

1. NAME OF COMMITTEE (in full)
John Kelly for Congress

ADDRESS (number and street) Check if different than previously reported.
PO Box 25285

CITY, STATE and ZIP CODE STATE/DISTRICT
Albuquerque, NM 87125 NM 01

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

2. FEC IDENTIFICATION NUMBER
C00352732

3. IS THIS REPORT AN AMENDMENT?
 YES NO

APR 10 4:20

4. TYPE OF REPORT

- April 15 Quarterly Report Twelfth day report preceding _____ (Type of Election) election on _____ in the State of _____
- July 15 Quarterly Report
- October 15 Quarterly Report Thirtieth day report following the General Election on _____ in the State of _____
- January 31 Year End Report
- July 31 Mid-Year Report (Non-election Year Only) Termination Report

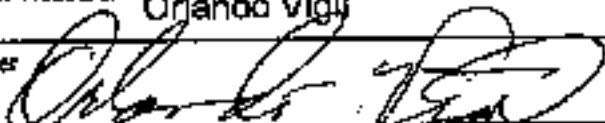
This Report Contains Activity For Primary Election General Election Special Election Runoff Election

SUMMARY

5. Covering Period	COLUMN A This Period	COLUMN B Calendar Year-to-Date
<u>1/1/2000</u> through <u>3/31/2000</u>		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11 (e)).....	\$57,243.93	\$57,243.93
(b) Total Contribution Refunds (from Line 20 (d)).....	\$0.00	\$0.00
(c) Net Contributions (other than loans) (subtract Line 6 (b) from Line 6 (a)).....	\$57,243.93	\$57,243.93
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	\$39,240.64	\$39,240.64
(b) Total Offsets to Operating Expenditures (from Line 14).....	\$25.00	\$25.00
(c) Net Operating Expenditures (subtract Line 7 (b) from 7 (a)).....	\$39,215.64	\$39,215.64
8. Cash on Hand at Close of Reporting Period (from Line 27).....	\$118,068.51	For further information contact: Federal Election Commission 888 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D).....	\$0.00	
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D).....	\$117,963.27	

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 **Orlando Vigil**

Signature of Treasurer  Date **4/4/2000**

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

DETAILED SUMMARY PAGE

of Receipts and Disbursements

(Page 2, FEC FORM 3)

Name of Committee (in full) John Kelly for Congress	C00352732	Report Covering the Period From: 1/1/2000	To: 3/31/2000
I. RECEIPTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. CONTRIBUTIONS (other than loans) FROM:			
(a) Individuals/Persons Other Than Political Committees			
(i) Itemized (use Schedule A).....	\$47,660.00		11(a)(i)
(ii) Unitemized.....	\$4,583.93		11(a)(ii)
(iii) Total of Contributions from Individuals.....	\$52,243.93	\$52,243.93	11(a)(iii)
(b) Political Party Committees.....	\$0.00	\$0.00	11(b)
(c) Other Political Committees (such as PACs).....	\$5,000.00	\$5,000.00	11(c)
(d) The Candidate.....	\$0.00	\$0.00	11(d)
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(i), 11(a)(ii), 11(b), 11(c), and 11(d)).....	\$57,243.93	\$57,243.93	11(e)
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....	\$0.00	\$0.00	12
13. LOANS:			
(a) Made or Guaranteed by the Candidate.....	\$100,000.00	\$100,000.00	13(a)
(b) All Other Loans.....	\$0.00	\$0.00	13(b)
(c) TOTAL LOANS (add 13(a) and (b)).....	\$100,000.00	\$100,000.00	13(c)
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....	\$25.00	\$25.00	14
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	\$40.22	\$40.22	15
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14, and 15).....	\$157,309.15	\$157,309.15	16
II. DISBURSEMENTS			
17. OPERATING EXPENDITURES.....	\$39,240.64	\$39,240.64	17
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	\$0.00	\$0.00	18
19. LOAN REPAYMENTS:			
(a) Of Loans Made or Guaranteed by the Candidate.....	\$0.00	\$0.00	19(a)
(b) Of All Other Loans.....	\$0.00	\$0.00	19(b)
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b)).....	\$0.00	\$0.00	19(c)
20. REFUNDS OF CONTRIBUTIONS TO:			
(a) Individuals/Persons Other Than Political Committees.....	\$0.00	\$0.00	20(a)
(b) Political Party Committees.....	\$0.00	\$0.00	20(b)
(c) Other Political Committees (such as PACs).....	\$0.00	\$0.00	20(c)
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), 20(b), and (c)).....	\$0.00	\$0.00	20(d)
21. OTHER DISBURSEMENTS.....	\$0.00	\$0.00	21
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d), and 21).....	\$39,240.64	\$39,240.64	22
III. CASH SUMMARY			
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....		\$0.00	23
24. TOTAL RECEIPTS THIS PERIOD (from Line 16).....		\$157,309.15	24
25. SUBTOTAL (add Line 23 and Line 24).....		\$157,309.15	25
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....		\$39,240.64	26
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25).....		\$118,068.51	27

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 11
FOR LINE NUMBER 11(a)(1)

Contributions from individuals

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) **John Kelly for Congress** **C00352732**

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ashe, Thomas 60 Sandia Lane Placitas NM 87043	self employed	3/28/2000	\$300.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation Contractor	Aggregate Year-to-Date > \$300.00	
Bardtrief, Anita 10600 Central SE No60 Albuquerque NM 87123	US Attorneys Office	2/8/2000	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation paralegal	Aggregate Year-to-Date > \$500.00	
Bay, Norman C 1201 Calle Del Sol NE Albuquerque NM 87106	US Attorneys Office	2/6/2000	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation Attorney	Aggregate Year-to-Date > \$500.00	
Bergen, Lee 500 Marquette NW Ste1050 Albuquerque NM 87102	Wardhaus Law Firm	2/3/2000	\$62.50 MEMO Partnrshp Attributed
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation attorney	Aggregate Year-to-Date > \$62.50	
Barsin, Alan 1154 Concord St San Diego CA 92106	San Diego CA	3/20/2000	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation Superintendent of School	Aggregate Year-to-Date > \$500.00	
Bladh, Wayne 500 Marquette NW Ste 1050 Albuquerque NM 87102	Wardhaus Law Firm	2/3/2000	\$62.50 MEMO Partnrshp Attributed
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation attorney	Aggregate Year-to-Date > \$62.50	
Boyd, J W 3812 La Hacienda NE Albuquerque NM 87110	Freeman/Boyd/Daniels	3/31/2000	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation attorney	Aggregate Year-to-Date > \$1,000.00	

SUBTOTAL of Receipts This Page (optional)	\$2,800.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 2 OF 11

FOR LINE NUMBER 11(a)(1)

Contributions from Individuals

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NAME OF COMMITTEE (in Full) **John Kelly for Congress** **C00362732**

