

FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees)

1. (a) Name of Individual, Organization or Corporation Against Herrell Or Small		3. FEC Identification Number C C90017765
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported c/o 105 Virginia Ave.		
(c) City, State and ZIP Code Alamogordo NM 88310		
2. Occupation and Name of Employer (for Individual Filers Only)		

4. TYPE OF REPORT (check appropriate boxes):

- (a) April 15 Quarterly Report
- July 15 Quarterly Report 24-Hour Report
- October 15 Quarterly Report 48-Hour Report
- January 31 Year-End Report

b) Is this Report an amendment? No Yes, it amends the report filed on

M M	/	D D	/	Y Y Y Y

5. COVERING PERIOD:

FROM

M M	/	D D	/	Y Y Y Y
01		01		2018

THROUGH

M M	/	D D	/	Y Y Y Y
06		30		2018

6. TOTAL CONTRIBUTIONS.....	5926.00
7. TOTAL INDEPENDENT EXPENDITURES	5.00

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or any political party committee or its agent.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

SIGNATURE

DATE

[Electronically Filed]

Rosales, Mike, , ,

Rosales, Mike, , ,

07/16/2018

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F5N
Transaction ID :

If you have any questions regarding this update, please feel free to contact Against Herrell Or Small.

Form/Schedule:
Transaction ID:

**SCHEDULE 5-A
ITEMIZED RECEIPTS**

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 FILER (In Full)
Against Herrell Or Small

A. Full Name (Last, First, Middle Initial) Rosales, Mike, , ,			Date of Receipt 06 / 30 / 2018		
Mailing Address 105 Virginia Ave.			Transaction ID : F56.000001		
City Alamogordo	State NM	Zip Code 88310	Amount of Each Receipt this Period 5926.00		
FEC ID number of contributing federal political committee. C					
Name of Employer Self			Occupation Minister		

B. Full Name (Last, First, Middle Initial)			Date of Receipt		
Mailing Address			Amount of Each Receipt this Period		
City	State	Zip Code			
FEC ID number of contributing federal political committee. C					
Name of Employer			Occupation		

C. Full Name (Last, First, Middle Initial)			Date of Receipt		
Mailing Address			Amount of Each Receipt this Period		
City	State	Zip Code			
FEC ID number of contributing federal political committee. C					
Name of Employer			Occupation		

D. Full Name (Last, First, Middle Initial)			Date of Receipt		
Mailing Address			Amount of Each Receipt this Period		
City	State	Zip Code			
FEC ID number of contributing federal political committee. C					
Name of Employer			Occupation		

SUBTOTAL of Receipts This Page (optional)	5926.00
TOTAL This Period (last page carry total to Line 6)	5926.00

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Against Herrell Or Small

Full Name (Last, First, Middle Initial) of Payee Against Herrell Or Small		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 30 / 2018	
Mailing Address c/o Virginia Ave.		Amount 2.50	
City Alamogordo	State NM	Zip Code 88310	Transaction ID : F57.000001
Purpose of Expenditure Communications opposing Herrell	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: NM District: 02
Name of Federal Candidate Supported or Opposed by Expenditure: Herrell, Yvette, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought .00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee Against Herrell Or Small		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 30 / 2018	
Mailing Address c/o Virginia Ave.		Amount 2.50	
City Alamogordo	State NM	Zip Code 88310	Transaction ID : F57.000002
Purpose of Expenditure Communications opposing Small	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: NM District: 02
Name of Federal Candidate Supported or Opposed by Expenditure: Torres-Small, Xochitl, , ,		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought .00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee		Date of Public Distribution/Dissemination MM / DD / YYYY	
Mailing Address		Amount	
City	State	Zip Code	
Purpose of Expenditure	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....	5.00
(b) SUBTOTAL of Unitemized Independent Expenditures	0.00
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	5.00