

**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.

12FE4M5

BLUE CD2 NEW MEXICO USA

ADDRESS (number and street)

PO BOX 400

Check if different  
than previously  
reported. (ACC)

TULAROSA

NM

88352

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00797340

3. IS THIS  
REPORTNEW  
(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

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

in the  
State of(d) 30-Day  
POST-Election  
Report for the:

- ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

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

in the  
State of

5. Covering Period

M M / D D / Y Y Y Y Y Y  
04 01 2026

through

M M / D D / Y Y Y Y Y Y  
06 30 2026

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

Burt, Martha, , ,

Signature of Treasurer

Burt, Martha, , ,

Date

M M / D D / Y Y Y Y Y Y  
08 25 2026

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 05/2016

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

BLUE CD2 NEW MEXICO USAReport Covering the Period: From: 

|     |     |             |
|-----|-----|-------------|
| M M | D D | Y Y Y Y Y Y |
| 04  | 01  | 2026        |

 To: 

|     |     |             |
|-----|-----|-------------|
| M M | D D | Y Y Y Y Y Y |
| 06  | 30  | 2026        |

|                                                                                                                  | COLUMN A<br>This Period                    | COLUMN B<br>Calendar Year-to-Date          |
|------------------------------------------------------------------------------------------------------------------|--------------------------------------------|--------------------------------------------|
| 6. (a) Cash on Hand<br>January 1, <div><div>Y Y Y Y Y Y</div><div>2026</div></div>                               |                                            | <div><div></div><div>34159.13</div></div>  |
| (b) Cash on Hand at<br>Beginning of Reporting Period.....                                                        | <div><div></div><div>40863.42</div></div>  |                                            |
| (c) Total Receipts (from Line 19) .....                                                                          | <div><div></div><div>76852.05</div></div>  | <div><div></div><div>132113.16</div></div> |
| (d) Subtotal (add Lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B).....              | <div><div></div><div>117715.47</div></div> | <div><div></div><div>166272.29</div></div> |
| 7. Total Disbursements (from Line 31).....                                                                       | <div><div></div><div>41668.60</div></div>  | <div><div></div><div>90225.42</div></div>  |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)).....                         | <div><div></div><div>76046.87</div></div>  | <div><div></div><div>76046.87</div></div>  |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | <div><div></div><div>0.00</div></div>      |                                            |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) ..... | <div><div></div><div>0.00</div></div>      |                                            |

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)For further information, contact the Federal Election Commission at 800-424-9530 or visit [www.fec.gov](http://www.fec.gov)

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

**BLUE CD2 NEW MEXICO USA**

Report Covering the Period:

From:

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04  | / | 01  | / | 2026    |

To:

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06  | / | 30  | / | 2026    |

| I. Receipts                                                                                           | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|-------------------------------------------------------------------------------------------------------|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:                                                            |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees                                               |                               |                                   |
| (i) Itemized (use Schedule A).....                                                                    | 62417.25                      | 98509.75                          |
| (ii) Unitemized .....                                                                                 | 14410.50                      | 33445.45                          |
| (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶                                                       | 76827.75                      | 131955.20                         |
| (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) .....  | 76827.75                      | 131955.20                         |
| 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.).....                                           | 24.30                         | 157.96                            |
| 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)) .....                         | 76852.05                      | 132113.16                         |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....                                   | 76852.05                      | 132113.16                         |

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

| II. Disbursements                                                                              | COLUMN A<br>Total This Period | COLUMN B<br>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 .....                                                 | 41073.60                      | 89630.42                          |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....                        | 41073.60                      | 89630.42                          |
| 22. Transfers to Affiliated/Other Party Committees.....                                        | 0.00                          | 0.00                              |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....         | 0.00                          | 0.00                              |
| 24. Independent Expenditures (use Schedule E) .....                                            | 0.00                          | 0.00                              |
| 25. Coordinated Party Expenditures (52 U.S.C. § 30116(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 (Including Non-Federal Donations).....                                 | 595.00                        | 595.00                            |
| 30. Federal Election Activity (52 U.S.C. § 30101(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)) ..      | 41668.60                      | 90225.42                          |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 41668.60                      | 90225.42                          |

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

| <b>III. Net Contributions/<br/>Operating Expenditures</b>                             | <b>COLUMN A<br/>Total This Period</b> | <b>COLUMN B<br/>Calendar Year-to-Date</b> |
|---------------------------------------------------------------------------------------|---------------------------------------|-------------------------------------------|
| 33. Total Contributions (other than loans)<br>(from Line 11(d), page 3) .....         | 76827.75                              | 131955.20                                 |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                             | 0.00                                  | 0.00                                      |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....     | 76827.75                              | 131955.20                                 |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b)) .....▶ | 41073.60                              | 89630.42                                  |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3).....                  | 0.00                                  | 0.00                                      |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) .....▶              | 41073.60                              | 89630.42                                  |

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

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

FOR LINE NUMBER: PAGE 6 OF 80  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

**BLUE CD2 NEW MEXICO USA**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Armstrong, Leigh, , ,**

Mailing Address 1036 PURPLE ASTER

City  
Bernalillo

State  
NM

Zip Code  
87004

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
USDA Forestr Service

Occupation (for Individual)  
Computer specialist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

274.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 30 / 2026

Transaction ID : SA11AI.16808

Amount of Each Receipt this Period

152.50

☐ Memo Item

In-kind - Postage

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Arnold, Jeanne, , ,**

Mailing Address 53 Puye Road

City  
Santa Fe

State  
NM

Zip Code  
87505

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self

Occupation (for Individual)  
Freelance Art Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 22 / 2026

Transaction ID : SA11AI.16274

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Arnold, Jeanne, , ,**

Mailing Address 53 Puye Road

City  
Santa Fe

State  
NM

Zip Code  
87505

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self

Occupation (for Individual)  
Freelance Art Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 30 / 2026

Transaction ID : SA11AI.17056

Amount of Each Receipt this Period

100.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

352.50

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

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

FOR LINE NUMBER: PAGE 7 OF 80  
 (check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**BLUE CD2 NEW MEXICO USA**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Bass, Laura, , ,**

Mailing Address 14 Los Lobos Rd

City  
Placitas

State  
NM

Zip Code  
87043

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employed

Occupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 04 / 24 / 2026

Transaction ID : SA11AI.16311

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Baughman, Cynthia, , ,**

Mailing Address PO Box 817

City  
Tesuque

State  
NM

Zip Code  
87574

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employed

Occupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 04 / 13 / 2026

Transaction ID : SA11AI.16210

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Baughman, Cynthia, , ,**

Mailing Address PO Box 817

City  
Tesuque

State  
NM

Zip Code  
87574

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employed

Occupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 05 / 13 / 2026

Transaction ID : SA11AI.16392

Amount of Each Receipt this Period

50.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

350.00

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 80  
 (check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**BLUE CD2 NEW MEXICO USA**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Baughman, Cynthia, , ,**

Mailing Address PO Box 817

City  
Tesuque

State  
NM

Zip Code  
87574

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employed

Occupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 / 13 / 2026

**Transaction ID : SA11AI.16570**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Baughman, Cynthia, , ,**

Mailing Address PO Box 817

City  
Tesuque

State  
NM

Zip Code  
87574

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employed

Occupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2026

**Transaction ID : SA11AI.17008**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Bell, Diana, , ,**

Mailing Address 8920 Pepper Grass Court

City  
Las Lunas

State  
NM

Zip Code  
88011

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not Employed

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

414.25

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 07 / 2026

**Transaction ID : SA11AI.16197**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

800.00

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 80  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**BLUE CD2 NEW MEXICO USA**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Bell, Diana, , ,**

Mailing Address 8920 Pepper Grass Court

City  
Las Lunas

State  
NM

Zip Code  
88011

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not Employed

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

714.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 15 / 2026

Transaction ID : SA11AI.16951

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Bell, Margaret, , ,**

Mailing Address 4404 De La Cruz NW

City  
Albuquerque

State  
NM

Zip Code  
87107

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employed

Occupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 10 / 2026

Transaction ID : SA11AI.16205

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Bell, Margaret, , ,**

Mailing Address 4404 De La Cruz NW

City  
Albuquerque

State  
NM

Zip Code  
87107

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employed

Occupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 10 / 2026

Transaction ID : SA11AI.16387

Amount of Each Receipt this Period

15.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

330.00

# **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 80  
(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)

**BLUE CD2 NEW MEXICO USA**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Bell, Margaret, , ,**

Mailing Address 4404 De La Cruz NW

City  
Albuquerque

State  
NM

Zip Code  
87107

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employed

Occupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

06 / 10 / 2026

Transaction ID : SA11AI.16566

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Bell, Margaret, , ,**

Mailing Address 4404 De La Cruz NW

City  
Albuquerque

State  
NM

Zip Code  
87107

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employed

Occupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

06 / 30 / 2026

Transaction ID : SA11AI.17010

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Berkower, Amy, , ,**

Mailing Address 146 Central Park West

City  
New York

State  
NY

Zip Code  
10023

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Writers House LLC

Occupation (for Individual)  
purblisher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

04 / 26 / 2026

Transaction ID : SA11AI.16315

Amount of Each Receipt this Period

500.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

615.00

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

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

FOR LINE NUMBER: PAGE 11 OF 80  
(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)

**BLUE CD2 NEW MEXICO USA**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Brown, Garry, , ,**

Mailing Address PO Box 458

City  
High Rolls

State  
NM

Zip Code  
88325

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not Employed

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
05 / 11 / 2026

Transaction ID : SA11AI.16388

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Brown, Garry, , ,**

Mailing Address PO Box 458

City  
High Rolls

State  
NM

Zip Code  
88325

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not Employed

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
06 / 11 / 2026

Transaction ID : SA11AI.16568

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Burt, Martha, , ,**

Mailing Address 127 E. Lupita Road

City  
Santa Fe

State  
NM

Zip Code  
87505

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
retired

Occupation (for Individual)  
retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

755.00

Date of Receipt

MM / DD / YYYY  
04 / 10 / 2026

Transaction ID : SA11AI.16206

Amount of Each Receipt this Period

50.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

150.00

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

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

FOR LINE NUMBER: PAGE 12 OF 80  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**BLUE CD2 NEW MEXICO USA**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Burt, Martha, , ,**

Mailing Address 127 E. Lupita Road

City  
Santa Fe

State  
NM

Zip Code  
87505

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
retired

Occupation (for Individual)  
retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1005.00

Date of Receipt

04 / 22 / 2026

Transaction ID : SA11AI.16268

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Burt, Martha, , ,**

Mailing Address 127 E. Lupita Road

City  
Santa Fe

State  
NM

Zip Code  
87505

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
retired

Occupation (for Individual)  
retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1055.00

Date of Receipt

05 / 10 / 2026

Transaction ID : SA11AI.16386

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Burt, Martha, , ,**

Mailing Address 127 E. Lupita Road

City  
Santa Fe

State  
NM

Zip Code  
87505

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
retired

Occupation (for Individual)  
retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1105.00

