

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION

Oct 15 10 05 AM '98

USE FEC MAILING LABEL OR TYPE OR PRINT

C00304550	081898	
CYNTHIA M RHODES E SHIRLEY SAGA FOR CONGRESS 1005 SYCAMORE DR LAS CRUCES		
	NM 88003	
	ICT NM/02	
		2. FEC IDENTIFICATION NUMBER C00304550
		3. IS THIS REPORT AN AMENDMENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

4. TYPE OF REPORT

- | | |
|---|--|
| <input type="checkbox"/> April 15 Quarterly Report | <input type="checkbox"/> 12-Day Pre-Election Report for the _____ (Type of Election) election on _____ in the State of _____ |
| <input type="checkbox"/> July 15 Quarterly Report | <input type="checkbox"/> 30-Day Post-Election Report following the General Election on _____ in the State of _____ |
| <input checked="" type="checkbox"/> October 15 Quarterly Report | <input type="checkbox"/> Termination Report |
| <input type="checkbox"/> January 31 Year End Report | |
| <input type="checkbox"/> July 31 Mid-Year Report (Non-election Year Only) | |

This report contains activity for: Primary Election General Election Special Election Runoff Election

SUMMARY

5. Covering Period: <u>7/1/98</u> through <u>9/30/98</u>	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(a))	111,708.20	211,241.42
(b) Total Contribution Refunds (from Line 20(d))		
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	111,708.20	211,241.42
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	76,899.70	157,704.32
(b) Total Offsets to Operating Expenditures (from Line 14)		
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	76,899.70	157,704.32
8. Cash on Hand at Close of Reporting Period (from Line 27)	32,580.37	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	802.41	

For further information contact:
Federal Election Commission
899 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3428

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 Cynthia M. Rhodes	Date 10/13/98
Signature of Treasurer <i>Cynthia Rhodes</i>	

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

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DETAILED SUMMARY PAGE

of Receipts and Disbursements

(Page 2, FEC FORM 3)

Name of Committee (in full)	Report Covering the Period:	
E. Shirley Baca for Congress	From: 7/1/98	To: 9/30/98
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)	39,053.94	
(ii) Unitemized	24,119.26	
(iii) Total of contributions from individuals	63,173.20	97,439.81
(b) Political Party Committees		
(c) Other Political Committees (such as PACs)	48,500.00	64,000.00
(d) The Candidate	35.00	35.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(i)(iii), (b), (c) and (d))	111,708.20	161,474.81
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
(b) All Other Loans		
(c) TOTAL LOANS (add 13(a) and (b))		
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)		
15. OTHER RECEIPTS (Dividends, Interest, etc.)		
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)	111,708.20	161,474.81
II. DISBURSEMENTS		
17. OPERATING EXPENDITURES	76,899.70	157,704.32
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES		
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate		
(b) Of All Other Loans		
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))		
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees		
(c) Other Political Committees (such as PACs)		
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))		
21. OTHER DISBURSEMENTS	5,000.00	5,450.00
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)	81,899.70	163,154.32
III. CASH SUMMARY		
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	\$ 2,771.87	
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)	\$ 111,708.20	
25. SUBTOTAL (add Line 23 and Line 24)	\$ 114,480.07	
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	\$ 81,899.70	
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)	\$ 32,580.37	

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 17

FOR LINE NUMBER 11a1

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)