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Brookshire, David 1901 Via Del Sol NE Albuquerque NM 87110	UNM Occupation: Professor of Economics	2/19/2000	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Aggregate Year-to-Date > \$500.00		
Chavez, Sandra B. 9307 Galaxia Way NE Albuquerque NM 87111	UNM Cancer and Research Center Occupation: Medical Records Manager	2/1/2000	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Aggregate Year-to-Date > \$1,000.00		
Cooper, David 4317 Chinlee Dr NE Albuquerque NM 87110	none Occupation: retired	3/16/2000	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Aggregate Year-to-Date > \$1,000.00		
Cope, Johnny D. 412 E Arriba Hobbs NM 88240	LASCO Occupation: general contractor	2/10/2000	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Aggregate Year-to-Date > \$1,000.00		
Cordova, John 1400 Cagua NE Albuquerque NM 87110	Hirst Companies Occupation: President	3/9/2000	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Aggregate Year-to-Date > \$250.00		
De Fernandez, Teresa Leger 500 Marquette NW Ste 1050 Albuquerque NM 87102	Nordhaus Law Firm Occupation: attorney	2/3/2000	\$62.50 MEMO Partnership Attributed
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Aggregate Year-to-Date > \$62.50		
Dow, Mark 400 Paseo Del Bosque NW Albuquerque NM 87114	self-employed Occupation: attorney	1/11/2000	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Aggregate Year-to-Date > \$2,000.00		

SUBTOTAL of Receipts This Page (optional)	\$4,750.00
TOTAL This Period (last page this line number only)	

SCHEDULE A ITEMIZED RECEIPTS

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

PAGE 3 OF 11

FOR LINE NUMBER

11(a)(8)

Contributions from Individuals

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NAME OF COMMITTEE (In Full) **John Kelly for Congress** **C00352732**

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dow, Mark 400 Paseo Del Bosque NW Albuquerque NM 87114	self-employed	1/11/2000	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation attorney	Aggregate Year-to-Date > \$2,000.00	
Dow, Phyllis 400 Paseo Del Bosque NW Albuquerque NM 87114	US Attorneys Office	1/11/2000	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation attorney	Aggregate Year-to-Date > \$2,000.00	
Dow, Phyllis 400 Paseo Del Bosque NW Albuquerque NM 87114	US Attorneys Office	1/11/2000	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation attorney	Aggregate Year-to-Date > \$2,000.00	
Edwards, Mark 1036 N Daniel St No 2 Arlington VA 22201	U S Senator Bingaman	3/20/2000	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation attorney	Aggregate Year-to-Date > \$1,000.00	
Epstein, Jeffrey E. 6100 Red Hook Qtr Suite B-3 Saint Thomas VI 00802	Financial Trust Co. Inc	3/10/2000	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation consultant	Aggregate Year-to-Date > \$2,000.00	
Epstein, Jeffrey E. 6100 Red Hook Qtr Suite B-3 Saint Thomas VI 00802	Financial Trust Co. Inc	3/10/2000	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation consultant	Aggregate Year-to-Date > \$2,000.00	
Frye, Paul 1106 Vassar NE Albuquerque NM 87106	Nordhaus Law Firm	2/3/2000	\$62.50 MEMO Partnership Attributed
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation attorney	Aggregate Year-to-Date > \$262.50	

SUBTOTAL of Receipts This Page (optional)	\$6,000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule for each category of the Detailed Summary Page

PAGE 4 OF 11

FOR LINE NUMBER

11 (a) (1)

Contributions from Individuals

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NAME OF COMMITTEE (In Full)
John Kelly for Congress **C00352732**

<p>A. Full Name, Mailing Address and ZIP Code Frye, Paul 1108 Vassar NE Albuquerque NM 87106</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer Nordhaus Law Firm</p> <p>Occupation attorney</p> <p>Aggregate Year-to-Date > \$262.50</p>	<p>Date (month, day, year) 2/6/2000</p>	<p>Amount of Each Receipt this Period \$200.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Gibbons, M. Dolores 3901 Indian School Rd NE Albuquerque NM 87110</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer none</p> <p>Occupation retired</p> <p>Aggregate Year-to-Date > \$2,000.00</p>	<p>Date (month, day, year) 1/14/2000</p>	<p>Amount of Each Receipt this Period \$1,000.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Gibbons, M. Dolores 3901 Indian School Rd NE Albuquerque NM 87110</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer none</p> <p>Occupation retired</p> <p>Aggregate Year-to-Date > \$2,000.00</p>	<p>Date (month, day, year) 1/11/2000</p>	<p>Amount of Each Receipt this Period \$1,000.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Goldberg, Joseph 20 1st Plaza NW Ste 700 Albuquerque NM 87102</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer Freeman / Boyd / Daniels</p> <p>Occupation attorney</p> <p>Aggregate Year-to-Date > \$1,000.00</p>	<p>Date (month, day, year) 3/31/2000</p>	<p>Amount of Each Receipt this Period \$1,000.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Grant, Jill E. 600 Marquette NW Ste 1050 Albuquerque NM 87102</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer Nordhaus Law Firm</p> <p>Occupation attorney</p> <p>Aggregate Year-to-Date > \$62.50</p>	<p>Date (month, day, year) 2/3/2000</p>	<p>Amount of Each Receipt this Period \$62.50 MBMO Partnership Attributed</p>
<p>F. Full Name, Mailing Address and ZIP Code Green, Connie 1505 Stanford NE Albuquerque NM 87106</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer APS</p> <p>Occupation Speech Language Patholo</p> <p>Aggregate Year-to-Date > \$250.00</p>	<p>Date (month, day, year) 2/6/2000</p>	<p>Amount of Each Receipt this Period \$250.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Grevey, Joseph 2015 Wyoming NE Albuquerque NM 87112</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer none</p> <p>Occupation retired</p> <p>Aggregate Year-to-Date > \$500.00</p>	<p>Date (month, day, year) 2/6/2000</p>	<p>Amount of Each Receipt this Period \$500.00</p>

<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>\$3,950.00</p>
<p>TOTAL This Period (last page this line number only)</p>	<p></p>

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules for each category of the Detailed Summary Page

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FOR LINE NUMBER 11(a)(i)

Contributions from Individuals

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NAME OF COMMITTEE (in Full) **John Kelly for Congress** **C00362732**

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Gross, Michael P 460 St Michaels Dr No 300 Santa Fe NM 87505	self	2/17/2000	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation attorney		
	Aggregate Year-to-Date > \$1,000.00		
Haltom, B. Reid 500 Marquette NW Ste1050 Albuquerque NM 87102	Nordhaus Law Firm	2/3/2000	\$62.50 MEMO Partnership Attributed
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation attorney		
	Aggregate Year-to-Date > \$62.50		
Hamilton, Raymond 8830 Ivy Pl SW Albuquerque NM 87106	US Attorneys Office	2/8/2000	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation attorney		
	Aggregate Year-to-Date > \$1,000.00		
Hirst, Lee 1433 Stanford Dr NE Albuquerque NM 87106	The Hirst Companies	3/9/2000	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation counselor		
	Aggregate Year-to-Date > \$250.00		
Hochberg, Mark 36 Stewart Rd Short Hills NJ 07078	self-employed	3/17/2000	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation Medical doctor		
	Aggregate Year-to-Date > \$500.00		
Indyke, Daran 477 F D R Dr New York NY 10002	J Epstein and Co Inc	3/15/2000	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation attorney		
	Aggregate Year-to-Date > \$1,000.00		
Jacobson, Leslie 400 E 63rd St New York NY 10022	HBO	3/22/2000	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation Executive VP		
	Aggregate Year-to-Date > \$2,000.00		

