

STATEMENT OF ORGANIZATION

(See reverse side for instructions)

RECEIVED

1. (a) NAME OF COMMITTEE IN FULL <input type="checkbox"/> (Check if name is changed) Santa Fe Pacific Gold Corp. Political Action Committee (GOLDFAC)	FEDERAL ELECTION COMMISSION MAIL ROOM February 24, 1997
(b) Number and Street Address <input type="checkbox"/> (Check if address is changed) 6200 Uptown Boulevard, N.E., Suite 400	2. FEC IDENTIFICATION NUMBER C-DO298133
(c) City, State and ZIP Code Albuquerque, New Mexico 87110	3. IS THIS STATEMENT AN AMENDMENT? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO

5. TYPE OF COMMITTEE (Check one)

- (a) This committee is a principal campaign committee. (Complete the candidate information below.)
- (b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)
- | Name of Candidate | Candidate Party Affiliation | Office Sought | State/District |
|-------------------|-----------------------------|---------------|----------------|
| | | | |
- (c) This committee supports/opposes only one candidate _____ and is NOT an authorized committee.
(name of candidate)
- (d) This committee is a _____ committee of the _____ Party.
(National, State or subordinate) (Democratic, Republican, etc.)
- (e) This committee is a separate segregated fund.
- (f) This committee supports/opposes more than one Federal candidate and is NOT a separate segregated fund or a party committee.

Name of Any Connected Organization or Affiliated Committee	Mailing Address and ZIP Code	Relationship
Santa Fe Pacific Gold Corp.	6200 Uptown Boulevard, N.E. Albuquerque, NM 87110	Connected

Type of Connected Organization

- Corporation Corporation w/o Capital Stock Labor Organization Membership Organization Trade Association Cooperative

7. Custodian of Records: Identify by name, address (phone number - optional) and position of the person in possession of committee books and records.

Full Name	Mailing Address	Title or Position
Public Affairs Support Services	1020 N. Fairfax Street, 5th Floor Alexandria, VA 22314	Treasurer's Agent

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name	Mailing Address	Title or Position
Paula Templeton	6200 Uptown Boulevard, NE, Albuquerque, NM 87110	Treasurer
Kelli D. McKeehan	6200 Uptown Boulevard, NE, Albuquerque, NM 87110	Assistant Treasurer

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.	Mailing Address and ZIP Code
First Security Bank of New Mexico	40 First Plaza Albuquerque, NM 87102

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

TYPE OR PRINT NAME OF TREASURER Paula Templeton	SIGNATURE OF TREASURER <i>Paula Templeton</i>	DATE 3/4/97
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NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. 5437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Federal Election Commission
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ES
PREPARER

3/7/97
DATE PREPARED