E. Shirley Baca for Congress

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Aguirre, Stephen A. P.O. Drawer 2276 Las Cruces, NM 88004	Self	8/3/98	300.00
	Occupation Contractor (Construction)	9/3/98	240.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$790.00	
B. Full Name, Mailing Address and ZIP Code Almanzar, Steven R. 1510 Country Club Circle Las Cruces, NM 88001	Self	7/8/98	250.00
	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$350.00	
C. Full Name, Mailing Address and ZIP Code Alvarez, Josefina 4808 Gambel Court Las Cruces, NM 88011	New Mexico State Univ.	8/11/98	100.00
	Occupation Professor	9/22/98	100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$200.00	
D. Full Name, Mailing Address and ZIP Code Anaya, Mike P.O. Box 10 Moriarity, NM 87035	Self	9/28/98	200.00
	Occupation Restaurant Owner		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$200.00	
E. Full Name, Mailing Address and ZIP Code Appleby, Anna M. 403 Eaton Ave. Socorro, NM 87801	Self	7/1/98	1,000.00
	Occupation Bed & Breakfast Owner		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$1,000.00	
F. Full Name, Mailing Address and ZIP Code Aragon, Manny M. P.O. Drawer 2 Albuquerque, NM 87103	Self	8/14/98	500.00
	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$500.00	
G. Full Name, Mailing Address and ZIP Code Arango, Polly Box 338 Algodones, NM 87001	Self	9/10/98	250.00
	Occupation Management Consultant		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$250.00	

SUBTOTAL of Receipts This Page (optional) 2,940.00

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 17

FOR LINE NUMBER 11a1

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NAME OF COMMITTEE (In Full)

E. Shirley Baca for Congress

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Asprey, Margaret W. 13 Lebanon Arc. Las Cruces, NM 88005	Retired	8/4/98	200.00
	Occupation	8/25/98	40.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 240.00		
B. Full Name, Mailing Address and ZIP Code Beagles, Vergil P.O. Box 2167 Roswell, NM 88202	Name of Employer Self	Date (month, day, year) 7/15/98	Amount of Each Receipt this Period 500.00
	Occupation Contractor		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		
C. Full Name, Mailing Address and ZIP Code Behavidez, Steve H. P.O. Box 66 LasMesa, NM 88044	Name of Employer Self	Date (month, day, year) 7/9/98	Amount of Each Receipt this Period 200.00
	Occupation Restaurant Owner	9/12/98	252.90 In Kind
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$452.90		
D. Full Name, Mailing Address and ZIP Code Binning, Dixie P.O. Box 2627 Hatch, NM 87937	Name of Employer General Publications, Inc.	Date (month, day, year) 7/22/98	Amount of Each Receipt this Period 1,000.00
	Occupation Editor		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$1,000.00		
E. Full Name, Mailing Address and ZIP Code Blalock, Dorothy B. P.O. Box 375 Silver City, NM 88062	Name of Employer Retired	Date (month, day, year) 8/21/98	Amount of Each Receipt this Period 200.00
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 200.00		
F. Full Name, Mailing Address and ZIP Code Blundell, Bobby P.O. Box 386 Carlsbad, NM 88220	Name of Employer Self	Date (month, day, year) 9/30/98	Amount of Each Receipt this Period 200.00
	Occupation Geologic Engineer		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 200.00		
G. Full Name, Mailing Address and ZIP Code Bobbs, Elspeth G. 630 East Alameda Santa Fe, NM 87501	Name of Employer Retired	Date (month, day, year) 8/17/98	Amount of Each Receipt this Period 500.00
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$500.00		

SUBTOTAL of Receipts This Page (optional) 3,092.90

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 17
FOR LINE NUMBER 11a1

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NAME OF COMMITTEE (in Full)

E. Shirley Baca for Congress

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Bunting, Dorelen 5021 Guadalupe Trail, NW Albuquerque, NM 87107	Retired	7/30/98	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation:	Aggregate Year-to-Date > \$250.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Caballero, Cristina 5625 Cavalier Woods Ln. Clifton, VA 22024-1077	Dialogue on Diversity	8/10/98	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Executive Director	Aggregate Year-to-Date > \$200.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Carter, Jane B. 5160 Canary Ct. Las Cruces, NM 88005	Retired	7/28/98 8/25/98 9/29/98	400.00 30.00 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation:	Aggregate Year-to-Date > \$680.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Chapin, Peter L. 49 Calle San Martin Santa Fe, NM 87501	Self	7/13/98	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Artist	Aggregate Year-to-Date > \$1,000.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Cherry, Doris P.O. Box 401 Capitan, NM 88316	Self	7/4/98	100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: News Reporting	Aggregate Year-to-Date > \$200.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Cope, Johnny D. 412 E. Arriba Hobbs, NM 88240	Self	7/6/98	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Oil Business	Aggregate Year-to-Date > \$1,000.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Davis, Charles D. 1909 Burke Rd. Las Cruces, NM 88005	Retired	9/30/98	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation:	Aggregate Year-to-Date > \$200.00	