SUBTOTAL of Receipts This Page (optional)	\$4,750.00
TOTAL This Period (last page this line number only)	

SCHEDULE A ITEMIZED RECEIPTS

Use separate schedules for each category of the Detailed Receipts Page

PAGE 6 OF 11
FOR LINE NUMBER 11(a)(1)

Contributions from Individuals

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NAME OF COMMITTEE (In Full) **John Kelly for Congress** C00352732

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jacobson, Leslie 400 E 53rd St New York NY 10022	HBO	3/22/2000	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation Executive VP	Aggregate Year-to-Date > \$2,000.00	
Kinsman, Carolyn 718 Mountain Rd NW Albuquerque NM 87102	self-employed	2/3/2000	\$660.00 In-Kind
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation graphic designer	Aggregate Year-to-Date > \$660.00	
Landry, Stephanie 3600 La Sala Redonda NE Albuquerque NM 87111	Landry and Ludewig LLP	3/3/2000	\$200.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation attorney	Aggregate Year-to-Date > \$325.00	
Landry, Stephanie 3600 La Sala Redonda NE Albuquerque NM 87111	Landry and Ludewig LLP	3/22/2000	\$125.00 MEMO Partnership Attributed
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation attorney	Aggregate Year-to-Date > \$325.00	
Ludewig, Margaret 1215 Tijeras Ave NW Albuquerque NM 87102	Landry and Ludewig Law Firm	3/22/2000	\$125.00 MEMO Partnership Attributed
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation attorney	Aggregate Year-to-Date > \$125.00	
McAney, Barbara 3325 Calle De Daniel NW Albuquerque NM 87104	UM Medical	2/27/2000	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation Medical doctor	Aggregate Year-to-Date > \$500.00	
McIntosh, Molly 1901 Via Del Sol NE Albuquerque NM 87110	self-employed	2/19/2000	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation attorney	Aggregate Year-to-Date > \$500.00	

SUBTOTAL of Receipts This Page (optional)	\$2,860.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 7 OF 11

FOR LINE NUMBER 11(a)(1)

Contributions from Individuals

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NAME OF COMMITTEE (in Full) **John Kelly for Congress** **C00352732**

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Morgan, Ron 508 Solano SE Albuquerque NM 87108 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	self employed Occupation attorney	3/30/2000 Aggregate Year-to-Date > \$1,000.00	\$1,000.00
Napolitano, Janet 101 N 7th St No 249 Phoenix AZ 85034 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	State of Arizona Occupation Attorney General	2/17/2000 Aggregate Year-to-Date > \$250.00	\$250.00
Oleary, Marilyn 8 Tumbleweed NW Albuquerque NM 87120 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Eastham / Johnson / Monnheimer Occupation attorney	3/30/2000 Aggregate Year-to-Date > \$500.00	\$500.00
Page, Barbara 401 Coors Blvd NW Albuquerque NM 87121 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Westland Development Occupation President	3/13/2000 Aggregate Year-to-Date > \$250.00	\$250.00
Partnership, Landry and Lude 1215 Tijeras Ave NW Albuquerque NM 87102 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Landry and Ludewig Law Firm Occupation law firm	3/22/2000 Aggregate Year-to-Date > \$250.00	\$250.00
Partnership, Nordhaus Law Fi 500 Marquette NW Ste 1050 Albuquerque NM 87102 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Nordhaus Law Firm Occupation attorney	2/3/2000 Aggregate Year-to-Date > \$500.00	\$500.00
Pueblo Of Santa Ana, O 2 Don Rd Bernalillo NM 87004 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	none Occupation Pueblo of Santa Ana	3/20/2000 Aggregate Year-to-Date > \$1,000.00	\$1,000.00

SUBTOTAL of Receipts This Page (optional)	\$3,750.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 8 OF 11
FOR LINE NUMBER 11(a)(i)

Contributions from Individuals

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) **John Kelly for Congress** **C00352732**

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ramo, Roberta 908 El Alhambra Cir NW Albuquerque NM 87107	Modrall Sperling Law Firm	3/28/2000	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation: attorney Aggregate Year-to-Date > \$1,000.00		
Ranieri, Lewis 225 N Hewlett Ave Merrick NY 11566	Ranieri and Co Inc	3/10/2000	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation: investment advisory Aggregate Year-to-Date > \$2,000.00		
Ranieri, Lewis 225 N Hewlett Ave Merrick NY 11566	Ranieri and Co Inc	3/10/2000	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation: investment advisory Aggregate Year-to-Date > \$2,000.00		
Ricks, Eileen 6338 Azalea Lane Dallas TX 75230	none	1/31/2000	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation: unemployed Aggregate Year-to-Date > \$1,000.00		
Ricks, Ron 6338 Azalea Ave. Dallas TX 75230	Southwest Airlines	1/31/2000	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation: attorney Aggregate Year-to-Date > \$1,000.00		
Roach, James T. 300 Central SW Ste 1500 West Albuquerque NM 87102	self-employed	1/25/2000	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation: attorney Aggregate Year-to-Date > \$1,000.00		
Romero, Leo 6016 Grande Vista Ct NW Albuquerque NM 87120	DNM	3/27/2000	\$300.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation: law professor Aggregate Year-to-Date > \$300.00		

SUBTOTAL of Receipts This Page (optional)	\$5,300.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 9 OF 11
FOR LINE NUMBER 11(a)(i)

Contributions from Individuals

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) **John Kelly for Congress** **C00352732**

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Sanchez, Leonard 5404 Candleglow Dr NE Albuquerque NM 87111	Neff/Ricci LLP	3/28/2000	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation CPA Aggregate Year-to-Date > \$250.00		
Schantz, Jeffrey 8 Vanderbilt Way Valley Stream NY 11581	J Epstein and Co Inc.	3/15/2000	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation Attorney Aggregate Year-to-Date > \$2,000.00		
Schantz, Jeffrey 8 Vanderbilt Way Valley Stream NY 11581	J Epstein and Co Inc.	3/15/2000	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation Attorney Aggregate Year-to-Date > \$2,000.00		
Spector, Edward 12 Franklin Ave Croton On Hudson NY 10520	self-employed	3/14/2000	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation financial advisor Aggregate Year-to-Date > \$2,000.00		
Spector, Edward 12 Franklin Ave Croton On Hudson NY 10520	self-employed	3/14/2000	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation financial advisor Aggregate Year-to-Date > \$2,000.00		
Stelzner, Luis 3521 Campbell Ct NW Albuquerque NM 87104	Sheehan Sheehan and Stelzner	2/4/2000	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation attorney Aggregate Year-to-Date > \$1,000.00		
Starr, Walter E. 925 Guadalupe Ct NW Albuquerque NM 87114	Modrall Sperling Raehl Harris	2/2/2000	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation attorney Aggregate Year-to-Date > \$1,000.00		

SUBTOTAL of Receipts This Page (optional)	\$6,250.00
TOTAL This Report (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 10 OF 11

FOR LINE NUMBER 11(0)(1)

Contributions from Individuals

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) **John Kelly for Congress** **C00352732**

