	ırer Susan Van	ce						
Signature of Treasure	er S	usan Vance			Electronically I	Filed] [	Date 07	/	15 /
NOTE: Submission of	false, err	oneous, or incomp	olete infor	rmation may s	ubject the per	son signing	this Report to t	the per	nalties of 2 U.S.C. §437g.
Office					-				
Use Only									EC FORM 3 Revised 02/2003)

### **SUMMARY PAGE**

of Receipts and Disbursements

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FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

### **GRIEGO FOR CONGRESS**

R	eport	Covering the Period: From:	10  / D D / Y Y Y Y T Y TO	: 12 / 31 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
			COLUMN A This Period	COLUMN B Election Cycle-to-Date
6.	Net	Contributions (other than loans)		
	(a)	Total Contributions (other than loans) (from Line 11(e))	0.00	1102827.97
	(b)	Total Contribution Refunds (from Line 20(d))	0.00	16681.81
	(c)	Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	0.00	1086146.16
7.	Net	Operating Expenditures		
	(a)	Total Operating Expenditures (from Line 17)	302.50	1083522.75
	(b)	Total Offsets to Operating Expenditures (from Line 14)	1822.18	2399.23
	(c)	Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	-1519.68	1081123.52
8.		h on Hand at Close of orting Period (from Line 27)	790.59	
9.	the	ts and Obligations Owed <b>TO</b> Committee (Itemize all on edule C and/or Schedule D)	0.00	
10.	the	ts and Obligations Owed BY Committee (Itemize all on edule C and/or Schedule D)	700.00	

### For further information contact:

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

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

Report of Receipts and Disbursements

FEC Form 3 (Revised 07/05)

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- If the candidate participated in the general election, use this form for the 30-day Post-General report.
- If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name GRIEGO FOR CONGRESS 2012 12 31 2012 Report Covering the Period: From: 10 01 To: I. RECEIPTS **COLUMN A COLUMN B COLUMN C Total this Period Election Cycle Total as of** Total for 06 2012 07 (date after general election) (date of general election) through 11. CONTRIBUTIONS (other than loans) FROM: (a) Individuals/Persons Other than 31 2012 Political Committees (last day of reporting period) Itemized (use Schedule A) 0.00 513964.63 0.00 (ii) Unitemized 0.00 510474.92 0.00 (iii) Total of contributions from individuals 0.00 1024439.55 0.00 Political Party Committees 0.00 72.27 0.00 Other Political Committees 0.00 0.00 78316.15

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FEC Form 3 (Revised 1/01)

Report of Receipts and Disbursements

COLUMN C **COLUMN A COLUMN B Total this Period** Election Cycle Total as of \* Total for \* (date after general election) (date of general election) through \* (last day of reporting period) (\* See page 5 for date) (\* See page 5 for dates) The Candidate 0.00 0.00 0.00 TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d)) 1102827.97 0.00 0.00 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES 0.00 0.00 0.00 13. LOANS: (a) Made or Guaranteed by the Candidate 0.00 1700.00 0.00 All Other Loans 0.00 0.00 0.00 (c) TOTAL LOANS (add Lines 13(a) and (b)) 0.00 1700.00 0.00 14. OFFSETS TO OPERATING EXPENDITURES (Refunds, rebates, etc.) 2399.23 1822.18 0.00 15. OTHER RECEIPTS (Dividends, Interest, etc.) 0.00 0.00 0.00 16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15) 1822.18 1106927.20 0.00

Report of Receipts and Disbursements PAGE 5 / 12 FEC Form 3 (Revised 1/01) Write or Type Committee Name **GRIEGO FOR CONGRESS** 10 01 2012 2012 Report Covering the Period: 12 31 To: From: **II. DISBURSEMENTS COLUMN A COLUMN B COLUMN C** Total for \* (date after general election) **Total this Period** Election Cycle Total as of \* (date of general election) through \* (last day of reporting period) (\* See page 5 for date) (\* See page 5 for dates) 17. OPERATING EXPENDITURES 302.50 1083522.75 302.50 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES 0.00 0.00 0.00 19. LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed by the Candidate 1000.00 1000.00 0.00 (b) Of All Other Loans 0.00 0.00 0.00 (c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b)) 0.00 1000.00 1000.00 REFUNDS OF CONTRIBUTIONS TO: (a) Individuals/Persons Other Than Political Committees 0.00 0.00 14681.81 (b) Political Party Committees 0.00 0.00 0.00