SUBTOTAL of Receipts This Page (optional)	3,430.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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FOR LINE NUMBER 11a1

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NAME OF COMMITTEE (in Full)

E. Shirley Baca for Congress

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DeKleven, Concha Ortiz Y Pino 1506 Las Lomas Rd., NE Albuquerque, NM 87106	Homemaker / Self	7/8/98	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Homemaker	Aggregate Year-to-Date > \$ 200.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Diamond, Jeffrey B. P.O. Box 1866 Carlsbad, NM 88220	Self	9/30/98	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$ 200.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Doroshov, Helen L. 826 Camino del Monte Rey, No. A2 Santa Fe, NM 87501	Cottonwood Corp.	8/14/98	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Real Estate	Aggregate Year-to-Date > \$ 250.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Duhigg, David 1750 Shadyside Dr., SW Albuquerque, NM 87105	Self	7/23/98	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$ 250.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dubbin, Stella B. 4115 Senna Dr. Las Cruces, NM 88011	n/a	8/10/98 8/31/98	100.00 30.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Homemaker	Aggregate Year-to-Date > \$ 280.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Durkovich, Karen A. 1737 Lafayette Dr., NE Albuquerque, NM 87106	Self	7/23/98	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$ 250.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Espinosa, Judith M. 3417 Pickard, NE Albuquerque, NM 87110	Self	9/11/98	200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$ 200.00	

SUBTOTAL of Receipts This Page (optional)	1,480.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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FOR LINE NUMBER 11a1

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NAME OF COMMITTEE (In Full)

E. Shirley Baca for Congress

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Flemming, Roger 1022 Elm St., #D Las Cruces, NM 88005	E. Shirley Baca for Congress	7/24/98 8/1/98	13.50 In Kind 90.75 In Kind
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Campaign Manager	Aggregate Year-to-Date > \$ 304.25	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Flores, Raymond N. Box 511 Cloudcroft, NM 88317	New Tech	8/13/98 8/20/98 9/8/98 9/28/98	100.00 75.00 100.00 125.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Electronic Technician	Aggregate Year-to-Date > \$ 400.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Foy, James B. 2203 Juniper St. Silver City, NM 88062	Self	9/9/98	100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$300.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Foy, Valvina 2203 Juniper St. Silver City, NM 88062	n/a	8/10/98	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Homemaker	Aggregate Year-to-Date > \$ 200.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Garcia, Roque P.O. Box 1361 Bayard, NM 88023-1361	Border Mental Health	8/10/98	100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Executive Director	Aggregate Year-to-Date > \$250.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Gilbert, Kathie 3451 Ursa Minor Silver City, NM 88061	Self	8/11/98	100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Artist	Aggregate Year-to-Date > \$ 300.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Gulliani, Judith 2336 Union Ave. Alamogordo, NM 88310	Retired	7/10/98	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 250.00	

SUBTOTAL of Receipts This Page (optional) 1,254.25

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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PAGE 6 OF 17
FOR LINE NUMBER 11a

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NAME OF COMMITTEE (in Full)

E. Shirley Baca for Congress

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Goad, Walter B. P.O. Box 2502 Santa Fe, NM 87504	Retired	7/22/98	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1,000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Goodacre, Glenna 1524 Canyon Road Santa Fe, NM 87501	Self	7/10/98	250.00 In Kind
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Artist	Aggregate Year-to-Date > \$ 250.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Graham, J.L. 1108 Gardner Las Cruces, NM 88001	Self	8/12/98	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Builder/Contractor	Aggregate Year-to-Date > \$ 250.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Gunther, Betty Ann 1510 Camino Medio Los Alamos, NM 87544	Los Alamos National Labs	8/8/98	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Computer Programmer	Aggregate Year-to-Date > \$ 300.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Haxton, Judy 1200 N. Main Las Cruces, NM 88001		9/11/98	35.00 In Kind
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 35.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Burley, Mary J. Rt. 1, Box 368 Anthony, NM 88021	Memorial Medical Center	8/13/98 9/3/98	100.00 120.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Nurse	Aggregate Year-to-Date > \$ 220.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Hutchison, Frank L. 1965 Corbett Dr. Las Cruces, NM 88001	Retired	8/12/98	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 600.00	