A. Full Name, Mailing Address and ZIP Code Stevens, Charles 721 Coronado Blvd Sacramento CA 95854 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employer Stephens / OConnell, LLP Occupation attorney Aggregate Year-to-Date > \$500.00	Date (month, day, year) 3/20/2000	Amount of Each Receipt this Period \$500.00
B. Full Name, Mailing Address and ZIP Code Tackman, Mary 11500 Academy Apt 1011 Albuquerque NM 87111 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employer none Occupation retired Aggregate Year-to-Date > \$500.00	Date (month, day, year) 3/29/2000	Amount of Each Receipt this Period \$500.00
C. Full Name, Mailing Address and ZIP Code Tackman, Susan 9625 Messervy NE Albuquerque NM 87109 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employer DNM Occupation editor Aggregate Year-to-Date > \$250.00	Date (month, day, year) 2/20/2000	Amount of Each Receipt this Period \$250.00
D. Full Name, Mailing Address and ZIP Code Taradash, Alan 500 Marquette NW Ste 1050 Albuquerque NM 87102 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employer Nordhaus Law Firm Occupation attorney Aggregate Year-to-Date > \$62.50	Date (month, day, year) 2/3/2000	Amount of Each Receipt this Period \$62.50 MEMO Partnrshp Attributed
E. Full Name, Mailing Address and ZIP Code Taylor, Lester 500 Marquette NW Ste 1050 Albuquerque NM 87102 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employer Nordhaus Law Firm Occupation attorney Aggregate Year-to-Date > \$62.50	Date (month, day, year) 2/3/2000	Amount of Each Receipt this Period \$62.50 MEMO Partnrshp Attributed
F. Full Name, Mailing Address and ZIP Code Thomas, Howard R. 6809 Red Sky Rd NE Albuquerque NM 87111 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employer US Attorneys Office Occupation attorney Aggregate Year-to-Date > \$1,000.00	Date (month, day, year) 2/6/2000	Amount of Each Receipt this Period \$1,000.00
G. Full Name, Mailing Address and ZIP Code Uiton, John 4430 Avenida Manana NE Albuquerque NM 87110 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employer Sheehan Sheehan Stelzner Occupation attorney Aggregate Year-to-Date > \$500.00	Date (month, day, year) 3/29/2000	Amount of Each Receipt this Period \$500.00

SUBTOTAL of Receipts This Page (optional)	\$2,750.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 11 OF 11
FOR LINE NUMBER 11(a)(i)

Contributions from Individuals

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) **John Kelly for Congress** C00352732

A. Full Name, Mailing Address and ZIP Code Vigil, Orlando 2714 Fantozzi Rd SW Albuquerque NM 87105 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employer none Occupation retired Aggregate Year-to-Date > \$500.00	Date (month, day, year) 2/4/2000	Amount of Each Receipt this Period \$500.00
B. Full Name, Mailing Address and ZIP Code Washburn, Kevin 2500 Clarendon Blvd No 336 Arlington VA 22201 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employer Natl Indian Gaming Council Occupation attorney Aggregate Year-to-Date > \$1,000.00	Date (month, day, year) 3/1/2000	Amount of Each Receipt this Period \$1,000.00
C. Full Name, Mailing Address and ZIP Code Wellborn, Charles 3819 La Hacienda Dr NE Albuquerque NM 87110 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employer self-employed Occupation attorney Aggregate Year-to-Date > \$500.00	Date (month, day, year) 2/20/2000	Amount of Each Receipt this Period \$500.00
D. Full Name, Mailing Address and ZIP Code Word, Terry M. 6401 Caballero Pkwy Albuquerque NM 87107 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employer self-employed Occupation attorney Aggregate Year-to-Date > \$1,000.00	Date (month, day, year) 1/26/2000	Amount of Each Receipt this Period \$1,000.00
E. Full Name, Mailing Address and ZIP Code Yoder, Mary 1215 Los Arboles Ave NW Albuquerque NM 87107 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employer self-employed Occupation physician Aggregate Year-to-Date > \$500.00	Date (month, day, year) 2/6/2000	Amount of Each Receipt this Period \$500.00
Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employer Occupation Aggregate Year-to-Date >	Date (month, day, year)	Amount of Each Receipt this Period
Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employer Occupation Aggregate Year-to-Date >	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)	\$3,500.00
TOTAL This Period (last page this line number only)	\$47,660.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 11(e)

Contributions from Other Political Committees

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) **John Kelly for Congress** **C00352732**

A. Full Name, Mailing Address and ZIP Code Department, Bldg Const Trad 815 Sixteenth St NW Washington DC 20006	Name of Employer PAC	Date (month, day, year) 3/28/2000	Amount of Each Receipt this Period \$5,000.00
	Occupation Bldg Const Trade Dpt Aggregate Year-to-Date > \$5,000.00		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):			
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation Aggregate Year-to-Date >		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation Aggregate Year-to-Date >		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation Aggregate Year-to-Date >		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation Aggregate Year-to-Date >		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation Aggregate Year-to-Date >		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation Aggregate Year-to-Date >		

SUBTOTAL of Receipts This Page (optional)	\$5,000.00
TOTAL This Period (total page this line number only)	\$5,000.00

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules for each category of the Detailed Summary Page

PAGE 1 OF 1

FOR LINE NUMBER 13(a)

Loans Made or Guaranteed by the Candidate

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) **John Kelly for Congress** C00352732

<p>A. Full Name, Mailing Address and ZIP Code Kelly, John AS 3510 Wolter PI NE Albuquerque NM 87108</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer Occupation Aggregate Year-to-Date > \$100,000.00</p>	<p>Date (month, day, year) 1/26/2000</p>	<p>Amount of Each Receipt this Period \$25,000.00 Made by Cand</p>
<p>B. Full Name, Mailing Address and ZIP Code Kelly, John AS 3510 Wolter PI NE Albuquerque NM 87108</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer Occupation Aggregate Year-to-Date > \$100,000.00</p>	<p>Date (month, day, year) 3/30/2000</p>	<p>Amount of Each Receipt this Period \$75,000.00 Made by Cand</p>
<p>Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer Occupation Aggregate Year-to-Date ></p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer Occupation Aggregate Year-to-Date ></p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer Occupation Aggregate Year-to-Date ></p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer Occupation Aggregate Year-to-Date ></p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer Occupation Aggregate Year-to-Date ></p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>

<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>\$100,000.00</p>
<p>TOTAL This Period (last page this line number only)</p>	<p>\$100,000.00</p>

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1

FOR LINE NUMBER

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Offsets to Operating Expenditures

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NAME OF COMMITTEE (In Full)
John Kelly for Congress **C00352732**

A. Full Name, Mailing Address and ZIP Code First State Bank 111 Lomas Blvd NW Albuquerque NM 87102 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employer Occupation Aggregate Year-to-Date > \$25.00	Date (month, day, year) 2/18/2000	Amount of Each Receipt this Period \$25.00 Expenditure Refund
Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employer Occupation Aggregate Year-to-Date >	Date (month, day, year)	Amount of Each Receipt this Period
Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employer Occupation Aggregate Year-to-Date >	Date (month, day, year)	Amount of Each Receipt this Period
Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employer Occupation Aggregate Year-to-Date >	Date (month, day, year)	Amount of Each Receipt this Period
Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employer Occupation Aggregate Year-to-Date >	Date (month, day, year)	Amount of Each Receipt this Period
Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employer Occupation Aggregate Year-to-Date >	Date (month, day, year)	Amount of Each Receipt this Period
Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employer Occupation Aggregate Year-to-Date >	Date (month, day, year)	Amount of Each Receipt this Period
Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employer Occupation Aggregate Year-to-Date >	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)	\$25.00
TOTAL This Period (last page this line number only)	\$25.00