Date of Receipt

06 / 10 / 2026

Transaction ID : SA11AI.16565

Amount of Each Receipt this Period

50.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

350.00

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

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

FOR LINE NUMBER: PAGE 13 OF 80  
 (check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**BLUE CD2 NEW MEXICO USA**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Cadden, Wendyn, , ,**

Mailing Address P O Box 756

City  
Las Vegas

State  
NM

Zip Code  
87701

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not Employed

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY  
 05 / 20 / 2026

Transaction ID : SA11AI.16416

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Coha, Peter, , ,**

Mailing Address P O BOX 2167

City  
Corrales

State  
NM

Zip Code  
87048

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not Employed

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

MM / DD / YYYY  
 04 / 22 / 2026

Transaction ID : SA11AI.16289

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Coha, Peter, , ,**

Mailing Address P O BOX 2167

City  
Corrales

State  
NM

Zip Code  
87048

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not Employed

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2250.00

Date of Receipt

MM / DD / YYYY  
 06 / 30 / 2026

Transaction ID : SA11AI.17012

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

2250.00

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

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

FOR LINE NUMBER: PAGE 14 OF 80  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**BLUE CD2 NEW MEXICO USA**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Collie, Jim, , ,**

Mailing Address 4235 Mackland Ave NE

City  
Albuquerque

State  
NM

Zip Code  
87110

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
None

Occupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2400.00

Date of Receipt

**04 / 22 / 2026**

**Transaction ID : SA11AI.16285**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Collie, Jim, , ,**

Mailing Address 4235 Mackland Ave NE

City  
Albuquerque

State  
NM

Zip Code  
87110

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
None

Occupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7900.00

Date of Receipt

**04 / 27 / 2026**

**Transaction ID : SA11AI.16346**

Amount of Each Receipt this Period

5500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Collie, Jim, , ,**

Mailing Address 4235 Mackland Ave NE

City  
Albuquerque

State  
NM

Zip Code  
87110

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
None

Occupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

8000.00

Date of Receipt

**05 / 18 / 2026**

**Transaction ID : SA11AI.16409**

Amount of Each Receipt this Period

100.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

5700.00

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

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

FOR LINE NUMBER: PAGE 15 OF 80  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**BLUE CD2 NEW MEXICO USA**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Collie, Jim, , ,**

Mailing Address 4235 Mackland Ave NE

City  
Albuquerque

State  
NM

Zip Code  
87110

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
None

Occupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

8500.00

Date of Receipt

MM / DD / YYYY  
06 / 30 / 2026

Transaction ID : SA11AI.17046

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Colon, Brian, , ,**

Mailing Address 1101 DIAMONDBACK DR NE

City  
Albuquerque

State  
NM

Zip Code  
87113

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self

Occupation (for Individual)  
Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

MM / DD / YYYY  
04 / 25 / 2026

Transaction ID : SA11AI.16314

Amount of Each Receipt this Period

350.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Davis, Shirley, , ,**

Mailing Address 3045 Buena Vida Cir, Apt 112

City  
Las Cruces

State  
NM

Zip Code  
88011

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
None

Occupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

237.25

Date of Receipt

MM / DD / YYYY  
06 / 30 / 2026

Transaction ID : SA11AI.16733

Amount of Each Receipt this Period

167.75

☐ Memo Item

In-kind - Postage

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1017.75

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 16 OF 80  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**BLUE CD2 NEW MEXICO USA**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Dever, Franny, , ,**

Mailing Address 511 La Comunidad NW

City  
AlbuquerqueState  
NMZip Code  
87114FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
retiredOccupation (for Individual)  
retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 30 / 2026

Transaction ID : SA11AI.16818

Amount of Each Receipt this Period

122.00

☐ Memo Item

In-kind - Postage

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Dunn, Laurie & Craig, , ,**

Mailing Address PO Box 2575

City  
TaosState  
NMZip Code  
87571FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
not employedOccupation (for Individual)  
not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 21 / 2026

Transaction ID : SA11AI.16257

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. East Mountain Progressives**

Mailing Address 5 Twin Tree Court

City  
Cedar CrestState  
NMZip Code  
87008FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

526.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 30 / 2026

Transaction ID : SA11AI.16453

Amount of Each Receipt this Period

252.00

☐ Memo Item

In-kind - Postage

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

874.00

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

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

FOR LINE NUMBER: PAGE 17 OF 80  
 (check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**BLUE CD2 NEW MEXICO USA**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Endres, Delores, , ,**

Mailing Address 15 Wind Song Road

City  
El Prado

State  
NM

Zip Code  
87529

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employed

Occupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
 04 / 22 / 2026

Transaction ID : SA11AI.16296

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Farmer, Jane M, , ,**

Mailing Address PO Box 503

City  
Arroyo Hondo

State  
NM

Zip Code  
87513

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employed

Occupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY  
 04 / 18 / 2026

Transaction ID : SA11AI.16254

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Florsheim, Kathie, , ,**

Mailing Address POB 2367

City  
Providence

State  
RI

Zip Code  
02906

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not Employed

Occupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
 04 / 27 / 2026

Transaction ID : SA11AI.16347

Amount of Each Receipt this Period

250.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1500.00

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

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

FOR LINE NUMBER: PAGE 18 OF 80  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**BLUE CD2 NEW MEXICO USA**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Fredman, Lonnie Ann, , ,**

Mailing Address 514 Valley High Street SW

City  
Albuquerque

State  
NM

Zip Code  
87105

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
retired

Occupation (for Individual)  
retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.75

Date of Receipt

MM / DD / YYYY  
06 / 30 / 2026

Transaction ID : SA11AI.17005

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Fredman, Lonnie Ann, , ,**

Mailing Address 514 Valley High Street SW

City  
Albuquerque

State  
NM

Zip Code  
87105

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
retired

Occupation (for Individual)  
retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.75

Date of Receipt

MM / DD / YYYY  
06 / 30 / 2026

Transaction ID : SA11AI.17061

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Gardner, Katherine, , ,**

Mailing Address 23 Placitas Trails Road

City  
Placitas

State  
NJ

Zip Code  
87043

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not Employed

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

780.50

Date of Receipt

MM / DD / YYYY  
05 / 12 / 2026

Transaction ID : SA11AI.16532

Amount of Each Receipt this Period

500.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

575.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 19 OF 80  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

BLUE CD2 NEW MEXICO USA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A.** Gardner, Katherine, , ,

Mailing Address 23 Placitas Trails Road

City  
PlacitasState  
NJZip Code  
87043FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

795.75

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 30 / 2026

Transaction ID : SA11AI.16839

Amount of Each Receipt this Period

15.25

☐ Memo Item

In-kind - Postage

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B.** Gerhenson, Harold, , ,

Mailing Address 3101 La Mancha Drive NW

City  
AlbuquerqueState  
NMZip Code  
87104FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 22 / 2026

Transaction ID : SA11AI.16260

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C.** Gershenson, Harold, , ,

Mailing Address 3101 La Mancha Dr NW

City  
AlbuquerqueState  
NMZip Code  
87104FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employedOccupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 22 / 2026

Transaction ID : SA11AI.16418

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

215.25

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

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

FOR LINE NUMBER: PAGE 20 OF 80  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**BLUE CD2 NEW MEXICO USA**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Gershenson, Harold, , ,**

Mailing Address 3101 La Mancha Dr NW

City  
Albuquerque

State  
NM

Zip Code  
87104

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employed

Occupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

MM / DD / YYYY  
06 / 22 / 2026

Transaction ID : SA11AI.16966

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Gottlieb, Vicki, , ,**

Mailing Address 91 Juniper Road

City  
Placitas

State  
NM

Zip Code  
87043

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
not employed

Occupation (for Individual)  
not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

MM / DD / YYYY  
06 / 30 / 2026

Transaction ID : SA11AI.17029

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Gray, Chrisann, , ,**

Mailing Address 2829 Florida NE

City  
Albuquerque

State  
NM

Zip Code  
87110

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Casa Esperanza

Occupation (for Individual)  
Education

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
04 / 05 / 2026

Transaction ID : SA11AI.16189

Amount of Each Receipt this Period

25.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

375.00

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

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

FOR LINE NUMBER: PAGE 21 OF 80  
 (check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**BLUE CD2 NEW MEXICO USA**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Gray, Chrisann, , ,**

Mailing Address 2829 Florida NE

City  
Albuquerque

State  
NM

Zip Code  
87110

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Casa Esperanza

Occupation (for Individual)  
Education

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

MM / DD / YYYY  
 05 / 05 / 2026

Transaction ID : SA11AI.16367

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Gray, Chrisann, , ,**

Mailing Address 2829 Florida NE

City  
Albuquerque

State  
NM

Zip Code  
87110

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Casa Esperanza

Occupation (for Individual)  
Education

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

MM / DD / YYYY  
 05 / 05 / 2026

Transaction ID : SA11AI.16369

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Gray, Chrisann, , ,**

Mailing Address 2829 Florida NE

City  
Albuquerque

State  
NM

Zip Code  
87110

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Casa Esperanza

Occupation (for Individual)  
Education

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY  
 06 / 05 / 2026

Transaction ID : SA11AI.16555

Amount of Each Receipt this Period

25.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

150.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 22 OF 80  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

BLUE CD2 NEW MEXICO USA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A.** Haaland, Kathleen, , ,

Mailing Address 809 Richmond Dr SE

City  
AlbuquerqueState  
NMZip Code  
87106FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
UNMOccupation (for Individual)  
Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 29 / 2026

Transaction ID : SA11AI.16320

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B.** Haaland, Kathleen, , ,

Mailing Address 809 Richmond Dr SE

City  
AlbuquerqueState  
NMZip Code  
87106FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
UNMOccupation (for Individual)  
Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 29 / 2026

Transaction ID : SA11AI.16431

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C.** Haaland, Kathleen, , ,

Mailing Address 809 Richmond Dr SE

City  
AlbuquerqueState  
NMZip Code  
87106FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
UNMOccupation (for Individual)  
Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

242.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 29 / 2026

Transaction ID : SA11AI.16993

Amount of Each Receipt this Period

20.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

60.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 23 OF 80  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

BLUE CD2 NEW MEXICO USA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A.** Haaland, Kathleen, , ,

Mailing Address 809 Richmond Dr SE

City  
AlbuquerqueState  
NMZip Code  
87106FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
UNMOccupation (for Individual)  
Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

364.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 30 / 2026

Transaction ID : SA11AI.16774

Amount of Each Receipt this Period

122.00

☐ Memo Item

In-kind - Postage

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B.** Hands, Debbie, , ,

Mailing Address 1998 Mahogany Dr.

City  
Las CrucesState  
NMZip Code  
88001FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SelfOccupation (for Individual)  
Graphic Designer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

533.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 07 / 2026

Transaction ID : SA11AI.16196

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C.** Hands, Debbie, , ,

Mailing Address 1998 Mahogany Dr.