SUBTOTAL of Receipts This Page (optional) 2,155.00

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 17
FOR LINE NUMBER 11a1

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NAME OF COMMITTEE (In Full)

E. Shirley Baca for Congress

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Arlona Markinson P.O. Box 877 Santa Fe, NM 87504 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Retired	7/23/98	250.00
	Occupation		
Aggregate Year-to-Date >		\$550.00	
B. Full Name, Mailing Address and ZIP Code Jaramillo, Maria Rita 2816 N. Yucatan St. Arlington, VA 22213 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	US Congress	7/16/98	400.00
	Occupation		
Aggregate Year-to-Date >		\$ 400.00	
C. Full Name, Mailing Address and ZIP Code Jenkins, Glynn T. 2300 Desert Dr. Las Cruces, NM 88001 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Las Cruces Public Schools	8/25/98	120.00
	Occupation		
Aggregate Year-to-Date >		\$ 220.00	
D. Full Name, Mailing Address and ZIP Code Kelley, Patrick M. 3750 Benton St. Santa Clara, CA 95051 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	International Business Machines	7/20/98	250.00
	Occupation		
Aggregate Year-to-Date >		\$250.00	
E. Full Name, Mailing Address and ZIP Code Lewis, Eugene R. 2011 Yucca Silver City, NM 88061 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Retired	7/14/98	100.00
	Occupation	8/12/98	100.00
Aggregate Year-to-Date >		\$ 200.00	
F. Full Name, Mailing Address and ZIP Code Lilley, Michael W. 7024 Raasaf Dr. Las Cruces, NM 88005 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Self	7/8/98	100.00
	Occupation	9/16/98	75.00
Aggregate Year-to-Date >		\$225.00	
G. Full Name, Mailing Address and ZIP Code Maloof, Phillip J. 119 Industrial Ave., NE Albuquerque, NM 87120 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Self (Maloof, Inc.)	7/17/98	1,000.00
	Occupation		
Aggregate Year-to-Date >		\$1,000.00	

SUBTOTAL of Receipts This Page (optional)	2,395.00
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

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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)

E. Shirley Baca for Congress

A. Full Name, Mailing Address and ZIP Code

Marnell, Melodie J.
1700 N. Union Ave.
Roswell, NM 88201

Name of Employer

Self

Date (month, day, year)

7/14/98

Amount of Each Receipt this Period

250.00

Occupation

Budget King Owner

Receipt For:

Primary

General

Other (specify):

Aggregate Year-to-Date > \$ 250.00

B. Full Name, Mailing Address and ZIP Code

Martinez, Lawrence
1200 Crystal Dr. #1211
Arlington, VA 22202

Name of Employer

Graphics & Comm. Union

Date (month, day, year)

9/9/98

Amount of Each Receipt this Period

200.00

Occupation

Receipt For:

Primary

General

Other (specify):

Aggregate Year-to-Date > \$ 200.00

C. Full Name, Mailing Address and ZIP Code

Masse, Roger E.
3750 Benton St.
Santa Clara, CA 95051

Name of Employer

I.B.M.

Date (month, day, year)

7/20/98

Amount of Each Receipt this Period

250.00

Occupation

Tech Writer

Receipt For:

Primary

General

Other (specify):

Aggregate Year-to-Date > \$ 250.00

D. Full Name, Mailing Address and ZIP Code

Massey, Pamela W.
1299 San Ildefonso
Los Alamos, NM 87544

Name of Employer

Los Alamos National Labs

Date (month, day, year)

7/9/98

Amount of Each Receipt this Period

250.00

Occupation

Engineer

Receipt For:

Primary

General

Other (specify):

