PAGE 1 / 10 =

STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. Democratic Party of New Mexico - Federal PO Box 27615 ADDRESS (number and street) (Check if address is changed) Albuquerque 87125 NM CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS reporting@capcompliance.com (Check if address is changed) Optional Second E-Mail Address amanda@nmdemocrats.org COMMITTEE'S WEB PAGE ADDRESS (URL) www.nmdemocrats.org (Check if address is changed) DATE 2022 C00161810 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Smith, Rayellen, , , Type or Print Name of Treasurer Smith, Rayellen, , , [Electronically Filed] 01 2022 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530 Only Local 202-694-1100

Candid	COMMITTEE	
(-)	ate Committee:	
(a)	This committee is a principal campaign committee. (Complete the candidate information below.	.)
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Con information below.)	nplete the candidate
Name of Candidat		
Candidat Party Aff	- · · · · · · · · · · · · · · · · · · ·	State District
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidat		
Party C	ommittee:	(Dama ayatia
(d)	(National, State This committee is a STA or subordinate) committee of the	(Democratic, Republican, etc.) Party
Politica	I Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	nnected organization is
	Corporation Corporation w/o Capital Stock	Labor Organization
	Membership Organization Trade Association	Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.	
(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate s committee. (i.e., nonconnected committee)	egregated fund or party
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint F	Indraising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for t	
(h)	committees/organizations, at least one of which is an authorized committee of a federal candidate.  This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, none of which is an authorized committee of a federal candidate.	
С	ommittees Participating in Joint Fundraiser	
1	- LEFC ID mumber	
2	C	
3		

FEC <b>Form 1</b> (Revised (	02/2009)	Page <b>3</b>
Write or Type Committee Name	9	·
Democratic Par	ty of New Mexico - Federal	
	Organization, Affiliated Committee, Joint Fundraising Representative	e, or Leadership PAC Sponsor
DNC Services Corpora	ation/Democratic National Committee	
Mailing Address	430 S. Capitol Street, SE	
	Washington DC	20003
	CITY STATE	ZIP CODE
Relationship: Connected	d Organization Affiliated Committee X Joint Fundraising Represen	tative Leadership PAC Sponsor
<ol> <li>Custodian of Records: Ider books and records.</li> </ol>	ntify by name, address (phone number optional) and position of the	person in possession of committee
Smith, Ray	yellen, , ,	ı
Full Name	PO Box 27615	
Mailing Address		
	Albuquerque	87125
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	505 710 - 1023
3. <b>Treasurer:</b> List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of the committee assistant treasurer).	e; and the name and address of
Full Name Smith, Ray	/ellen, , ,	
Mailing Address	PO Box 27615	
	Albuquerque	87125
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	505 710 - 1023

FEC Form 1 (Re	evised 02/2009)	Page <b>4</b>
Full Name of		
Designated Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position	CITT	ZIF CODE
	Telephone number	
safety deposit boxes or Name of Bank, Deposit		osits funds, holds accounts, rents
safety deposit boxes or Name of Bank, Deposit	maintains funds. tory, etc.	osits funds, holds accounts, rents
safety deposit boxes or Name of Bank, Deposit	maintains funds.  tory, etc.  algamated Bank  1825 K St	
safety deposit boxes or Name of Bank, Deposit	maintains funds. tory, etc. algamated Bank	
safety deposit boxes or Name of Bank, Deposit	maintains funds.  tory, etc.  algamated Bank  1825 K St	20006
safety deposit boxes or Name of Bank, Deposit  Am  Mailing Address	maintains funds. tory, etc.  palgamated Bank  1825 K St  Washington  CITY  STATE	20006
safety deposit boxes or Name of Bank, Deposit    Am	maintains funds.  tory, etc.  algamated Bank  1825 K St  Washington  CITY  STATE  tory, etc.	20006
safety deposit boxes or Name of Bank, Deposit  Am  Mailing Address  Name of Bank, Deposit	maintains funds. tory, etc.  algamated Bank  1825 K St  Washington  CITY  STATE  tory, etc.	20006
safety deposit boxes or Name of Bank, Deposit  Am  Mailing Address  Name of Bank, Deposit	maintains funds.  tory, etc.  algamated Bank  1825 K St  Washington  CITY  STATE  tory, etc.	20006
safety deposit boxes or Name of Bank, Deposit  Am  Mailing Address  Name of Bank, Deposit	maintains funds. tory, etc.  algamated Bank  1825 K St  Washington  CITY  STATE  tory, etc.	20006
safety deposit boxes or Name of Bank, Deposit  Am  Mailing Address  Name of Bank, Deposit	maintains funds. tory, etc.  algamated Bank  1825 K St  Washington  CITY  STATE  tory, etc.	20006