City  
Las CrucesState  
NMZip Code  
88001FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SelfOccupation (for Individual)  
Graphic Designer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

683.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 22 / 2026

Transaction ID : SA11AI.16291

Amount of Each Receipt this Period

150.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

297.00

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

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

FOR LINE NUMBER: PAGE 24 OF 80  
 (check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**BLUE CD2 NEW MEXICO USA**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Hands, Debbie, , ,**

Mailing Address 1998 Mahogany Dr.

City  
Las Cruces

State  
NM

Zip Code  
88001

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self

Occupation (for Individual)  
Graphic Designer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

708.00

Date of Receipt

MM / DD / YYYY  
 05 / 07 / 2026

Transaction ID : SA11AI.16376

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Hands, Debbie, , ,**

Mailing Address 1998 Mahogany Dr.

City  
Las Cruces

State  
NM

Zip Code  
88001

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self

Occupation (for Individual)  
Graphic Designer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

733.00

Date of Receipt

MM / DD / YYYY  
 06 / 07 / 2026

Transaction ID : SA11AI.16560

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Hands, Debbie, , ,**

Mailing Address 1998 Mahogany Dr.

City  
Las Cruces

State  
NM

Zip Code  
88001

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self

Occupation (for Individual)  
Graphic Designer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

883.00

Date of Receipt

MM / DD / YYYY  
 06 / 30 / 2026

Transaction ID : SA11AI.17016

Amount of Each Receipt this Period

150.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

200.00

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

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

FOR LINE NUMBER: PAGE 25 OF 80  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**BLUE CD2 NEW MEXICO USA**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Harris, Marcia, , ,**

Mailing Address 209 Dartmouth SE

City  
Albuquerque

State  
NM

Zip Code  
87106

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
none

Occupation (for Individual)  
retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 30 / 2026

Transaction ID : SA11AI.16843

Amount of Each Receipt this Period

45.75

☐ Memo Item

In-kind - Postage

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Harris, Stan, , ,**

Mailing Address 7917 Woodleaf Drive NW

City  
Albuquerque

State  
NM

Zip Code  
87109

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not Employed

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 20 / 2026

Transaction ID : SA11AI.16251

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Harrison, Wanda, , ,**

Mailing Address 10407 Cartagena Ave SW

City  
Albuquerque

State  
NM

Zip Code  
87121

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employed

Occupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 05 / 2026

Transaction ID : SA11AI.16556

Amount of Each Receipt this Period

30.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

325.75

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 26 OF 80  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**BLUE CD2 NEW MEXICO USA**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Hayes, Dimid, , ,**

Mailing Address 300 Lomita St.

City  
Santa FeState  
NMZip Code  
87505FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 30 / 2026

Transaction ID : SA11AI.16432

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Hayes, Dimid, , ,**

Mailing Address 300 Lomita St.

City  
Santa FeState  
NMZip Code  
87505FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2026

Transaction ID : SA11AI.16995

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Hearst, Kevin, , ,**

Mailing Address 151 Sanctuary Road

City  
Silver CityState  
NMZip Code  
88061-9798FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2026

Transaction ID : SA11AI.17007

Amount of Each Receipt this Period

50.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

130.00

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

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

FOR LINE NUMBER: PAGE 27 OF 80  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**BLUE CD2 NEW MEXICO USA**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Hoehn, Jeff, , ,**

Mailing Address 411 Aliso Drive SE

City  
Albuquerque

State  
NM

Zip Code  
87108

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
All Faiths Children's Advocacy

Occupation (for Individual)  
Advancement Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 30 / 2026

Transaction ID : SA11AI.16327

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Hollenbach, David, , ,**

Mailing Address 15 Cerro Blanco Rd

City  
Lamy

State  
NM

Zip Code  
87540

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employed

Occupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2026

Transaction ID : SA11AI.16468

Amount of Each Receipt this Period

610.00

☐ Memo Item

In-kind - Postage

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Hollenbach, David, , ,**

Mailing Address 15 Cerro Blanco Rd

City  
Lamy

State  
NM

Zip Code  
87540

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employed

Occupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1320.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2026

Transaction ID : SA11AI.17018

Amount of Each Receipt this Period

100.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

960.00

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

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

FOR LINE NUMBER: PAGE 28 OF 80  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**BLUE CD2 NEW MEXICO USA**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Holley, Elizabeth, , ,**

Mailing Address 2540 E 7th St

City  
Tucson

State  
AZ

Zip Code  
85716

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employed

Occupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

803.00

Date of Receipt

04 / 14 / 2026

Transaction ID : SA11AI.16218

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Holley, Elizabeth, , ,**

Mailing Address 2540 E 7th St

City  
Tucson

State  
AZ

Zip Code  
85716

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employed

Occupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

903.00

Date of Receipt

04 / 15 / 2026

Transaction ID : SA11AI.16219

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Holley, Elizabeth, , ,**

Mailing Address 2540 E 7th St

City  
Tucson

State  
AZ

Zip Code  
85716

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employed

Occupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1003.00

Date of Receipt

05 / 15 / 2026

Transaction ID : SA11AI.16399

Amount of Each Receipt this Period

100.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

450.00

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

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

FOR LINE NUMBER: PAGE 29 OF 80  
(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)

**BLUE CD2 NEW MEXICO USA**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Holley, Elizabeth, , ,**

Mailing Address 2540 E 7th St

City  
Tucson

State  
AZ

Zip Code  
85716

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employed

Occupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1103.00

Date of Receipt

MM / DD / YYYY  
06 / 15 / 2026

Transaction ID : SA11AI.16949

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Holley, Elizabeth, , ,**

Mailing Address 2540 E 7th St

City  
Tucson

State  
AZ

Zip Code  
85716

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employed

Occupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1353.00

Date of Receipt

MM / DD / YYYY  
06 / 30 / 2026

Transaction ID : SA11AI.17013

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Hornthal, Bethany, , ,**

Mailing Address 2234 Beach St.

City  
San Francisco

State  
CA

Zip Code  
94123

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HairToStay.org

Occupation (for Individual)  
Executive Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
04 / 22 / 2026

Transaction ID : SA11AI.16300

Amount of Each Receipt this Period

250.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

600.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 30 OF 80  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**BLUE CD2 NEW MEXICO USA**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Indivisible Albuquerque**

Mailing Address 929 Adams Street NE

City  
AlbuquerqueState  
NMZip Code  
87110FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5475.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2026

Transaction ID : SA11AI.16436

Amount of Each Receipt this Period

3035.00

☐ Memo Item

In-kind - Postage

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Indivisible Cochiti Lake**

Mailing Address 6042 Hoochaneetsa Plaza

City  
Cochiti LakeState  
NMZip Code  
87083FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

819.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2026

Transaction ID : SA11AI.16437

Amount of Each Receipt this Period

392.00

☐ Memo Item

In-kind - Postage

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Indivisible Greater Eldorado Together**

Mailing Address 6 Encantado Road

City  
Santa FeState  
NMZip Code  
87508FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

840.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2026

Transaction ID : SA11AI.16454

Amount of Each Receipt this Period

840.00

☐ Memo Item

In-kind - Postage

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4267.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 31 OF 80  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**BLUE CD2 NEW MEXICO USA**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Indivisible Las Cruces - 1**

Mailing Address 1692 Calle de Valezquez

City  
Las CrucesState  
NMZip Code  
88007FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1462.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2026

Transaction ID : SA11AI.16444

Amount of Each Receipt this Period

700.00

☐ Memo Item

In-kind - Postage

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Indivisible Las Vegas-Mora**

Mailing Address 49 Patrton Road, #728

City  
RociadaState  
NMZip Code  
87742FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2026

Transaction ID : SA11AI.16450

Amount of Each Receipt this Period

280.00

☐ Memo Item

In-kind - Postage

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Indivisible Otero County**

Mailing Address 2551 Adobe Ranch Trail

City  
AlamagordoState  
NMZip Code  
88310FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1048.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2026

Transaction ID : SA11AI.16452

Amount of Each Receipt this Period

560.00

☐ Memo Item

In-kind - Postage

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1540.00

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

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**BLUE CD2 NEW MEXICO USA**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. Indivisible Rio Grande**

Mailing Address 17 Garden Park Circle NW  
A

City Albuquerque State NM Zip Code 87107

FEC ID number of contributing federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6405.00

Date of Receipt

MM / DD / YYYY  
06 / 30 / 2026

Transaction ID : SA11AI.16448

Amount of Each Receipt this Period

3355.00

☐ Memo Item

In-kind - Postage

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. Indivisible Ruidoso (RIOT)**

Mailing Address 14 Rogal Place

City Ruidoso State NM Zip Code 88345

FEC ID number of contributing federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

MM / DD / YYYY  
06 / 30 / 2026

Transaction ID : SA11AI.16451

Amount of Each Receipt this Period

280.00

☐ Memo Item

In-kind - Postage

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. Indivisible Sandoval County**

Mailing Address 102 Palacio Road

City Corrales State NM Zip Code 87048

FEC ID number of contributing federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1083.00

Date of Receipt

MM / DD / YYYY  
06 / 30 / 2026

Transaction ID : SA11AI.16442

Amount of Each Receipt this Period

1083.00

☐ Memo Item

In-kind - Postage

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

4718.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**BLUE CD2 NEW MEXICO USA**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Indivisible Santa Fe SOS**

Mailing Address 404 Calle Kokopelli

City  
Santa FeState  
NMZip Code  
87501FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2182.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2026

Transaction ID : SA11AI.16445

Amount of Each Receipt this Period

840.00

☐ Memo Item

In-kind - Postage

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Indivisible Sierra County**Mailing Address 526 Marr Street  
Apt. 5

City

Truth or Consequences

State  
NMZip Code  
87901FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

401.75

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2026

Transaction ID : SA11AI.16447

Amount of Each Receipt this Period

112.00

☐ Memo Item

In-kind - Postage

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Indivisible Socorro**

Mailing Address 904 Leroy Place

City

Socorro

State  
NMZip Code  
87801FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1531.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2026

Transaction ID : SA11AI.16446

Amount of Each Receipt this Period

616.00

☐ Memo Item

In-kind - Postage

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1568.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 34 OF 80  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**BLUE CD2 NEW MEXICO USA**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Indivisible Taos United**

Mailing Address 26 Dos Palas

City

Arroyo Seco

State

NM

Zip Code

87514

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐  
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

1170.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 30 / 2026

Transaction ID : SA11AI.16449

Amount of Each Receipt this Period

560.00

☐ Memo Item

In-kind - Postage

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Jaeger-Siegel, Leora, , ,**

Mailing Address POB 915

City

Sandia Park

State

NM

Zip Code

87047

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

None

Not employed

Receipt For:

☐  
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 03 / 2026

Transaction ID : SA11AI.16186

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Jaeger-Siegel, Leora, , ,**

Mailing Address POB 915

City

Sandia Park

State

NM

Zip Code

87047

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

None

Not employed

Receipt For:

☐  
☐

Primary

General

Other (specify)