Aggregate Year-to-Date > \$ 250.00

E. Full Name, Mailing Address and ZIP Code

McConnell, Mary A.
P.O. Box 22694
Santa Fe, NM 87501

Name of Employer

Self

Date (month, day, year)

7/30/98

Amount of Each Receipt this Period

500.00

Occupation

Attorney

Receipt For:

Primary

General

Other (specify):

Aggregate Year-to-Date > \$ 500.00

F. Full Name, Mailing Address and ZIP Code

McCormick, Flavia D.
3249 Fairway Dr.
Las Cruces, NM 88011

Name of Employer

Retired

Date (month, day, year)

9/22/98

Amount of Each Receipt this Period

100.00

Occupation

Receipt For:

Primary

General

Other (specify):

Aggregate Year-to-Date > \$ 300.00

G. Full Name, Mailing Address and ZIP Code

McGinn, Randall
2104 Campbell Rd., NW
Albuquerque, NM 87104

Name of Employer

Self

Date (month, day, year)

7/30/98

Amount of Each Receipt this Period

1,000.00

Occupation

Attorney

Receipt For:

Primary

General

Other (specify):

Aggregate Year-to-Date > \$ 1,000.00

SUBTOTAL of Receipts This Page (optional)

2,550.00

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

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NAME OF COMMITTEE (in Full)

E. Shirley Baca for Congress

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
McNamara, James D. 1610 Winton Ct. Las Cruces, NM 88005	Retired	7/20/98	100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 200.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Meaders, Michelle 921 Carlisle, NE Albuquerque, NM 87106	Univ. of New Mexico	7/20/98	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Computer Programmer	Aggregate Year-to-Date > \$ 250.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Menapace, Joseph D. 2809 Plaza Verde Santa Fe, NM 87505	Self	9/22/98	400.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Lobbyist	Aggregate Year-to-Date > \$ 400.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Meyer, Paulette J. 40B Columbia Ave., Suite Four San Francisco, CA 94133-3929	Self	9/19/98	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Consultant	Aggregate Year-to-Date > \$ 250.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Midgetts, Sally P.O. Box 1 Roswell, NM 88201	Unity Center	7/14/98	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Director	Aggregate Year-to-Date > \$1,000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Miyazaki, Carol 26 Cuates Canyon Rd. Las Cruces, NM 88011	Self	9/12/98	350.00 In Kind
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Restaurant Owner	Aggregate Year-to-Date > \$ 350.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Moldaw, Carol Rt. 5, Box 231 Santa Fe, NM 87501	Self	9/14/98	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Attorney	Aggregate Year-to-Date > \$250.00	

SUBTOTAL of Receipts This Page (optional)	2,600.00
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

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NAME OF COMMITTEE (In Full)
E. Shirley Baca for Congress

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Monagle, Elizabeth B. 1610 High St. Las Cruces, NM 88011	Retired	7/1/98	400.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 525.00	
Morton, Anita K. 1404 N. Florida St. Silver City, NM 88061	Retired	7/9/98 9/15/90	50.00 50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 200.00	
Kossburg, Irene M. 4560 Timber Way East Silver City, NM 88061	Retired	7/9/98 8/14/98	500.00 450.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1,200.00	
Mott, Maryanne 1915 San Leandro Lane Santa Barbara, CA 93108	Self	7/9/98	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Foundation Director	Aggregate Year-to-Date > \$ 750.00	
O'Hara, Ellen 822 E. Lohman Ave. Las Cruces, NM 88001		9/11/98	70.00 In Kind
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 70.00	
Organs, James 203 Dartmouth Dr., SE Albuquerque, NM 87106	Self	7/2/98	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$ 250.00	
Ostertag, Edward P.O. Box 488 Hillsboro, NM 88042	Retired	7/1/98 9/8/96	200.00 100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 450.00	

SUBTOTAL of Receipts This Page (optional)	2,320.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