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

FEC Form 1S (Revised 02/2017)

h). <b>Joint Fundraisi</b>	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
=	d Organization, Affiliated Committee, Joint Fundr Sroots Victory Fund	aising Representative	e, or Leadership PAC Spor
Mailing Address	430 South Capitol St SE		
	Washington	, DC	20003
	-		ZIP CODE ▲
Relationship:	CITV A	$\langle \cdot   \Delta \mid \vdash \blacktriangle$	
	CITY A  ed Organization  Affiliated Committee  Joint  fy by name, address (phone number – optional)	STATE ▲ Fundraising Representa	
Connecte	ed Organization Affiliated Committee		
esignated Agent: Identi	ed Organization Affiliated Committee		
esignated Agent: Identi	ed Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC S
esignated Agent: Identi  Full Name  Mailing Address	Affiliated Committee   Joint  y  Joint  fy by name, address (phone number – optional)	Fundraising Representa	
esignated Agent: Identi	Affiliated Committee  Affiliated Committee  Fy by name, address (phone number – optional)  CITY	Fundraising Representation	ative Leadership PAC S
Esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, Bank	Affiliated Committee  y Joint  fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	Fundraising Representation	Leadership PAC S  ZIP CODE
connected sesignated Agent: Identification of Position of Bank, epository, etc.	Affiliated Committee  Ty Joint  Affiliated Committee  Ty Joint  To CITY  To Ories: List all banks or other depositories in which naintains funds.  Of America	Fundraising Representation	Leadership PAC S  ZIP CODE

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

FEC Form 1S (Revised 02/2017)

Page \_6\_ **of** \_10\_\_

5(g)	or(h). <b>Joint Fundraisin</b> ç	յ Participant։			
	1	<u> </u>	] FEC	ID number	C
	2.		J FEC	ID number	C
	3.		FEC	ID number	C
	4.		, FEC	ID number	C
6.	Name of Any Connected Conn	Organization, Affiliated Committee, Joint Fu	ndraising R	epresentativ	e, or Leadership PAC Sponsor
	Mailing Address	430 South Capitol, SE			
		Washington	1	DC	20003
	Relationship:	CITY A		STATE A	ZIP CODE ▲
	Connected	Organization Affiliated Committee	loint Fundraisi	ng Represent	ative Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number - optional)	)		
	Full Name				
	Mailing Address				
					I I-I
	TITLE OR POSITION	▼ CITY ▲		STATE ▲	ZIP CODE ▲
			Telephone	Number	
9.	Banks or Other Depositor safety deposit boxes or main Name of Bank, Depository, etc.	ies: List all banks or other depositories in whintains funds.	ich the comn	nittee deposi	ts funds, holds accounts, rents
	Mailing Address	1			
	Maining Addition				
			1	1 . 1	
		CITY ▲		STATE A	ZIP CODE ▲