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 22 / 2026

Transaction ID : SA11AI.16270

Amount of Each Receipt this Period

500.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

2060.00

**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

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(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**BLUE CD2 NEW MEXICO USA**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Jaeger-Siegel, Leora, , ,**

Mailing Address POB 915

City  
Sandia Park

State  
NM

Zip Code  
87047

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
None

Occupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 01 / 2026

Transaction ID : SA11AI.16355

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Jaeger-Siegel, Leora, , ,**

Mailing Address POB 915

City  
Sandia Park

State  
NM

Zip Code  
87047

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
None

Occupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3150.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 30 / 2026

Transaction ID : SA11AI.17023

Amount of Each Receipt this Period

400.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Jones, Christopher S, , ,**

Mailing Address 4 Kissick St

City  
Tularosa

State  
NM

Zip Code  
88352

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
None

Occupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 30 / 2026

Transaction ID : SA11AI.17049

Amount of Each Receipt this Period

500.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1150.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 36 OF 80  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

BLUE CD2 NEW MEXICO USA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A.** Kalishman, Summers, , ,

Mailing Address 1043 Columbus Drive NE

City  
AlbuquerqueState  
NMZip Code  
87106FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
not employedOccupation (for Individual)  
not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 27 / 2026

Transaction ID : SA11AI.16534

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B.** Katz/Dichtelmiller, Nancy & Margo, , ,

Mailing Address 63 E. Wildflower Drive

City  
Santa FeState  
NMZip Code  
87506FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not EmployedOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 08 / 2026

Transaction ID : SA11AI.17088

Amount of Each Receipt this Period

15000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C.** Kelly, Susan, , ,

Mailing Address 713 Camino Espanol NW

City  
AlbuquerqueState  
NMZip Code  
87107FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NoneOccupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

230.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 17 / 2026

Transaction ID : SA11AI.16222

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

15300.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 37 OF 80  
(check only one)☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

BLUE CD2 NEW MEXICO USA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A.** Kelly, Susan, , ,

Mailing Address 713 Camino Espanol NW

City  
AlbuquerqueState  
NMZip Code  
87107FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NoneOccupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 17 / 2026

Transaction ID : SA11AI.16402

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B.** Kelly, Susan, , ,

Mailing Address 713 Camino Espanol NW

City  
AlbuquerqueState  
NMZip Code  
87107FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NoneOccupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 17 / 2026

Transaction ID : SA11AI.16955

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C.** Kelly, Susan, , ,

Mailing Address 713 Camino Espanol NW

City  
AlbuquerqueState  
NMZip Code  
87107FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NoneOccupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

361.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2026

Transaction ID : SA11AI.16884

Amount of Each Receipt this Period

30.50

☐ Memo Item

In-kind - Postage

SUBTOTAL of Receipts This Page (optional)..... ►

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

130.50

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

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

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NAME OF COMMITTEE (In Full)

**BLUE CD2 NEW MEXICO USA**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. King, Kathy, , ,**

Mailing Address 30 Magdalena Court

City  
Mill Valley

State  
CA

Zip Code  
94941

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employed

Occupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

04 / 20 / 2026

Transaction ID : SA11AI.16248

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Kistin, Naomi, , ,**

Mailing Address 3101 La Mancha Drive NW

City  
Albuquerque

State  
NM

Zip Code  
87104

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not Employed

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 30 / 2026

Transaction ID : SA11AI.17032

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Kuehn, Nandini, , ,**

Mailing Address 102 Palacio Road

City  
Corrales

State  
NM

Zip Code  
87048

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employed

Occupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 30 / 2026

Transaction ID : SA11AI.17025

Amount of Each Receipt this Period

250.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1000.00

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

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

FOR LINE NUMBER: PAGE 39 OF 80  
 (check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**BLUE CD2 NEW MEXICO USA**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Lemons, Allison, , ,**

Mailing Address 116 Sereno Drive

City  
Santa Fe

State  
NM

Zip Code  
87501

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
not employed

Occupation (for Individual)  
not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

MM / DD / YYYY  
06 / 23 / 2026

Transaction ID : SA11AI.16969

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Luckey, Marjorie, , ,**

Mailing Address 1540 Weimer Road

City  
Taos

State  
NM

Zip Code  
87571

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BarnabasHealth

Occupation (for Individual)  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3150.00

Date of Receipt

MM / DD / YYYY  
04 / 14 / 2026

Transaction ID : SA11AI.16217

Amount of Each Receipt this Period

3000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Luckey, Marjorie, , ,**

Mailing Address 1540 Weimer Road

City  
Taos

State  
NM

Zip Code  
87571

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BarnabasHealth

Occupation (for Individual)  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3200.00

Date of Receipt

MM / DD / YYYY  
05 / 13 / 2026

Transaction ID : SA11AI.16394

Amount of Each Receipt this Period

50.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

3090.00

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

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

FOR LINE NUMBER: PAGE 40 OF 80  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**BLUE CD2 NEW MEXICO USA**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Luckey, Marjorie, , ,**

Mailing Address 1540 Weimer Road

City  
Taos

State  
NM

Zip Code  
87571

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BarnabasHealth

Occupation (for Individual)  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 13 / 2026

**Transaction ID : SA11AI.16569**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Ludden, James, , ,**

Mailing Address 428 Valverde Commons Drive

City  
Taos

State  
NM

Zip Code  
87571

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
not emmployed

Occupation (for Individual)  
not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 20 / 2026

**Transaction ID : SA11AI.16243**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Lynch, Susan A, , ,**

Mailing Address 905 E. Joffre

City

Truth or Consequences

State  
NM

Zip Code  
87901

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
retired

Occupation (for Individual)  
retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 23 / 2026

**Transaction ID : SA11AI.16308**

Amount of Each Receipt this Period

50.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1100.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 41 OF 80  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**BLUE CD2 NEW MEXICO USA**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Lynch, Susan A, , ,**

Mailing Address 905 E. Joffre

City

Truth or Consequences

State

NM

Zip Code

87901

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
retiredOccupation (for Individual)  
retired

Receipt For:

☐  
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 27 / 2026

Transaction ID : SA11AI.16988

Amount of Each Receipt this Period

100.00

☐

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. McGuire, David, , ,**

Mailing Address 525 Solar Road NW

City

Albuquerque

State

NM

Zip Code

87107

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
not employedOccupation (for Individual)  
not employed

Receipt For:

☐  
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

210.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 18 / 2026

Transaction ID : SA11AI.16229

Amount of Each Receipt this Period

10.00

☐

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. McGuire, David, , ,**

Mailing Address 525 Solar Road NW

City

Albuquerque

State

NM

Zip Code

87107

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
not employedOccupation (for Individual)  
not employed

Receipt For:

☐  
☐

Primary

General

Other (specify)

Aggregate Year-to-Date ▼

220.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 18 / 2026

Transaction ID : SA11AI.16407

Amount of Each Receipt this Period

10.00

☐

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

120.00

**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 PageFOR LINE NUMBER: PAGE 42 OF 80  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**BLUE CD2 NEW MEXICO USA**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. McGuire, David, , ,**

Mailing Address 525 Solar Road NW

City  
AlbuquerqueState  
NMZip Code  
87107FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
not employedOccupation (for Individual)  
not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 18 / 2026

Transaction ID : SA11AI.16958

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. McGuire, David, , ,**

Mailing Address 525 Solar Road NW

City  
AlbuquerqueState  
NMZip Code  
87107FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
not employedOccupation (for Individual)  
not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2026

Transaction ID : SA11AI.16865

Amount of Each Receipt this Period

30.50

☐ Memo Item

In-kind - Postage

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Melton, Glenn, , ,**

Mailing Address 33 Adobe Ranch Trl

City  
AlamogordoState  
NMZip Code  
88310FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employedOccupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 19 / 2026

Transaction ID : SA11AI.16233

Amount of Each Receipt this Period

100.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

140.50

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

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

FOR LINE NUMBER: PAGE 43 OF 80  
 (check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**BLUE CD2 NEW MEXICO USA**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Melton, Glenn, , ,**

Mailing Address 33 Adobe Ranch Trl

City  
Alamogordo

State  
NM

Zip Code  
88310

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employed

Occupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 05 / 20 / 2026

Transaction ID : SA11AI.16415

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Melton, Glenn, , ,**

Mailing Address 33 Adobe Ranch Trl

City  
Alamogordo

State  
NM

Zip Code  
88310

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employed

Occupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 05 / 21 / 2026

Transaction ID : SA11AI.16417

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Melton, Glenn, , ,**

Mailing Address 33 Adobe Ranch Trl

City  
Alamogordo

State  
NM

Zip Code  
88310

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employed

Occupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 06 / 19 / 2026

Transaction ID : SA11AI.16961

Amount of Each Receipt this Period

100.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

300.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 44 OF 80  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

BLUE CD2 NEW MEXICO USA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Melton, Glenn, , ,**

Mailing Address 33 Adobe Ranch Trl

City  
AlamogordoState  
NMZip Code  
88310FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employedOccupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 20 / 2026

Transaction ID : SA11AI.16963

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Melton, Kimberly, , ,**

Mailing Address 33 Adobe Ranch Trail

City  
AlamogordoState  
NMZip Code  
88310FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Fred HutchOccupation (for Individual)  
Technical Lead Digital Pathology

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2026

Transaction ID : SA11AI.17006

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Melton, Kimberly, , ,**

Mailing Address 33 Adobe Ranch Trail

City  
AlamogordoState  
NMZip Code  
88310FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Fred HutchOccupation (for Individual)  
Technical Lead Digital Pathology

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2026

Transaction ID : SA11AI.17043

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

300.00

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

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

FOR LINE NUMBER: PAGE 45 OF 80  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**BLUE CD2 NEW MEXICO USA**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Monaco, Kay, , ,**

Mailing Address 308 13th Street NW

City  
Albuquerque

State  
NM

Zip Code  
87102

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
not employed

Occupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
04 / 05 / 2026

Transaction ID : SA11AI.16194

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Monaco, Kay, , ,**

Mailing Address 308 13th Street NW

City  
Albuquerque

State  
NM

Zip Code  
87102

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
not employed

Occupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

MM / DD / YYYY  
05 / 05 / 2026

Transaction ID : SA11AI.16364

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Monaco, Kay, , ,**

Mailing Address 308 13th Street NW

City  
Albuquerque

State  
NM

Zip Code  
87102

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
not employed

Occupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY  
06 / 05 / 2026

Transaction ID : SA11AI.16554

Amount of Each Receipt this Period

50.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

150.00

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

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

FOR LINE NUMBER: PAGE 46 OF 80  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**BLUE CD2 NEW MEXICO USA**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Moore, Lucy, , ,**

Mailing Address 5 Seton Plaza

City  
Santa Fe

State  
NM

Zip Code  
87508

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
self

Occupation (for Individual)  
mediator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2026