E. Shirley Baca for Congress

A. Full Name, Mailing Address and ZIP Code Pena, Ada R. 701 Pennsylvania Ave., NW Washington, DC 20004	Name of Employer Uniglobe Occupation Travel Agent Aggregate Year-to-Date > \$250.00	Date (month, day, year) 7/16/98	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Sefarino's Restaurant Occupation Manager Aggregate Year-to-Date > \$	Date (month, day, year) 7/20/98	Amount of Each Receipt this Period 275.00
B. Full Name, Mailing Address and ZIP Code Perea, Leroy 2345 Southern Ave. Bernalillo, NM 87124 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer NVT Enterprises Occupation Distributor/Med. Equip. Aggregate Year-to-Date > \$500.00	Date (month, day, year) 8/21/98	Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and ZIP Code Perls, Robert A. P.O. Box 2494 Corrales, NM 87048-2494 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Las Cruces Public Schools Occupation Teacher Aggregate Year-to-Date > \$205.00	Date (month, day, year) 9/11/98	Amount of Each Receipt this Period 35.00 In Kind
D. Full Name, Mailing Address and ZIP Code Peterson, Renee 105 E. Idaho Las Cruces, NM 88001 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Retired Occupation Aggregate Year-to-Date > \$400.00	Date (month, day, year) 8/31/98	Amount of Each Receipt this Period 300.00
E. Full Name, Mailing Address and ZIP Code Porter, Katherine A. 1816 Stanton Ave. Las Cruces, NM 88001 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer General Publications, Inc. Occupation Pres. & Publisher Aggregate Year-to-Date > \$500.00	Date (month, day, year) 7/22/98	Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and ZIP Code Porter, William E. 5200 N. Highway 85 Las Cruces, NM 88005 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Prill, Jennifer P.O. Box 480 Hatch, NM 87937 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 7/22/98	Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional) 1,890.00

TOTAL This Period (last page this line number only)

SCHEDULE A

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

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NAME OF COMMITTEE (in Full)

E. Shirley Baca for Congress

A. Full Name, Mailing Address and ZIP Code Reffalt, William C. 2514 Oakhampton Pl. Herndon, VA 20171	Name of Employer Friends of Wildlife Occupation Program Director	Date (month, day, year) 8/13/98	Amount of Each Receipt this Period 200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$ 200.00			
B. Full Name, Mailing Address and ZIP Code Regulinski, Thaddeus 19 Babbling Brook Rd. Silver City, NM 88061	Name of Employer Arizona State Univ. Occupation Professor	Date (month, day, year) 9/21/98 9/23/98	Amount of Each Receipt this Period 100.00 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$ 600.00			
C. Full Name, Mailing Address and ZIP Code Rigshy, Linda Lane P.O. Box 44 Embudo, NM 87531	Name of Employer Homemaker Occupation	Date (month, day, year) 7/1/98	Amount of Each Receipt this Period 300.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$ 400.00			
D. Full Name, Mailing Address and ZIP Code Rosen, Rachel R. 1293 Este Lane Santa Fe, NM 87501	Name of Employer Retired Occupation	Date (month, day, year) 7/15/98	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$1,300.00			
E. Full Name, Mailing Address and ZIP Code Rosnagle, Barbara M. 159 White Tail Dr., NE Albuquerque, NM 87122	Name of Employer Retired Occupation	Date (month, day, year) 7/24/98	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$ 500.00			
F. Full Name, Mailing Address and ZIP Code Saenz, Angel 333 S. Campo St. Las Cruces, NM 88001	Name of Employer Self Occupation Attorney	Date (month, day, year) 8/13/98	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$ 1,600.00			
G. Full Name, Mailing Address and ZIP Code Sanchez, Jesus M. 1116 Sosimo Padilla Blvd. Belen, NM 87002	Name of Employer Community Action Agency Occupation Executive Director	Date (month, day, year) 9/12/98	Amount of Each Receipt this Period 100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > 5200.00			

SUBTOTAL of Receipts This Page (optional) 3,700.00

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

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NAME OF COMMITTEE (In Full)
E. Shirley Baca for Congress