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). <b>Joint Fundraisi</b> r	ig Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
lame of Any Connected Biden Victory Fur	Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Spons
Mailing Address	430 South Capitol St SE		
	Weshington	DC	20003
B	Washington	DC	
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
		int Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif	d Organization Affiliated Committee	int Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif	d Organization Affiliated Committee	int Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif	d Organization Affiliated Committee	int Fundraising Represent	Leadership PAC Sp
esignated Agent: Identif  Full Name  Mailing Address	Affiliated Committee   y Jo  y by name, address (phone number – optional)	int Fundraising Represent	Leadership PAC Sp
esignated Agent: Identif	Affiliated Committee  y Jo  y by name, address (phone number – optional)  CITY		
esignated Agent: Identification Full Name	Affiliated Committee  y Jo  y by name, address (phone number – optional)  CITY   CITY   CITY   pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identif  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or m  ame of Bank,	Affiliated Committee  y Jo  y by name, address (phone number – optional)  CITY   CITY   CITY   pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name	Affiliated Committee  y Jo  y by name, address (phone number – optional)  CITY   CITY   CITY   pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). <b>Joint Fundraisi</b>	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
-	l Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spon
Heinrich Victory F	-und 		
	<sub>1</sub> 1050 17TH ST NW STE 590		
Mailing Address			
	Washington	DC.	20026
	Washington 	DC	20036
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte		nt Fundraising Represent	ative Leadership PAC Sp
Connecte	Affiliated Committee	nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Represent	ative Leadership PAC Sp
Connecte esignated Agent: Identi		nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	nt Fundraising Represent	
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)		
esignated Agent: Identi	fy by name, address (phone number – optional)  CITY	STATE A	
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)  CITY		
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank,	fy by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

5(g) or (h).	Joint Fundraising	Participant:		
1.			FEC ID number	C
2.			FEC ID number	C
3.			FEC ID number	C
4.			FEC ID number	C
		Organization, Affiliated Committee, Joint Fundrais	sing Representative	e, or Leadership PAC Sponsor
Luj L	an Victory Fund			
N	Mailing Address	611 Pennsylvania Ave SE		
		Num 143		
		Washington	DC	20003
F	Relationship:	CITY A	STATE A	ZIP CODE ▲
	Connected	Organization Affiliated Committee	ındraising Representa	tive Leadership PAC Sponsor
8. <b>Desig</b> r	nated Agent: Identify	by name, address (phone number – optional)		
	nated Agent: Identify	by name, address (phone number – optional)		
Ful		by name, address (phone number – optional)		
Ful	II Name	by name, address (phone number – optional)		
Ful	II Name	by name, address (phone number – optional)		
Ful	II Name	CITY	STATE A	ZIP CODE A
Ful	II Name	CITY A	STATE A	ZIP CODE A
Ful Ma	or Other Depositoric deposit boxes or main of Bank, itory, etc.	CITY   CITY   Telepes: List all banks or other depositories in which the	phone Number	
Ful Ma	Il Name  ailing Address  ITLE OR POSITION   or Other Depositoric deposit boxes or mair of Bank,	CITY   CITY   Telepes: List all banks or other depositories in which the	phone Number	
Ful Ma	or Other Depositoric deposit boxes or main of Bank, itory, etc.	CITY   CITY   Telepes: List all banks or other depositories in which the	phone Number	

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

(h). Joint Fundraisi	ig Farticipant.		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4		FEC ID number	С
	Organization, Affiliated Committee, Joint Fundo	draising Representative	e, or Leadership PAC Sponso
Mailing Address	114 Beauchamp Lane		
	LaFayette	LA LA	70506
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Affiliated Committee  Joint Jo	int Fundraising Representa	ative Leadership PAC Spo
Designated Agent: Identi		int Fundraising Representa	Leadership PAC Spo
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Designated Agent: Identi		int Fundraising Representa	Leadership PAC Spo
Designated Agent: Identi	fy by name, address (phone number – optional)		
Designated Agent: Identi	fy by name, address (phone number – optional)	int Fundraising Representation	Leadership PAC Spo
Designated Agent: Identi  Full Name   Mailing Address	fy by name, address (phone number – optional)		
Pesignated Agent: Identi  Full Name   _   _    Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposite afety deposit boxes or make the same of Bank, Depository, etc.	fy by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A