Transaction ID : SA11AI.16486

Amount of Each Receipt this Period

91.50

☐ Memo Item

In-kind - Postage

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Mussells, Constance, , ,**

Mailing Address 5019 Night Hawk Drive NE

City  
Rio Rancho

State  
NM

Zip Code  
87144

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self

Occupation (for Individual)  
Marketing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 04 / 2026

Transaction ID : SA11AI.16188

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Mussells, Constance, , ,**

Mailing Address 5019 Night Hawk Drive NE

City  
Rio Rancho

State  
NM

Zip Code  
87144

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self

Occupation (for Individual)  
Marketing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 04 / 2026

Transaction ID : SA11AI.16360

Amount of Each Receipt this Period

50.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

191.50

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

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

FOR LINE NUMBER: PAGE 47 OF 80  
 (check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

**BLUE CD2 NEW MEXICO USA**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Mussells, Constance, , ,**

Mailing Address 5019 Night Hawk Drive NE

City  
Rio Rancho

State  
NM

Zip Code  
87144

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self

Occupation (for Individual)  
Marketing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

MM / DD / YYYY  
 05 / 07 / 2026

Transaction ID : SA11AI.16377

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Mussells, Constance, , ,**

Mailing Address 5019 Night Hawk Drive NE

City  
Rio Rancho

State  
NM

Zip Code  
87144

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self

Occupation (for Individual)  
Marketing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

MM / DD / YYYY  
 06 / 04 / 2026

Transaction ID : SA11AI.16553

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Mussells, Constance, , ,**

Mailing Address 5019 Night Hawk Drive NE

City  
Rio Rancho

State  
NM

Zip Code  
87144

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self

Occupation (for Individual)  
Marketing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

950.00

Date of Receipt

MM / DD / YYYY  
 06 / 30 / 2026

Transaction ID : SA11AI.17065

Amount of Each Receipt this Period

250.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

450.00

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

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

FOR LINE NUMBER: PAGE 48 OF 80  
 (check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**BLUE CD2 NEW MEXICO USA**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Padilla, Patricia, , ,**

Mailing Address Unknown

City  
Santa Fe

State  
NM

Zip Code  
87505

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Unknown

Occupation (for Individual)  
Unknown

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

274.50

Date of Receipt

MM / DD / YYYY  
 06 / 30 / 2026

Transaction ID : SA11AI.16492

Amount of Each Receipt this Period

274.50

☐ Memo Item

In-kind - Postage

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Pope, Nancy, , ,**

Mailing Address 1007 Chavez Road NW

City  
Albuquerque

State  
NM

Zip Code  
87107

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self

Occupation (for Individual)  
Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY  
 04 / 22 / 2026

Transaction ID : SA11AI.16286

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Salas, Beverly, , ,**

Mailing Address 901 Roma Ave. NW

City  
Albuquerque

State  
NM

Zip Code  
87102

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employed

Occupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

244.00

Date of Receipt

MM / DD / YYYY  
 06 / 30 / 2026

Transaction ID : SA11AI.16635

Amount of Each Receipt this Period

122.00

☐ Memo Item

In-kind - Postage

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

646.50

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 49 OF 80  
(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 |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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)

BLUE CD2 NEW MEXICO USA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Scribner, Penny, , ,

Mailing Address 3907 Shady Brook Court

City  
Las Cruces

State  
NM

Zip Code  
88005

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
none

Occupation (for Individual)  
retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.00

Date of Receipt

06 / 30 / 2026

Transaction ID : SA11AI.16743

Amount of Each Receipt this Period

61.00

☐ Memo Item

In-kind - Postage

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Seidenwurm, Rhonda, , ,

Mailing Address 6562 Basket Weaver Avenue NW

City  
Albuquerque

State  
NM

Zip Code  
87114

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not Employed

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

06 / 03 / 2026

Transaction ID : SA11AI.16551

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Simmons, John, , ,

Mailing Address 2710 San Joaquin Avenue SE

City  
Albuquerque

State  
NM

Zip Code  
87108

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
not employed

Occupation (for Individual)  
not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

04 / 20 / 2026

Transaction ID : SA11AI.16242

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

186.00

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

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

FOR LINE NUMBER: PAGE 50 OF 80  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**BLUE CD2 NEW MEXICO USA**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Simmons, John, , ,**

Mailing Address 2710 San Joaquin Avenue SE

City  
Albuquerque

State  
NM

Zip Code  
87108

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
not employed

Occupation (for Individual)  
not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 23 / 2026

**Transaction ID : SA11AI.16970**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Swanson, Jeff, , ,**

Mailing Address 146 San Pedro Dr

City  
Alamogordo

State  
NM

Zip Code  
88310

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
None

Occupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 26 / 2026

**Transaction ID : SA11AI.16352**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Swanson, Jeff, , ,**

Mailing Address 146 San Pedro Dr

City  
Alamogordo

State  
NM

Zip Code  
88310

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
None

Occupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 30 / 2026

**Transaction ID : SA11AI.16997**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1100.00

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

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

FOR LINE NUMBER: PAGE 51 OF 80  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**BLUE CD2 NEW MEXICO USA**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Trojahn, Lynn, , ,**

Mailing Address 6401 Salamanca Ct Nw

City  
Los Ranchos

State  
NM

Zip Code  
87107

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self-employed

Occupation (for Individual)  
Fundraising consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3400.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 03 / 2026

**Transaction ID : SA11AI.16185**

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Trojahn, Lynn, , ,**

Mailing Address 6401 Salamanca Ct Nw

City  
Los Ranchos

State  
NM

Zip Code  
87107

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self-employed

Occupation (for Individual)  
Fundraising consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3450.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 04 / 2026

**Transaction ID : SA11AI.16187**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Trojahn, Lynn, , ,**

Mailing Address 6401 Salamanca Ct Nw

City  
Los Ranchos

State  
NM

Zip Code  
87107

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self-employed

Occupation (for Individual)  
Fundraising consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3950.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
04 / 09 / 2026

**Transaction ID : SA11AI.16204**

Amount of Each Receipt this Period

500.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

570.00

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

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

FOR LINE NUMBER: PAGE 52 OF 80  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**BLUE CD2 NEW MEXICO USA**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Trojahn, Lynn, , ,**

Mailing Address 6401 Salamanca Ct Nw

City  
Los Ranchos

State  
NM

Zip Code  
87107

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self-employed

Occupation (for Individual)  
Fundraising consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4200.25

Date of Receipt

04 / 22 / 2026

Transaction ID : SA11AI.16299

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Trojahn, Lynn, , ,**

Mailing Address 6401 Salamanca Ct Nw

City  
Los Ranchos

State  
NM

Zip Code  
87107

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self-employed

Occupation (for Individual)  
Fundraising consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4220.25

Date of Receipt

05 / 03 / 2026

Transaction ID : SA11AI.16358

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Trojahn, Lynn, , ,**

Mailing Address 6401 Salamanca Ct Nw

City  
Los Ranchos

State  
NM

Zip Code  
87107

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self-employed

Occupation (for Individual)  
Fundraising consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

4270.25

Date of Receipt

05 / 04 / 2026

Transaction ID : SA11AI.16361

Amount of Each Receipt this Period

50.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

320.00

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

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

FOR LINE NUMBER: PAGE 53 OF 80  
(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)

**BLUE CD2 NEW MEXICO USA**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Trojahn, Lynn, , ,**

Mailing Address 6401 Salamanca Ct Nw

City  
Los Ranchos

State  
NM

Zip Code  
87107

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self-employed

Occupation (for Individual)  
Fundraising consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4370.25

Date of Receipt

MM / DD / YYYY  
05 / 05 / 2026

Transaction ID : SA11AI.16370

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Trojahn, Lynn, , ,**

Mailing Address 6401 Salamanca Ct Nw

City  
Los Ranchos

State  
NM

Zip Code  
87107

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self-employed

Occupation (for Individual)  
Fundraising consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4470.25

Date of Receipt

MM / DD / YYYY  
05 / 06 / 2026

Transaction ID : SA11AI.16371

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Trojahn, Lynn, , ,**

Mailing Address 6401 Salamanca Ct Nw

City  
Los Ranchos

State  
NM

Zip Code  
87107

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self-employed

Occupation (for Individual)  
Fundraising consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

4720.25

Date of Receipt

MM / DD / YYYY  
05 / 17 / 2026

Transaction ID : SA11AI.16404

Amount of Each Receipt this Period

250.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

450.00

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

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

FOR LINE NUMBER: PAGE 54 OF 80  
 (check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**BLUE CD2 NEW MEXICO USA**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Trojahn, Lynn, , ,**

Mailing Address 6401 Salamanca Ct Nw

City  
Los Ranchos

State  
NM

Zip Code  
87107

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self-employed

Occupation (for Individual)  
Fundraising consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4820.25

Date of Receipt

MM / DD / YYYY  
05 / 31 / 2026

Transaction ID : SA11AI.16435

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Trojahn, Lynn, , ,**

Mailing Address 6401 Salamanca Ct Nw

City  
Los Ranchos

State  
NM

Zip Code  
87107

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self-employed

Occupation (for Individual)  
Fundraising consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4840.25

Date of Receipt

MM / DD / YYYY  
06 / 03 / 2026

Transaction ID : SA11AI.16550

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Trojahn, Lynn, , ,**

Mailing Address 6401 Salamanca Ct Nw

City  
Los Ranchos

State  
NM

Zip Code  
87107

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self-employed

Occupation (for Individual)  
Fundraising consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

4890.25

Date of Receipt

MM / DD / YYYY  
06 / 04 / 2026

Transaction ID : SA11AI.16552

Amount of Each Receipt this Period

50.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

170.00

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

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

FOR LINE NUMBER: PAGE 55 OF 80  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**BLUE CD2 NEW MEXICO USA**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Trojahn, Lynn, , ,**

Mailing Address 6401 Salamanca Ct Nw

City  
Los Ranchos

State  
NM

Zip Code  
87107

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self-employed

Occupation (for Individual)  
Fundraising consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5390.25

Date of Receipt

MM / DD / YYYY  
06 / 24 / 2026

Transaction ID : SA11AI.17087

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Trojahn, Lynn, , ,**

Mailing Address 6401 Salamanca Ct Nw

City  
Los Ranchos

State  
NM

Zip Code  
87107

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self-employed

Occupation (for Individual)  
Fundraising consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5405.50

Date of Receipt

MM / DD / YYYY  
06 / 30 / 2026

Transaction ID : SA11AI.16910

Amount of Each Receipt this Period

15.25

☐ Memo Item

In-kind - Postage

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Vance, Gayle, , ,**

Mailing Address 2328 Via Seville Rd NW

City  
Albuquerque

State  
NM

Zip Code  
87104

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employed

Occupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
06 / 30 / 2026

Transaction ID : SA11AI.17026

Amount of Each Receipt this Period

250.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

765.25

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

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

FOR LINE NUMBER: PAGE 56 OF 80  
(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             |                              |                              |                             |

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)