SCHEDULE A

ITEMIZED RECEIPTS

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

Other 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 COMMITTEE (in Full) **John Kelly for Congress** **C00352732**

<p>A. Full Name, Mailing Address and ZIP Code First State Bank 111 Lomas Blvd NW Albuquerque NM 87102</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$40.22</p>	<p>Date (month, day, year) 1/31/2000</p>	<p>Amount of Each Receipt this Period \$4.93 Interest Earned INTEREST/DIV IDEND</p>
<p>B. Full Name, Mailing Address and ZIP Code First State Bank 111 Lomas Blvd NW Albuquerque NM 87102</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$40.22</p>	<p>Date (month, day, year) 2/29/2000</p>	<p>Amount of Each Receipt this Period \$35.29 Interest Earned INTEREST/DIV IDEND</p>
<p>Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date ></p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date ></p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date ></p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date ></p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date ></p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>

<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>\$40.22</p>
<p>TOTAL This Period (last page this line number only)</p>	<p>\$40.22</p>

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 11

FOR LINE NUMBER

17

Operating Expenditures

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)

John Kelly for Congress

C00352732

A. Full Name, Mailing Address and ZIP Code A M Telephone	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
3501 San Mateo NE Albuquerque NM 87110	Office Expenses Office Expenses Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	2/29/2000	\$1,052.83
B. Full Name, Mailing Address and ZIP Code A. Gutierrez Associates Inc. 6501 4th St NW Suite F Albuquerque NM 87107	Purpose of Disbursement Campaign Consultant Campaign Consultant Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	1/27/2000	\$5,000.00
C. Full Name, Mailing Address and ZIP Code Alb Hispano Chamber of Commerec 202 Central Ave SE Suite 300 Albuquerque NM 87102	Purpose of Disbursement Other (Enter Description) Other Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	3/15/2000	\$255.00
D. Full Name, Mailing Address and ZIP Code Bank One PO Box 50882 Henderson NV 89015	Purpose of Disbursement Interest Bank Service Charge Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	2/21/2000	\$19.26
E. Full Name, Mailing Address and ZIP Code Bank One PO Box 50882 Henderson NV 89016	Purpose of Disbursement Bank Service Charge Bank Service Charge Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	2/21/2000	\$35.00
F. Full Name, Mailing Address and ZIP Code Bernalillo County Clerk PO Box 542 Albuquerque NM 87102	Purpose of Disbursement Petition Expenses Petition Expenses Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	1/31/2000	\$45.00
G. Full Name, Mailing Address and ZIP Code C Kinsman Design 718 Mountain Rd NW Albuquerque NM 87102	Purpose of Disbursement Campaign Literature Campaign Literature Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	2/4/2000	\$3,964.02
H. Full Name, Mailing Address and ZIP Code Camera Graphics Photolab 3300 Princeton NW Suite 18 Albuquerque NM 87107	Purpose of Disbursement Printing Printing Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	1/31/2000	\$11.08
I. Full Name, Mailing Address and ZIP Code Camera Graphics Photolab 3300 Princeton NW Suite 18 Albuquerque NM 87107	Purpose of Disbursement Printing Printing Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	2/4/2000	\$105.56

SUBTOTAL of Disbursements This Page (optional)

\$10,487.75

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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FOR LINE NUMBER 17

Operating Expenditures

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 committees.

NAME OF COMMITTEE (in Full)

John Kelly for Congress

C00352732

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Coldwell Banker Parmegg 6725 Academy Rd NE Albuquerque NM 87109	Office Rent Office Rent Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	3/15/2000	\$1,000.00
Coronado Cantina Hwy 44 and Rio Grande Bernalillo NM 87004	Events Events Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	2/29/2000	\$198.13
Cougar Publishing 4508 17th Ct NW Albuquerque NM 87107	Print Ads Print Ads Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	3/10/2000	\$211.62
Crystal Springs PO Box 90760 Albuquerque NM 87199	Office Expenses Office Expenses Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	2/28/2000	\$50.10
D G Dell And Market 1418 M L King Jr Ave Albuquerque NM 87105	Office Expenses Office Expenses Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	3/20/2000	\$30.16
Degrazio, Margaret 1921 Apache Ct NE Albuquerque NM 87106	Campaign Consultant Campaign Consultant Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	2/7/2000	\$150.00
Degrazio, Margaret 1921 Apache Ct NE Albuquerque NM 87106	Office Expenses Office Expenses Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	2/17/2000	\$200.00
Degrazio, Margaret 1921 Apache Ct NE Albuquerque NM 87106	Campaign Consultant Campaign Consultant Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	2/29/2000	\$225.00
Democratic Party Of N M 5317 Menaul Blvd NE Albuquerque NM 87110	Office Expenses Office Expenses Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	3/3/2000	\$50.00

SUBTOTAL of Disbursements This Page (optional)

\$2,115.01

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 3 OF 11
FOR LINE NUMBER 17

Operating Expenditures

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NAME OF COMMITTEE (In Full) **John Kelly for Congress** **C00362732**

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Einatein Bros Bagels 5010 Cutler Ave NE Albuquerque NM 87110	Office Expenses Office Expenses Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	3/20/2000	\$39.08
Fast Signs 8400 Menaul Blvd NE Albuquerque NM 87112	General Advertising Office Expenses Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	2/24/2000	\$80.93
First American Title 2601 Louisiana Blvd NE Albuquerque NM 87110	Line Of Credit Closing Cost Line Of Credit Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	3/15/2000	\$1,594.53
First Impression Inc. 8204 Lomas NE Albuquerque NM 87110	Office Expenses Office Expenses Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	3/2/2000	\$765.02
First State Bank 111 Lomas Blvd NW Albuquerque NM 87102	Events Events Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	2/1/2000	\$82.00
First State Bank 111 Lomas Blvd NW Albuquerque NM 87102	Bank Service Charge Bank Service Charge Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	2/1/2000	\$3.00
First State Bank 111 Lomas Blvd NW Albuquerque NM 87102	Bank Service Charge Checks and Check Book Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	2/2/2000	\$104.75
First State Bank 111 Lomas Blvd NW Albuquerque NM 87102	Campaign Workers' Salaries Campaign Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	3/16/2000	\$522.00
Greetings Etc Inc 920 First NW Albuquerque NM 87102	Printing Printing Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	3/27/2000	\$154.73

SUBTOTAL of Disbursements This Page (optional)	\$3,346.04
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate sheets (4444) for each category of the Detailed Summary Page