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

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	COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C  Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
	(c) Other Political Committees (such as PAC	Cs)	
	0.00	2000.00	0.00
	(d) TOTAL CONTRIBUTION REFUNDS (add	d Lines 20(a), (b) and (c))	
	0.00	16681.81	0.00
21.	OTHER DISBURSEMENTS		
	0.00	4250.00	0.00
22	TOTAL DISBURSEMENTS (add Lines 17, 18		3.00
<i>2</i> 2.	TOTAL DISBURSEMENTS (aud Lilles 17, 16	, 19(c), 20(u) and 21)	
	1302.50	1105454.56	302.50
	III. NET CONTRIBUTIONS (OTHER	THAN LOANS)	
	· · · · · · · · · · · · · · · · · · ·	of Summary Page for this report only; subtra	act Line 20(d) from Line 11(e))
	0.00	1086146.16	0.00
	IV. NET OPERATING EXPENDITURE	ES	
	(Note: Substitute in lieu of Line #	‡7 of Summary Page for this report only; sub	stract Line 14 from Line 17)
	-1519.68	1081123.52	302.50
	V. CASH SUI	MMARY	
23.	CASH ON HAND AT BEGINNING OF REPO		270.91
	TOTAL RECIEPTS THIS PERIOD (from Line		1822.18
	SUBTOTAL (add Line 23 and Line 24)		2093.09
26.	TOTAL DISBURSEMENTS THIS PERIOD (fro	om Line 22)	1302.50
27.	CASH ON HAND AT CLOSE OF REPORTIN	IG PERIOD (subtract Line 26 from Line 25)	790.59

# SCHEDULE A (FEC Form 3)

	FOR LINE NUMBER:						PAGE		7	OF	12
Use separate schedule(s)	(check only one)										
for each category of the			11a		11b		11c		110	b	
Detailed Summary Page			12		13a		13b	X	14		15
not be sold or used by any person for the purpose of soliciting contributions dress of any political committee to solicit contributions from such committee.											

ITEMIZED RECEIPTS Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and ad-NAME OF COMMITTEE (In Full) GRIEGO FOR CONGRESS Full Name (Last, First, Middle Initial) Presbyterian Health Plan Date of Receipt Mailing Address PO Box 27489 10 2012 09 City State Zip Code Transaction ID: SA14.9083 NM 87125-7489 Albuquerque FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 1822.18 Name of Employer Occupation Offset Receipt For: 2012 Election Cycle-to-Date | Primary General 1822.18 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code 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) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code 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) 1822.18 SUBTOTAL of Receipts This Page (optional)..... 1822.18 TOTAL This Period (last page this line number only).....

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

by any person for the purpose of soliciting contributions committee to solicit contributions from such committee.
Date of Disbursement
12 16 2012
Amount of Each Disbursement this Period
302.50 Transaction ID : SB17.9084
ategory/ Type
Date of Disbursement
M " M   / D " D   / Y " Y " Y " Y
Amount of Each Disbursement this Period
ategory/ Type
Date of District
Date of Disbursement
Amount of Each Disbursement this Period
ategory/ Type
302.50
302.50

# S

90	CHEDIII E R	(EEC Form	3)			FOR LINE NUMBER: PAGE 9 OF 12				
SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS				Use separate sch for each category Detailed Summar	of the	theck only one)  17				
						person for the purpose of soliciting contributions ee to solicit contributions from such committee.				
	NAME OF COMM GRIEGO FO	IITTEE (In Full) OR CONGRES	S							
Α.	Full Name (Last, Eric Griego	First, Middle Initial)				Date of Disbursement				
	Mailing Address	1003 Santa Fe SW				11 01 / Y Y Y Y Y				
	City Albuquerque		State NM	Zip Code 87102		Amount of Each Disbursement this Period				
	Purpose of Disbu Loan Repayment	rsement t				1000.00 Transaction ID : SB19A.9085				
	Candidate Name			2010	Category/ Type					
	Office Sought:	House Senate President	Disbursement For Primary Other (s	General						
_	State:	District: First, Middle Initial)								
В.	Mailing Address	rirst, iviladie initial)				Date of Disbursement				
	Mailing Address									
	City		State	Zip Code		Amount of Each Disbursement this Period				
	Purpose of Disbu	rsement								
	Candidate Name				Category/ Type					
	Office Sought:	House Senate	Disbursement For Primary	General						
	State:	President District:	Other (s	респу)						
	Full Name (Last,	First, Middle Initial)								
C.						Date of Disbursement				
	Mailing Address									
	City		State Zi	p Code		Amount of Each Disbursement this Period				
Purpose of Disbursement						1,				
	Candidate Name				Category/ Type					
	Office Sought:	House Senate President	Disbursement For Primary Other (s	General						
_	State:	District:								
						1000.00				

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

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

1000.00

# SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER: (check only one)

**PAGE** 

10

×	13a
	13h

12

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 Cumulative Payment To Date Balance Outstanding at Close of This Period 1200.00 1000.00 200.00 **TERMS** Date Incurred Date Due Interest Rate Secured: <sup>M</sup> 09<sup>M</sup> <sup>D</sup>10<sup>D</sup> 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)..... 200.00 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# 13941126980** PAGE 11 / 12

## : 97 'A = G7 9 @ G B9 CI G'H9 LH F9 @ 5 H98 'HC '5 'F9 DC FHZ G7 < 98 I @ 'C F' + H9 A = N5 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) **LOANS**

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

**PAGE** 

12

×	13a
	13b

12

(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: <sup>D</sup> 13<sup>D</sup> <sup>M</sup> 09<sup>M</sup> 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 TOTALS This Period (last page in this line only) ...... 700.00 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.