**BLUE CD2 NEW MEXICO USA**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VanDevender, Nancy, , ,**

Mailing Address 10501 Lagrima de Oro NE  
Apt. 6309

City  
Albuquerque

State  
NM

Zip Code  
87111

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Retired

Occupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

671.00

Date of Receipt

MM / DD / YYYY  
06 / 30 / 2026

Transaction ID : SA11AI.16911

Amount of Each Receipt this Period

366.00

☐ Memo Item

In-kind - Postage

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Vining, Margaret, , ,**

Mailing Address 3323 Santa Clara SE

City  
Albuquerque

State  
NM

Zip Code  
87106

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
not employed

Occupation (for Individual)  
not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY  
04 / 27 / 2026

Transaction ID : SA11AI.16316

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Vining, Margaret, , ,**

Mailing Address 3323 Santa Clara SE

City  
Albuquerque

State  
NM

Zip Code  
87106

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
not employed

Occupation (for Individual)  
not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY  
05 / 27 / 2026

Transaction ID : SA11AI.16427

Amount of Each Receipt this Period

100.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

566.00

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

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

FOR LINE NUMBER: PAGE 57 OF 80  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**BLUE CD2 NEW MEXICO USA**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Vining, Margaret, , ,**

Mailing Address 3323 Santa Clara SE

City  
Albuquerque

State  
NM

Zip Code  
87106

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
not employed

Occupation (for Individual)  
not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

MM / DD / YYYY  
06 / 27 / 2026

Transaction ID : SA11AI.16987

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Wiese, Janislee, , ,**

Mailing Address 7707 Rio Grande Blvd. NW

City  
Albuquerque

State  
NM

Zip Code  
87107

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employed

Occupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1091.50

Date of Receipt

MM / DD / YYYY  
06 / 30 / 2026

Transaction ID : SA11AI.16914

Amount of Each Receipt this Period

45.75

☐ Memo Item

In-kind - Postage

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Williams, Sharon, , ,**

Mailing Address 614 7th St

City  
Tularosa

State  
NM

Zip Code  
88352

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employed

Occupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

745.00

Date of Receipt

MM / DD / YYYY  
04 / 02 / 2026

Transaction ID : SA11AI.16184

Amount of Each Receipt this Period

25.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

170.75

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

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

FOR LINE NUMBER: PAGE 58 OF 80  
(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"/>                | <input type="checkbox"/>     | <input type="checkbox"/>     | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)

**BLUE CD2 NEW MEXICO USA**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Williams, Sharon, , ,**

Mailing Address 614 7th St

City  
Tularosa

State  
NM

Zip Code  
88352

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employed

Occupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

765.00

Date of Receipt

04 / 05 / 2026

Transaction ID : SA11AI.16191

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Williams, Sharon, , ,**

Mailing Address 614 7th St

City  
Tularosa

State  
NM

Zip Code  
88352

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employed

Occupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

785.00

Date of Receipt

04 / 09 / 2026

Transaction ID : SA11AI.16202

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Williams, Sharon, , ,**

Mailing Address 614 7th St

City  
Tularosa

State  
NM

Zip Code  
88352

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employed

Occupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

885.00

Date of Receipt

04 / 22 / 2026

Transaction ID : SA11AI.16290

Amount of Each Receipt this Period

100.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

140.00

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

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

FOR LINE NUMBER: PAGE 59 OF 80  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**BLUE CD2 NEW MEXICO USA**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Williams, Sharon, , ,**

Mailing Address 614 7th St

City  
Tularosa

State  
NM

Zip Code  
88352

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employed

Occupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

910.00

Date of Receipt

MM / DD / YYYY  
05 / 02 / 2026

Transaction ID : SA11AI.16356

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Williams, Sharon, , ,**

Mailing Address 614 7th St

City  
Tularosa

State  
NM

Zip Code  
88352

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employed

Occupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

930.00

Date of Receipt

MM / DD / YYYY  
05 / 05 / 2026

Transaction ID : SA11AI.16368

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Williams, Sharon, , ,**

Mailing Address 614 7th St

City  
Tularosa

State  
NM

Zip Code  
88352

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employed

Occupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

950.00

Date of Receipt

MM / DD / YYYY  
05 / 09 / 2026

Transaction ID : SA11AI.16384

Amount of Each Receipt this Period

20.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

65.00

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

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

FOR LINE NUMBER: PAGE 60 OF 80  
 (check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**BLUE CD2 NEW MEXICO USA**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Williams, Sharon, , ,**

Mailing Address 614 7th St

City  
Tularosa

State  
NM

Zip Code  
88352

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employed

Occupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

975.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 / 02 / 2026

Transaction ID : SA11AI.16549

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Williams, Sharon, , ,**

Mailing Address 614 7th St

City  
Tularosa

State  
NM

Zip Code  
88352

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employed

Occupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

995.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 / 05 / 2026

Transaction ID : SA11AI.16559

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Williams, Sharon, , ,**

Mailing Address 614 7th St

City  
Tularosa

State  
NM

Zip Code  
88352

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employed

Occupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1015.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 / 09 / 2026

Transaction ID : SA11AI.16563

Amount of Each Receipt this Period

20.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

65.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 61 OF 80  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

BLUE CD2 NEW MEXICO USA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A.** Williams, Sharon, , ,

Mailing Address 614 7th St

City  
TularosaState  
NMZip Code  
88352FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employedOccupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1265.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 30 / 2026

Transaction ID : SA11AI.17009

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B.** Williams, Sharon, , ,

Mailing Address 614 7th St

City  
TularosaState  
NMZip Code  
88352FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employedOccupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1515.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 30 / 2026

Transaction ID : SA11AI.17044

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C.** Williams, Sharon, , ,

Mailing Address 614 7th St

City  
TularosaState  
NMZip Code  
88352FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employedOccupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1765.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 30 / 2026

Transaction ID : SA11AI.17057

Amount of Each Receipt this Period

250.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

750.00

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

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

FOR LINE NUMBER: PAGE 62 OF 80  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**BLUE CD2 NEW MEXICO USA**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A.** Williams, Sharon, , ,

Mailing Address 614 7th St

City  
Tularosa

State  
NM

Zip Code  
88352

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not employed

Occupation (for Individual)  
Not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2015.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2026

Transaction ID : SA11AI.17070

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

250.00

62417.25

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 63 OF 80

|                                         |                              |                              |                             |                              |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <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)

BLUE CD2 NEW MEXICO USA

Full Name (Last, First, Middle Initial)

**A. ActBlue**

Mailing Address 366 Summer St.

City  
SomervilleState  
MAZip Code  
02144-3132Purpose of Disbursement  
fees

001

Candidate Name

BLUE CD2 NEW MEXICO USA

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                          |                   |                                     |         |
|--------------------------|-------------------|-------------------------------------|---------|
| <input type="checkbox"/> | Primary           | <input checked="" type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                                     |         |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 3 | 0 |   |   | 2 | 0 | 2 | 6 |   |   |

FEC Identification Number

C C00797340

Transaction ID : SB21B.17089

Amount of Each Disbursement this Period

2438.67

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Armstrong, Leigh, , ,**

Mailing Address 1036 PURPLE ASTER

City  
BernalilloState  
NMZip Code  
87004Purpose of Disbursement  
In-kind - Postage

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For:

|                          |                 |                          |         |
|--------------------------|-----------------|--------------------------|---------|
| <input type="checkbox"/> | Primary         | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) |                          |         |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 3 | 0 |   |   | 2 | 0 | 2 | 6 |   |   |

FEC Identification Number

C

Transaction ID : SB21B.16838

Amount of Each Disbursement this Period

152.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Berton-Reilly, Elizabeth, , ,**

Mailing Address 4742 Southern Avenue SE

City  
AlbuquerqueState  
NMZip Code  
87108Purpose of Disbursement  
Data Entry

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 4 |   |   | 2 | 0 |   |   | 2 | 0 | 2 | 6 |   |   |

FEC Identification Number

C

Transaction ID : SB21B.16335

Amount of Each Disbursement this Period

380.00

☐ Memo Item

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

2971.17

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 64 OF 80

|                                         |                              |                              |                             |                              |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <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)

BLUE CD2 NEW MEXICO USA

Full Name (Last, First, Middle Initial)

**A. Berton-Reilly, Elizabeth, , ,**

Mailing Address 4742 Southern Avenue SE

City  
AlbuquerqueState  
NMZip Code  
87108

Purpose of Disbursement

Data Entry

Candidate Name

001

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   |   | 0 | 4 |   |   | 2 | 0 | 2 | 6 |   |

FEC Identification Number

C

Transaction ID : SB21B.16520

Amount of Each Disbursement this Period

320.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Berton-Reilly, Elizabeth, , ,**

Mailing Address 4742 Southern Avenue SE

City  
AlbuquerqueState  
NMZip Code  
87108

Purpose of Disbursement

Data Entry

Candidate Name

001

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   |   | 1 | 1 |   |   | 2 | 0 | 2 | 6 |   |

FEC Identification Number

C

Transaction ID : SB21B.16521

Amount of Each Disbursement this Period

119.98

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Bitly.com**Mailing Address 601 W. 26th Street  
3rd floorCity  
New YorkState  
NYZip Code  
10001-1101

Purpose of Disbursement

Marketing

Candidate Name

004

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   |   | 1 | 8 |   |   | 2 | 0 | 2 | 6 |   |

FEC Identification Number

C

Transaction ID : SB21B.16521

Amount of Each Disbursement this Period

37.61

☐ Memo Item

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

477.59

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 65 OF 80

|                                         |                              |                              |                             |                              |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <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)

BLUE CD2 NEW MEXICO USA

Full Name (Last, First, Middle Initial)

**A. Bitly.com**Mailing Address 601 W. 26th Street  
3rd floorCity  
New YorkState  
NYZip Code  
10001-1101

Purpose of Disbursement

Marketing

Candidate Name

004

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 2 | 0 |   |   | 2 | 0 | 2 | 6 |   |   |

FEC Identification Number

C

Transaction ID : SB21B.16977

Amount of Each Disbursement this Period

37.61

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Canva US Inc.**

Mailing Address 200 E. 6th Street

City  
AustinState  
TXZip Code  
78701

Purpose of Disbursement

Marketing

Candidate Name

004

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 4 |   |   | 1 | 3 |   |   | 2 | 0 | 2 | 6 |   |   |

FEC Identification Number

C

Transaction ID : SB21B.16330

Amount of Each Disbursement this Period

264.99

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Constant Contact**

Mailing Address 1601 Tupelo Rd

City  
WalthamState  
MAZip Code  
02421

Purpose of Disbursement

maintain email lists

Candidate Name

BLUE CD2 NEW MEXICO USA

001

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 4 |   |   | 1 | 2 |   |   | 2 | 0 | 2 | 6 |   |   |

FEC Identification Number

C

C00797340

Transaction ID : SB21B.16325

Amount of Each Disbursement this Period

97.77

☐ Memo Item

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

400.37

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 66 OF 80

|                                         |                              |                              |                             |                              |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <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)

BLUE CD2 NEW MEXICO USA

Full Name (Last, First, Middle Initial)