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Operating Expenditures

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)		C00352732	
A. Full Name, Mailing Address and ZIP Code Grlego, Eric 3107 Florida Ave NE Albuquerque NM 87110	Purpose of Disbursement Campaign Workers' Salaries Campaign Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year) 3/15/2000	Amount of Each Disbursement this Period \$1,551.43
B. Full Name, Mailing Address and ZIP Code Grothus, Barbara 906 Silver Ave SE Albuquerque NM 87102	Purpose of Disbursement Events Events Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year) 2/7/2000	Amount of Each Disbursement this Period \$347.94
C. Full Name, Mailing Address and ZIP Code Guire, Philip 3405 Calle Cuervo NW No 426 Albuquerque NM 87114	Purpose of Disbursement IN-KIND RECEIVED Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year) 3/27/2000	Amount of Each Disbursement this Period \$84.63
D. Full Name, Mailing Address and ZIP Code Gulre, Phillip 3405 Calle Cuervo NW No 426 Albuquerque NM 87114	Purpose of Disbursement Campaign Workers' Salaries Campaign Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year) 3/15/2000	Amount of Each Disbursement this Period \$767.98
E. Full Name, Mailing Address and ZIP Code Home Base 4373 Alexander Blvd Albuquerque NM 87107	Purpose of Disbursement Office Expenses Office Expenses Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year) 3/1/2000	Amount of Each Disbursement this Period \$52.78
F. Full Name, Mailing Address and ZIP Code Hyatt, Carolyn 2626 Norment Pl SW Albuquerque NM 87105	Purpose of Disbursement Campaign Workers' Salaries Campaign Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year) 2/15/2000	Amount of Each Disbursement this Period \$1,584.23
G. Full Name, Mailing Address and ZIP Code Hyatt, Carolyn 2626 Norment Pl SW Albuquerque NM 87105	Purpose of Disbursement Campaign Workers' Salaries Campaign Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year) 3/15/2000	Amount of Each Disbursement this Period \$1,578.42
H. Full Name, Mailing Address and ZIP Code Kennedy, Richard 1104 Chama NE Albuquerque NM 87110	Purpose of Disbursement Campaign Workers' Salaries Campaign Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year) 3/15/2000	Amount of Each Disbursement this Period \$461.75
I. Full Name, Mailing Address and ZIP Code Kennedy, Richard 1104 Chama NE Albuquerque NM 87110	Purpose of Disbursement IN-KIND RECEIVED Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year) 2/6/2000	Amount of Each Disbursement this Period \$16.30

SUBTOTAL of Disbursements This Page (optional)	\$6,445.46
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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FOR LINE NUMBER 17

Operating Expenditures

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NAME OF COMMITTEE (In Full)		C00352732	
A. Full Name, Mailing Address and ZIP Code Kinkos 2706 Central Ave SE Albuquerque NM 87106	Purpose of Disbursement Office Expenses Office Expenses Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year) 3/1/2000	Amount of Each Disbursement this Period \$21.92
B. Full Name, Mailing Address and ZIP Code Kinkos 2706 Central Ave SE Albuquerque NM 87106	Purpose of Disbursement Printing Printing Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year) 3/20/2000	Amount of Each Disbursement this Period \$202.10
C. Full Name, Mailing Address and ZIP Code Kinkos 2706 Central Ave SE Albuquerque NM 87106	Purpose of Disbursement Printing Office Expenses Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year) 2/29/2000	Amount of Each Disbursement this Period \$12.96
D. Full Name, Mailing Address and ZIP Code Kinsman, Carolyn 715 Mountain Rd NW Albuquerque NM 87102	Purpose of Disbursement IN-KIND RECEIVED Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year) 2/3/2000	Amount of Each Disbursement this Period \$660.00
E. Full Name, Mailing Address and ZIP Code La Posada De Albq 125 Second St NW Albuquerque NM 87102	Purpose of Disbursement Office Expenses Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year) 3/20/2000	Amount of Each Disbursement this Period \$149.28
F. Full Name, Mailing Address and ZIP Code La Sierra 6217 Central Ave NW Albuquerque NM 87106	Purpose of Disbursement Events Office Expenses Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year) 2/19/2000	Amount of Each Disbursement this Period \$168.30
G. Full Name, Mailing Address and ZIP Code Le Peap 2125 Louisiana Blvd NE Albuquerque NM 87110	Purpose of Disbursement Office Expenses Office Expenses Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year) 2/29/2000	Amount of Each Disbursement this Period \$12.60
H. Full Name, Mailing Address and ZIP Code Lea, Bryan 6767 Academy NE Albuquerque NM 87109	Purpose of Disbursement Office Rent Office Rent Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year) 2/15/2000	Amount of Each Disbursement this Period \$1,000.00
I. Full Name, Mailing Address and ZIP Code Louise Casias Typeset 4100 Palo Duro Ave NE Albuquerque NM 87110	Purpose of Disbursement Printing Printing Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year) 3/22/2000	Amount of Each Disbursement this Period \$50.79

SUBTOTAL of Disbursements This Page (optional)	\$2,277.95
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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FOR LINE NUMBER

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Operating Expenditures

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NAME OF COMMITTEE (in Full)

John Kelly for Congress

C00352732

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Lowes Super Save Lomas and 1th NW Albuquerque NM 87102	Events Events Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	3/2/2000	\$33.64
B. Full Name, Mailing Address and ZIP Code Made To Order Rubber Stamp Co 8100 Lomas Blvd NE Albuquerque NM 87110	Office Expenses Office Expenses Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	3/17/2000	\$27.92
C. Full Name, Mailing Address and ZIP Code Maps 909 Princeton SE Bldg 2 Albuquerque NM 87106	Printing Printing Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	3/22/2000	\$1,756.49
D. Full Name, Mailing Address and ZIP Code Maps 909 Princeton SE Bldg 2 Albuquerque NM 87106	Printing Campaign Consultant Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	3/7/2000	\$2,806.14
E. Full Name, Mailing Address and ZIP Code Matthews, Marian PMB 280 5901 J Wyoming NE Albuquerque NM 87109	Campaign Consultant Campaign Consultant Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	2/29/2000	\$279.24
F. Full Name, Mailing Address and ZIP Code N M Anti-Defamation League PO Box 21639 Albuquerque NM 87154	Other (Enter Description) Other Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	2/29/2000	\$40.00
G. Full Name, Mailing Address and ZIP Code N M Young Democrats 933 Quincy NE Albuquerque NM 87110	Events Events Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	3/8/2000	\$200.00
H. Full Name, Mailing Address and ZIP Code Office Max 3301 Menaul Blvd Albuquerque NM 87107	Office Expenses Office Expenses Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	3/20/2000	\$205.39
I. Full Name, Mailing Address and ZIP Code Office Max 3301 Menaul Blvd Albuquerque NM 87107	Office Expenses Office Expenses Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	3/20/2000	\$78.08

SUBTOTAL of Disbursements This Page (optional)

\$5,426.90

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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Operating Expenditures

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NAME OF COMMITTEE (in Full)		C00352732	
A. Full Name, Mailing Address and ZIP Code Office Max 3301 Menaul Blvd Albuquerque NM 87107	Purpose of Disbursement Office Expenses Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year) 3/20/2000	Amount of Each Disbursement this Period \$7.19
B. Full Name, Mailing Address and ZIP Code Office Max 3301 Menaul Blvd Albuquerque NM 87107	Purpose of Disbursement Office Expenses Office Expenses Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year) 3/20/2000	Amount of Each Disbursement this Period \$7.40
C. Full Name, Mailing Address and ZIP Code Party Barn Wyoming Mall Albuquerque NM 87110	Purpose of Disbursement Events Events Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year) 3/20/2000	Amount of Each Disbursement this Period \$28.64
D. Full Name, Mailing Address and ZIP Code Pizza Hut 700 Lomas Blvd NW Albuquerque NM 87110	Purpose of Disbursement Office Expenses Office Expenses Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year) 3/1/2000	Amount of Each Disbursement this Period \$18.00
E. Full Name, Mailing Address and ZIP Code Pizza Hut 700 Lomas Blvd NW Albuquerque NM 87110	Purpose of Disbursement Office Expenses Office Expenses Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year) 3/1/2000	Amount of Each Disbursement this Period \$22.08
F. Full Name, Mailing Address and ZIP Code Pizza Hut 700 Lomas Blvd NW Albuquerque NM 87110	Purpose of Disbursement Office Expenses Bank Service Charge Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year) 3/20/2000	Amount of Each Disbursement this Period \$22.83
G. Full Name, Mailing Address and ZIP Code Pizza Hut 700 Lomas Blvd NW Albuquerque NM 87110	Purpose of Disbursement Office Expenses Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year) 3/20/2000	Amount of Each Disbursement this Period \$17.44
H. Full Name, Mailing Address and ZIP Code Rindy Media 601 North Interregional Austin TX 78702	Purpose of Disbursement Campaign Consultant Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year) 2/20/2000	Amount of Each Disbursement this Period \$2,500.00
I. Full Name, Mailing Address and ZIP Code Smiths Food And Drug 6601 Lomas NE Albuquerque NM 87110	Purpose of Disbursement Office Expenses Bank Service Charge Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year) 3/20/2000	Amount of Each Disbursement this Period \$17.55

SUBTOTAL of Disbursements This Page (optional)	\$2,641.13
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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FOR LINE NUMBER 17

Operating Expenditures

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NAME OF COMMITTEE (In Full)		C00352732	
A. Full Name, Mailing Address and ZIP Code Smiths Food And Drug 6601 Lomas NE Albuquerque NM 87110	Purpose of Disbursement Office Expenses Office Expenses Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year) 3/1/2000	Amount of Each Disbursement this Period \$7.58
B. Full Name, Mailing Address and ZIP Code Smiths Food And Drug 6601 Lomas NE Albuquerque NM 87110	Purpose of Disbursement Office Expenses Office Expenses Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year) 3/1/2000	Amount of Each Disbursement this Period \$15.49
C. Full Name, Mailing Address and ZIP Code Southwest Copy System 6201 B Pan American Fwy NE Albuquerque NM 87109	Purpose of Disbursement Office Expenses Office Expenses Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year) 2/23/2000	Amount of Each Disbursement this Period \$52.91
D. Full Name, Mailing Address and ZIP Code Southwest Copy System 6201 B Pan American Fwy NE Albuquerque NM 87109	Purpose of Disbursement Office Expenses Office Expenses Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year) 2/18/2000	Amount of Each Disbursement this Period \$238.08
E. Full Name, Mailing Address and ZIP Code Southwest Copy System 6201 B Pan American Fwy NE Albuquerque NM 87109	Purpose of Disbursement Office Expenses Office Expenses Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year) 3/22/2000	Amount of Each Disbursement this Period \$290.99
F. Full Name, Mailing Address and ZIP Code Spurr, Ken 601 Arizona SE Albuquerque NM 87108	Purpose of Disbursement IN-KIND RECEIVED Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year) 3/16/2000	Amount of Each Disbursement this Period \$45.00
G. Full Name, Mailing Address and ZIP Code Starship Tshirts Inc 1520 Eubank NE Albuquerque NM 87112	Purpose of Disbursement General Advertising Events Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year) 3/22/2000	Amount of Each Disbursement this Period \$344.95
H. Full Name, Mailing Address and ZIP Code Starship Tshirts Inc 1520 Eubank NE Albuquerque NM 87112	Purpose of Disbursement General Advertising General Advertising Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year) 3/10/2000	Amount of Each Disbursement this Period \$376.67
I. Full Name, Mailing Address and ZIP Code Starship Tshirts Inc 1520 Eubank NE Albuquerque NM 87112	Purpose of Disbursement General Advertising General Advertising Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year) 3/7/2000	Amount of Each Disbursement this Period \$300.00

SUBTOTAL of Disbursements This Page (optional)	\$1,671.67
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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Operating Expenditures

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NAME OF COMMITTEE (In Full) **John Kelly for Congress** GD0352732

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Subway 2521 San Mateo Blvd NE Albuquerque NM 87110	Office Expenses Office Expenses Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	3/1/2000	\$10.63
Subway 2521 San Mateo Blvd NE Albuquerque NM 87110	Office Expenses Office Expenses Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	3/1/2000	\$12.45
Techpool Computer Co 6009 Smokerise Ave NW Albuquerque NM 87120	Office Expenses Office Expenses Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	3/22/2000	\$190.46
Trujillo, D 125 Griegos Rd Albuquerque NM 87107	Events Events Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	2/6/2000	\$200.00
U S Post Office Federal Building Albuquerque NM 87101	Campaign Mailings Campaign Mailings Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	2/11/2000	\$200.00
U S Post Office Federal Building Albuquerque NM 87101	Postage Postage Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	2/2/2000	\$99.00
U S Post Office Federal Building Albuquerque NM 87101	Postage Postage Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	2/24/2000	\$65.00
U S Post Office Federal Building Albuquerque NM 87101	Postage Postage Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	3/14/2000	\$99.00
U S Post Office Federal Building Albuquerque NM 87101	Postage Postage Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	2/3/2000	\$33.00

SUBTOTAL of Disbursements This Page (optional)	\$910.54
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedules for each category of the Detailed Summary Page

PAGE 10 OF 11

FOR LINE NUMBER

17

Operating Expenditures

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)		C00352732	
A. Full Name, Mailing Address and ZIP Code U S Post Office Federal Building Albuquerque NM 87101	Purpose of Disbursement Campaign Mailings Campaign Mailings Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year) 2/15/2000	Amount of Each Disbursement this Period \$98.36
B. Full Name, Mailing Address and ZIP Code U S Post Office Federal Building Albuquerque NM 87101	Purpose of Disbursement Postage Postage Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year) 3/20/2000	Amount of Each Disbursement this Period \$42.78
C. Full Name, Mailing Address and ZIP Code U S Post Office Federal Building Albuquerque NM 87101	Purpose of Disbursement Postage Postage Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year) 3/27/2000	Amount of Each Disbursement this Period \$207.04
D. Full Name, Mailing Address and ZIP Code U S Post Office Federal Building Albuquerque NM 87101	Purpose of Disbursement Campaign Mailings Campaign Mailings Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year) 2/25/2000	Amount of Each Disbursement this Period \$139.74
E. Full Name, Mailing Address and ZIP Code U S West PO Box 29060 Phoenix AZ 85038	Purpose of Disbursement Office Expenses Office Expenses Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year) 3/10/2000	Amount of Each Disbursement this Period \$200.00
F. Full Name, Mailing Address and ZIP Code U S West PO Box 29060 Phoenix AZ 85038	Purpose of Disbursement Office Expenses Office Expenses Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year) 2/29/2000	Amount of Each Disbursement this Period \$640.09
G. Full Name, Mailing Address and ZIP Code U S West Political Group 1005 17th St Room 370 Denver CO 80202	Purpose of Disbursement Office Expenses Office Expenses Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year) 2/9/2000	Amount of Each Disbursement this Period \$1,540.00
H. Full Name, Mailing Address and ZIP Code Valley Distributing Co Inc 2819 Second St NW Albuquerque NM 87107	Purpose of Disbursement Office Expenses Office Expenses Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year) 2/4/2000	Amount of Each Disbursement this Period \$52.90
I. Full Name, Mailing Address and ZIP Code Weldy Screenprint 105 Veranda NW Albuquerque NM 87107	Purpose of Disbursement General Advertising General Advertising Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year) 3/7/2000	Amount of Each Disbursement this Period \$250.00