**A. Constant Contact**

Mailing Address 1601 Tupelo Rd

City  
WalthamState  
MAZip Code  
02421

Purpose of Disbursement

maintain email lists

001

Candidate Name

BLUE CD2 NEW MEXICO USA

Category/  
Type

Office Sought:

☐ House☐ Senate☐ President

Disbursement For: 2026

☒ Primary☐ General☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y  
05 / 12 / 2026

FEC Identification Number

C C00797340

Transaction ID : SB21B.16524

Amount of Each Disbursement this Period

97.77

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Constant Contact**

Mailing Address 1601 Tupelo Rd

City  
WalthamState  
MAZip Code  
02421

Purpose of Disbursement

maintain email lists

001

Candidate Name

Office Sought:

☐ House☐ Senate☐ President

Disbursement For: 2026

☒ Primary☐ General☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y  
06 / 12 / 2026

FEC Identification Number

C

Transaction ID : SB21B.16976

Amount of Each Disbursement this Period

111.74

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Davis, Shirley, , ,**

Mailing Address 3045 Buena Vida Cir, Apt 112

City  
Las CrucesState  
NMZip Code  
88011

Purpose of Disbursement

In-kind - Postage

Candidate Name

Office Sought:

☐ House☐ Senate☐ President

Disbursement For:

☐ Primary☐ General☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y  
06 / 30 / 2026

FEC Identification Number

C

Transaction ID : SB21B.16756

Amount of Each Disbursement this Period

167.75

☐ Memo Item

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

377.26

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 67 OF 80

|                                         |                              |                              |                             |                              |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <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)

BLUE CD2 NEW MEXICO USA

Full Name (Last, First, Middle Initial)

**A. Dever, Franny, , ,**

Mailing Address 511 La Comunidad NW

City  
AlbuquerqueState  
NMZip Code  
87114

Purpose of Disbursement

In-kind - Postage

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For:

|                          |                   |                          |         |
|--------------------------|-------------------|--------------------------|---------|
| <input type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                          |         |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | / | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 3 | 0 |   | 2 | 0 | 2 | 6 |   |

FEC Identification Number

C

Transaction ID : SB21B.16829

Amount of Each Disbursement this Period

122.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. East Mountain Progressives**

Mailing Address 5 Twin Tree Court

City  
Cedar CrestState  
NMZip Code  
87008

Purpose of Disbursement

In-kind - Postage

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For:

|                          |                 |                          |         |
|--------------------------|-----------------|--------------------------|---------|
| <input type="checkbox"/> | Primary         | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) |                          |         |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | / | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 3 | 0 |   | 2 | 0 | 2 | 6 |   |

FEC Identification Number

C

Transaction ID : SB21B.16456

Amount of Each Disbursement this Period

252.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ESRI**

Mailing Address 380 New York Street

City  
RedlandsState  
CAZip Code  
92373

Purpose of Disbursement

Data

Candidate Name

001

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | / | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 2 | 0 |   | 2 | 0 | 2 | 6 |   |

FEC Identification Number

C

Transaction ID : SB21B.16978

Amount of Each Disbursement this Period

129.15

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

503.15

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 68 OF 80

|                                         |                              |                              |                             |                              |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <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)

BLUE CD2 NEW MEXICO USA

Full Name (Last, First, Middle Initial)

**A. Foundation Blue Media**

Mailing Address 325 P St NW Unit 103

City  
WashingtonState  
DCZip Code  
20001

Purpose of Disbursement

Media - Programmatic Advertising Purchase

Candidate Name

004

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 0 | 4 |   |   | 2 | 0 | 2 | 6 |   |   |

FEC Identification Number

C

Transaction ID : SB21B.16972

Amount of Each Disbursement this Period

2400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Haaland, Kathleen, , ,**

Mailing Address 809 Richmond Dr SE

City  
AlbuquerqueState  
NMZip Code  
87106

Purpose of Disbursement

In-kind - Postage

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For:

|                          |                 |                          |         |
|--------------------------|-----------------|--------------------------|---------|
| <input type="checkbox"/> | Primary         | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) |                          |         |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 3 | 0 |   |   | 2 | 0 | 2 | 6 |   |   |

FEC Identification Number

C

Transaction ID : SB21B.16800

Amount of Each Disbursement this Period

122.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Hollenbach, David, , ,**

Mailing Address 15 Cerro Blanco Rd

City  
LamyState  
NMZip Code  
87540

Purpose of Disbursement

In-kind - Postage

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For:

|                          |                   |                          |         |
|--------------------------|-------------------|--------------------------|---------|
| <input type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                          |         |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 3 | 0 |   |   | 2 | 0 | 2 | 6 |   |   |

FEC Identification Number

C

Transaction ID : SB21B.16466

Amount of Each Disbursement this Period

610.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

3132.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 69 OF 80

|                                         |                              |                              |                             |                              |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <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)

BLUE CD2 NEW MEXICO USA

Full Name (Last, First, Middle Initial)

**A. Indivisible Albuquerque**

Mailing Address 929 Adams Street NE

City  
AlbuquerqueState  
NMZip Code  
87110

Purpose of Disbursement

In-kind - Postage

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For:

|                          |                   |                          |         |
|--------------------------|-------------------|--------------------------|---------|
| <input type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                          |         |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 3 | 0 |   |   | 2 | 0 | 2 | 6 |   |   |

FEC Identification Number

C

Transaction ID : SB21B.16441

Amount of Each Disbursement this Period

3035.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Indivisible Cochiti Lake**

Mailing Address 6042 Hoochaneetsa Plaza

City  
Cochiti LakeState  
NMZip Code  
87083

Purpose of Disbursement

In-kind - Postage

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For:

|                          |                   |                          |         |
|--------------------------|-------------------|--------------------------|---------|
| <input type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                          |         |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 3 | 0 |   |   | 2 | 0 | 2 | 6 |   |   |

FEC Identification Number

C

Transaction ID : SB21B.16440

Amount of Each Disbursement this Period

392.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Indivisible Greater Eldorado Together**

Mailing Address 6 Encantado Road

City  
Santa FeState  
NMZip Code  
87508

Purpose of Disbursement

In-kind - Postage

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For:

|                          |                   |                          |         |
|--------------------------|-------------------|--------------------------|---------|
| <input type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                          |         |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 3 | 0 |   |   | 2 | 0 | 2 | 6 |   |   |

FEC Identification Number

C

Transaction ID : SB21B.16451

Amount of Each Disbursement this Period

840.00

☐ Memo Item

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

4267.00

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 70 OF 80

|                                         |                              |                              |                             |                              |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <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)

BLUE CD2 NEW MEXICO USA

Full Name (Last, First, Middle Initial)

**A. Indivisible Las Cruces - 1**

Mailing Address 1692 Calle de Valezquez

City  
Las CrucesState  
NMZip Code  
88007

Purpose of Disbursement

In-kind - Postage

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For:

|                          |                   |                          |         |
|--------------------------|-------------------|--------------------------|---------|
| <input type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                          |         |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 3 | 0 |   |   | 2 | 0 | 2 | 6 |   |   |

FEC Identification Number

**C**

Transaction ID : SB21B.16465

Amount of Each Disbursement this Period

700.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Indivisible Las Vegas-Mora**

Mailing Address 49 Patton Road, #728

City  
RociadaState  
NMZip Code  
87742

Purpose of Disbursement

In-kind - Postage

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For:

|                          |                   |                          |         |
|--------------------------|-------------------|--------------------------|---------|
| <input type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                          |         |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 3 | 0 |   |   | 2 | 0 | 2 | 6 |   |   |

FEC Identification Number

**C**

Transaction ID : SB21B.16459

Amount of Each Disbursement this Period

280.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Indivisible Otero County**

Mailing Address 2551 Adobe Ranch Trail

City  
AlamogordoState  
NMZip Code  
88310

Purpose of Disbursement

In-kind - Postage

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For:

|                          |                   |                          |         |
|--------------------------|-------------------|--------------------------|---------|
| <input type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                          |         |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 3 | 0 |   |   | 2 | 0 | 2 | 6 |   |   |

FEC Identification Number

**C**

Transaction ID : SB21B.16457

Amount of Each Disbursement this Period

560.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1540.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 71 OF 80

|                                         |                              |                              |                             |                              |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <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)

BLUE CD2 NEW MEXICO USA

Full Name (Last, First, Middle Initial)

**A. Indivisible Rio Grande**Mailing Address 17 Garden Park Circle NW  
ACity  
AlbuquerqueState  
NMZip Code  
87107

Purpose of Disbursement

In-kind - Postage

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For:

|                          |                   |                          |         |
|--------------------------|-------------------|--------------------------|---------|
| <input type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                          |         |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 3 | 0 |   |   | 2 | 0 | 2 | 6 |   |   |

FEC Identification Number

C

Transaction ID : SB21B.16461

Amount of Each Disbursement this Period

3355.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Indivisible Ruidoso (RIOT)**

Mailing Address 14 Rogal Place

City  
RuidosoState  
NMZip Code  
88345

Purpose of Disbursement

In-kind - Postage

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For:

|                          |                   |                          |         |
|--------------------------|-------------------|--------------------------|---------|
| <input type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                          |         |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 3 | 0 |   |   | 2 | 0 | 2 | 6 |   |   |

FEC Identification Number

C

Transaction ID : SB21B.16458

Amount of Each Disbursement this Period

280.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Indivisible Sandoval County**

Mailing Address 102 Palacio Road

City  
CorralesState  
NMZip Code  
87048

Purpose of Disbursement

In-kind - Postage

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For:

|                          |                   |                          |         |
|--------------------------|-------------------|--------------------------|---------|
| <input type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                          |         |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 3 | 0 |   |   | 2 | 0 | 2 | 6 |   |   |

FEC Identification Number

C

Transaction ID : SB21B.16466

Amount of Each Disbursement this Period

1083.00

☐ Memo Item

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

4718.00

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 72 OF 80

|                                         |                              |                              |                             |                              |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <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)

BLUE CD2 NEW MEXICO USA

Full Name (Last, First, Middle Initial)

**A. Indivisible Santa Fe SOS**

Mailing Address 404 Calle Kokopelli

City  
Santa FeState  
NMZip Code  
87501

Purpose of Disbursement

In-kind - Postage

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For:

|                          |                   |                          |         |
|--------------------------|-------------------|--------------------------|---------|
| <input type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                          |         |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 3 | 0 |   |   | 2 | 0 | 2 | 6 |   |   |

FEC Identification Number

C

Transaction ID : SB21B.16464

Amount of Each Disbursement this Period

840.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Indivisible Sierra County**Mailing Address 526 Marr Street  
Apt. 5

City

Truth or Consequences

State  
NMZip Code  
87901

Purpose of Disbursement

In-kind - Postage

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For:

|                          |                   |                          |         |
|--------------------------|-------------------|--------------------------|---------|
| <input type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                          |         |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 3 | 0 |   |   | 2 | 0 | 2 | 6 |   |   |