SUBTOTAL of Disbursements This Page (optional)	\$3,170.91
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 11 OF 11

FOR LINE NUMBER

17

Operating Expenditures

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NAME OF COMMITTEE (In Full) John Kelly for Congress	C00352732
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A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Weldy Screenprint 105 Veranda NW Albuquerque NM 87107	General Advertising General Advertising Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	3/10/2000	\$747.28
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year)	Amount of Each Disbursement this Period
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year)	Amount of Each Disbursement this Period
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year)	Amount of Each Disbursement this Period
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year)	Amount of Each Disbursement this Period
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year)	Amount of Each Disbursement this Period
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year)	Amount of Each Disbursement this Period
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year)	Amount of Each Disbursement this Period
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (month, day, year)	Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)	\$747.28
TOTAL This Period (list page this line number only)	\$39,240.64

SCHEDULE C

LOANS

(Revised 3/80) Loans owed BY the Committee

Name of Committee (In Full) **John Kelly for Congress** C08352732

A. Full Name, Mailing Address and Zip Code of Loan Source	Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
Kelly, John R^S 3510 Wolcott Pl NE Albuquerque, NM 87106 Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	\$75,000.00	\$0.00	\$75,000.00

Terms: Date Incurred 3/30/2000 Date Due 3/31/2001 Interest Rate 9.25 %(apr) Secured

List All Endorsers or Guarantors (if any) to Item A

1. Full Name, Mailing Address and Zip Code	Name of Employer	Occupation	Amount Guaranteed Outstanding
			\$0.00
			\$0.00
			\$0.00

B. Full Name, Mailing Address and Zip Code of Loan Source	Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
Kelly, John R^S 3510 Wolcott Pl NE Albuquerque, NM 87106 Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	\$25,000.00	\$0.00	\$25,000.00

Terms: Date Incurred 1/26/2000 Date Due 1/26/2001 Interest Rate 0 %(apr) Secured

List All Endorsers or Guarantors (if any) to Item A

1. Full Name, Mailing Address and Zip Code	Name of Employer	Occupation	Amount Guaranteed Outstanding
			\$0.00
			\$0.00
			\$0.00

SUBTOTALS This Period This Page (optional).....	\$100,000.00
TOTALS This Period (last page in this line only).....	\$100,000.00

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

SCHEDULE D

(Revised 3/80) Owed BY the Committee

DEBTS AND OBLIGATIONS

Excluding Loans

FROM

1/1/2000

TO

3/31/2000

PAGE 1 of 3 for
LINE NUMBER 10
(Use separate schedules for each numbered line)

Name of Committee (In Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
John Kelly for Congress				
C00052732				
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor Bennett Petis And Blumenthal 1010 Wisconsin Ave NW Suite 208 Washington DC 20007	\$0.00	\$14,200.00	\$0.00	\$14,200.00
Nature of Debt (Purpose): Campaign Consultant				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor Sprint PO Box 101343 Atlanta GA 30392	\$0.00	\$190.71	\$0.00	\$190.71
Nature of Debt (Purpose): Office Expenses				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor U S West PO Box 29060 Phoenix AZ 85038	\$0.00	\$544.64	\$0.00	\$544.64
Nature of Debt (Purpose): Office Expenses				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor Diversified Printing Inc 201 San Pedro NE Albuquerque NM 87108	\$0.00	\$378.11	\$0.00	\$378.11
Nature of Debt (Purpose): Printing				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor Office Max 3301 Menaul Blvd Albuquerque NM 87107	\$0.00	\$96.23	\$0.00	\$96.23
Nature of Debt (Purpose): Office Expenses				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor Coldwell Banker Parnegg 6725 Academy Rd NE Albuquerque NM 87109	\$0.00	\$3,000.00	\$1,000.00	\$2,000.00
Nature of Debt (Purpose): 3 month lease Office Rent				

1) SUBTOTALS This Period This Page (optional)	\$17,409.69
2) TOTALS This Period (last page in this line only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

SCHEDULE D

(Revised 3/80) Owed BY the Committee

DEBTS AND OBLIGATIONS

Excluding Loans

FROM

1/1/2000

TO

3/31/2000

Name of Committee (In Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
000052732 John Kelly for Congress				
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor Office Max 3301 Menaul Blvd Albuquerque NM 87107 Nature of Debt (Purpose): Office Expenses	\$0.00	\$132.26	\$0.00	\$132.26
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor Office Max 3301 Menaul Blvd Albuquerque NM 87107 Nature of Debt (Purpose): Office Expenses	\$0.00	\$137.79	\$0.00	\$137.79
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor Office Max 3301 Menaul Blvd Albuquerque NM 87107 Nature of Debt (Purpose): Office Expenses	\$0.00	\$12.70	\$0.00	\$12.70
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor Smiths Food And Drug 6601 Lomas NE Albuquerque NM 87110 Nature of Debt (Purpose): Office Expenses	\$0.00	\$31.98	\$0.00	\$31.98
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor Albertsons 6600 Central Ave S W Albuquerque NM 87121 Nature of Debt (Purpose): Office Expenses	\$0.00	\$56.31	\$0.00	\$56.31
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor Party Barn Wyoming Mall Albuquerque NM 87110 Nature of Debt (Purpose): Office Expenses	\$0.00	\$25.86	\$0.00	\$25.86

1) SUBTOTALS This Period This Page (optional)	\$396.90
2) TOTALS This Period (last page in this line only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

SCHEDULE D

(Revised 3/80) Owed BY the Committee

DEBTS AND OBLIGATIONS

Excluding Loans FROM 1/1/2000 TO 3/31/2000

PAGE 3 of 3 for
LINE NUMBER 10
(Use separate schedules for each numbered line)

Name of Committee (In Full) John Kelly for Congress	Committee ID C00952732	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor Kinkos 2706 Central Ave SE Albuquerque NM 87106		\$0.00	\$56.08	\$0.00	\$56.08
Nature of Debt (Purpose): Printing					
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor Office Max 3301 Menaul Blvd Albuquerque NM 87107		\$0.00	\$90.02	\$0.00	\$90.02
Nature of Debt (Purpose): Office Expenses					
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor Crystal Springs PO Box 90760 Albuquerque NM 87199		\$0.00	\$10.58	\$0.00	\$10.58
Nature of Debt (Purpose): Office Expenses					
Full Name, Mailing Address and Zip Code of Debtor or Creditor					
Nature of Debt (Purpose):					
Full Name, Mailing Address and Zip Code of Debtor or Creditor					
Nature of Debt (Purpose):					
Full Name, Mailing Address and Zip Code of Debtor or Creditor					
Nature of Debt (Purpose):					

1) SUBTOTALS This Period This Page (optional)	\$156.68
2) TOTALS This Period (last page in this line only)	\$17,963.27
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	\$100,000.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	\$117,963.27

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
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<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked _____ and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
<i>JMW</i> PREPARER	4-10-02 DATE PREPARED