FEC Identification Number

C

Transaction ID : SB21B.16462

Amount of Each Disbursement this Period

112.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Indivisible Socorro**

Mailing Address 904 Leroy Place

City

Socorro

State  
NMZip Code  
87801

Purpose of Disbursement

In-kind - Postage

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For:

|                          |                   |                          |         |
|--------------------------|-------------------|--------------------------|---------|
| <input type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                          |         |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 3 | 0 |   |   | 2 | 0 | 2 | 6 |   |   |

FEC Identification Number

C

Transaction ID : SB21B.16463

Amount of Each Disbursement this Period

616.00

☐ Memo Item

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

1568.00

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

|                                     |     |                          |     |                          |     |                          |    |                          |     |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|-----|
| <input checked="" type="checkbox"/> | 21b | <input type="checkbox"/> | 22  | <input type="checkbox"/> | 23  | <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 |

BLUE CD2 NEW MEXICO USA

FEC Schedule B (Form 3X) Rev. 05/2016

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 74 OF 80

|                                         |                              |                              |                             |                              |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <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)

BLUE CD2 NEW MEXICO USA

Full Name (Last, First, Middle Initial)

**A. Mailchimp/The Rocket Science Group, LLC**Mailing Address 675 Ponce de Leon Ave NE,  
Suite 5000City  
AtlantaState  
GAZip Code  
30308Purpose of Disbursement  
maintain email lists

001

Category/  
Type

Candidate Name

BLUE CD2 NEW MEXICO USA

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 2 | 1 |   |   | 2 | 0 | 2 | 6 |   |

FEC Identification Number

C C00797340

Transaction ID : SB21B.16980

Amount of Each Disbursement this Period

1158.71

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Mailchimp/The Rocket Science Group, LLC**Mailing Address 675 Ponce de Leon Ave NE,  
Suite 5000City  
AtlantaState  
GAZip Code  
30308Purpose of Disbursement  
maintain email lists

001

Category/  
Type

Candidate Name

BLUE CD2 NEW MEXICO USA

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 2 | 1 |   |   | 2 | 0 | 2 | 6 |   |

FEC Identification Number

C C00797340

Transaction ID : SB21B.16981

Amount of Each Disbursement this Period

338.43

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Moore, Lucy, , ,**

Mailing Address 5 Seton Plaza

City  
Santa FeState  
NMZip Code  
87508Purpose of Disbursement  
In-kind - PostageCategory/  
Type

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For:

|                          |                   |                          |         |
|--------------------------|-------------------|--------------------------|---------|
| <input type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                          |         |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 3 | 0 |   |   | 2 | 0 | 2 | 6 |   |

FEC Identification Number

C

Transaction ID : SB21B.16495

Amount of Each Disbursement this Period

91.50

☐ Memo Item

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

1588.64

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 75 OF 80

|                                         |                              |                              |                             |                              |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <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)

BLUE CD2 NEW MEXICO USA

Full Name (Last, First, Middle Initial)

**A. NGP VAN**Mailing Address 655 15th Street NW  
Suite 650City  
WashingtonState  
DCZip Code  
20005

Purpose of Disbursement

Data Purchase

Candidate Name

001

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   |   | 0 | 4 |   |   | 2 | 0 | 2 | 6 |   |   |

FEC Identification Number

C

Transaction ID : SB21B.16535

Amount of Each Disbursement this Period

4008.87

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. NGP VAN**Mailing Address 655 15th Street NW  
Suite 650City  
WashingtonState  
DCZip Code  
20005

Purpose of Disbursement

Data Purchase

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   |   | 1 | 1 |   |   | 2 | 0 | 2 | 6 |   |   |

FEC Identification Number

C

Transaction ID : SB21B.16536

Amount of Each Disbursement this Period

4008.87

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Padilla, Patricia, , ,**

Mailing Address Unknown

City  
Santa FeState  
NMZip Code  
87505

Purpose of Disbursement

In-kind - Postage

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For:

|                          |                   |                          |         |
|--------------------------|-------------------|--------------------------|---------|
| <input type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                          |         |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 3 | 0 |   |   | 2 | 0 | 2 | 6 |   |   |

FEC Identification Number

C

Transaction ID : SB21B.16495

Amount of Each Disbursement this Period

274.50

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

8292.24

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 76 OF 80

|                                         |                              |                              |                             |                              |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <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)

BLUE CD2 NEW MEXICO USA

Full Name (Last, First, Middle Initial)

**A. Printer's Press**

Mailing Address 3831 Hawkins St NE

City  
AlbuquerqueState  
NMZip Code  
87109

Purpose of Disbursement

Marketing

Candidate Name

004

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 0 | 5 |   |   | 2 | 0 | 2 | 6 |   |   |

FEC Identification Number

C

Transaction ID : SB21B.17078

Amount of Each Disbursement this Period

236.78

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Salas, Beverly, , ,**

Mailing Address 901 Roma Ave. NW

City  
AlbuquerqueState  
NMZip Code  
87102

Purpose of Disbursement

In-kind - Postage

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For:

|                          |                 |                          |         |
|--------------------------|-----------------|--------------------------|---------|
| <input type="checkbox"/> | Primary         | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) |                          |         |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 3 | 0 |   |   | 2 | 0 | 2 | 6 |   |   |

FEC Identification Number

C

Transaction ID : SB21B.16657

Amount of Each Disbursement this Period

122.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Sales Force**

Mailing Address 415 Mission Street

City  
San FranciscoState  
CAZip Code  
94015

Purpose of Disbursement

Subscription to Plaateau (data analysis program)

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 4 |   |   | 2 | 4 |   |   | 2 | 0 | 2 | 6 |   |   |

FEC Identification Number

C

Transaction ID : SB21B.16545

Amount of Each Disbursement this Period

973.69

☐ Memo Item

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

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

1332.47

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 77 OF 80

|                                         |                              |                              |                             |                              |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <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)

BLUE CD2 NEW MEXICO USA

Full Name (Last, First, Middle Initial)

**A. Square Weebly**

Mailing Address 460 Bryant Street

City  
San FranciscoState  
CAZip Code  
94107

Purpose of Disbursement

Marketing

Candidate Name

004

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 2 | 4 |   |   | 2 | 0 | 2 | 6 |   |   |

FEC Identification Number

C

Transaction ID : SB21B.16983

Amount of Each Disbursement this Period

38.68

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. VanDevender, Nancy, , ,**Mailing Address 10501 Lagrima de Oro NE  
Apt. 6309City  
AlbuquerqueState  
NMZip Code  
87111

Purpose of Disbursement

In-kind - Postage

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For:

|                          |                 |                          |         |
|--------------------------|-----------------|--------------------------|---------|
| <input type="checkbox"/> | Primary         | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) |                          |         |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 3 | 0 |   |   | 2 | 0 | 2 | 6 |   |   |

FEC Identification Number

C

Transaction ID : SB21B.16920

Amount of Each Disbursement this Period

366.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Williams, Rochelle, , ,**

Mailing Address 614 7th St.

City  
TularosaState  
NMZip Code  
87507

Purpose of Disbursement

Subscription to groups.jo (20 Months)

Candidate Name

001

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/>            | Other (specify) ▼ |                          |         |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 2 | 6 |   |   | 2 | 0 | 2 | 6 |   |   |

FEC Identification Number

C

Transaction ID : SB21B.17075

Amount of Each Disbursement this Period

360.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

764.68

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 78 OF 80

☒ 21b    ☐ 22    ☐ 23    ☐ 26    ☐ 27  
☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**BLUE CD2 NEW MEXICO USA**

Full Name (Last, First, Middle Initial)

**A. Winfield, Christine, , ,**

Mailing Address 1507B 4th Street

City  
Santa FeState  
NMZip Code  
87505

Purpose of Disbursement

Help with Monthly Zoom Meeting.

Candidate Name

001

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 2 | 4 |   |   | 2 | 0 | 2 | 6 |   |   |

FEC Identification Number

C

Transaction ID : SB21B.16982

Amount of Each Disbursement this Period

155.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Zoom**Mailing Address 55 N. Almaden Blvd.  
6th FloorCity  
San JoseState  
CAZip Code  
95113

Purpose of Disbursement

enable online meetings

Candidate Name

BLUE CD2 NEW MEXICO USA

001

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 4 |   |   | 0 | 1 |   |   | 2 | 0 | 2 | 6 |   |   |

FEC Identification Number

C

C00797340

Transaction ID : SB21B.16337

Amount of Each Disbursement this Period

6.30

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Zoom**Mailing Address 55 N. Almaden Blvd.  
6th FloorCity  
San JoseState  
CAZip Code  
95113

Purpose of Disbursement

enable online meetings

Candidate Name

BLUE CD2 NEW MEXICO USA

001

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 4 |   |   | 0 | 6 |   |   | 2 | 0 | 2 | 6 |   |   |

FEC Identification Number

C

C00797340

Transaction ID : SB21B.16328

Amount of Each Disbursement this Period

206.64

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

367.94

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 79 OF 80

☒ 21b    ☐ 22    ☐ 23    ☐ 26    ☐ 27  
☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**BLUE CD2 NEW MEXICO USA**

Full Name (Last, First, Middle Initial)

**A. Zoom**Mailing Address 55 N. Almaden Blvd.  
6th FloorCity  
San JoseState  
CAZip Code  
95113Purpose of Disbursement  
enable online meetings

001

Category/  
Type

Candidate Name

BLUE CD2 NEW MEXICO USA

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 06 / 2026

FEC Identification Number

C C00797340

**Transaction ID : SB21B.16523**

Amount of Each Disbursement this Period

206.64

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Zoom**Mailing Address 55 N. Almaden Blvd.  
6th FloorCity  
San JoseState  
CAZip Code  
95113Purpose of Disbursement  
enable online meetings

001

Category/  
Type

Candidate Name

BLUE CD2 NEW MEXICO USA

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary    ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
06 / 06 / 2026

FEC Identification Number

C C00797340

**Transaction ID : SB21B.16974**

Amount of Each Disbursement this Period

206.64

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

413.28

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

33563.87

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 80 OF 80

|                              |                              |                              |                                        |                              |
|------------------------------|------------------------------|------------------------------|----------------------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 26            | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

**BLUE CD2 NEW MEXICO USA**

Full Name (Last, First, Middle Initial)

**A. Blue CD2 New Mexico Indivisible**

Mailing Address P.O. Box 12615

City  
AlbuquerqueState  
NMZip Code  
87195Purpose of Disbursement  
cover ineligible outlays

001

Candidate Name

BLUE CD2 NEW MEXICO USA

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   |   | 1 | 7 |   |   | 2 | 0 | 2 | 6 |   |   |

FEC Identification Number

C C00797340

**Transaction ID : SB29.17090**

Amount of Each Disbursement this Period

595.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

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 |
|   |   |   |   |   |   |   |   |   |   |   |   |   |   |

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

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 |
|   |   |   |   |   |   |   |   |   |   |   |   |   |   |

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

595.00

595.00