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Schultz, Ken 1355 Wagon Train, SE Albuquerque, NM 87123	The Advantage, Inc. (self)	9/22/98	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Consultant	Aggregate Year-to-Date > \$ 250.00	
B. Full Name, Mailing Address and ZIP Code Simon, Eugene A. HCR 71, Box 1215 Faywood, NM 88034	Name of Employer Retired	Date (month, day, year) 7/10/98 9/21/98	Amount of Each Receipt this Period 500.00 200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$700.00	
C. Full Name, Mailing Address and ZIP Code Smith, Jeffrey M. 6423 Lakeview Dr. Falls Church, VA 22041	Name of Employer US Justice Dept.	Date (month, day, year) 7/16/98	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$250.00	
D. Full Name, Mailing Address and ZIP Code Snead, Patricia 4148 Dietz Farm Circle, NE Albuquerque, NM 87107	Name of Employer Self	Date (month, day, year) 7/23/98	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$250.00	
E. Full Name, Mailing Address and ZIP Code Snyder, Maryhelen 422 Camino del Bosque, NW Albuquerque, NM 87114	Name of Employer Self	Date (month, day, year) 7/15/98	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Consultant	Aggregate Year-to-Date > \$500.00	
F. Full Name, Mailing Address and ZIP Code Soza, William 1909 Armand Ct. Falls Church, VA 22043	Name of Employer Soza & Co., LTD	Date (month, day, year) 8/15/98	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation CPA	Aggregate Year-to-Date > \$500.00	
G. Full Name, Mailing Address and ZIP Code Stericker, Anne Bradford 4642 N. Paseo Pitiquito Tucson, AZ 85750	Name of Employer Self	Date (month, day, year) 9/21/98	Amount of Each Receipt this Period 300.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Psychologist	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional) 2,500.00

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

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NAME OF COMMITTEE (in Full)

E. Shirley Baca for Congress

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Stinnett, Ken 4805 Tobosa Las Cruces, NM 88011	Investment Management Research	7/29/98 9/8/98	125.00 125.00
	Occupation: Investment Broker	Aggregate Year-to-Date > \$ 250.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
B. Full Name, Mailing Address and ZIP Code Taylor, Lynda 1071 Governor Dempsey Dr. Santa Fe, NM 87501	Conservation Voter Alliance	7/8/98	200.00
	Occupation: Director	Aggregate Year-to-Date > \$ 200.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
C. Full Name, Mailing Address and ZIP Code Tedrow, Robert C. 638-1/2 Old Santa Fe Trail Santa Fe, NM 87501	State of New Mexico	7/13/98	1,000.00
	Occupation: Auditor	Aggregate Year-to-Date > \$ 1,000.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
D. Full Name, Mailing Address and ZIP Code Tiberi, Primo 1301 NW Hilton Pl. Socorro, NM 87801-4845	Retired	7/2/98 8/5/98	50.00 50.00
	Occupation:	Aggregate Year-to-Date > \$ 200.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
E. Full Name, Mailing Address and ZIP Code Togniller, Vic (Jr.) P.O. Box 1291 Silver City, NM 88062-1291	Self	9/17/98 8/20/98	100.00 50.00
	Occupation: Surveyor	Aggregate Year-to-Date > \$250.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
F. Full Name, Mailing Address and ZIP Code Trolin, Martha J. 500 2nd St., SW Albuquerque, NM 87102	Self	7/1/98	200.00
	Occupation: Health Planner/Community Organizer	Aggregate Year-to-Date > \$ 200.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
G. Full Name, Mailing Address and ZIP Code Tsoie, Olivia V. Rt. 6, Box 75 Santa Fe, NM 87501	Retired	8/8/98	300.00
	Occupation:	Aggregate Year-to-Date > \$ 300.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional)	2,200.00
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

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NAME OF COMMITTEE (in Full)

E. Shirley Baca for Congress

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Valencia, Jack 1726 Stanton Las Cruces, NM 88001	Self	9/15/98	550.48
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Consulting Contractor	Aggregate Year-to-Date > \$ 800.48	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Vigil, Isabel 2810 N. Telshor Las Cruces, NM 88011	Self	9/30/98	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Medical Doctor	Aggregate Year-to-Date > \$500.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Volkman, Wendy P.O. Box 6516 Santa Fe, NM 87502	Self	7/30/98	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Investor	Aggregate Year-to-Date > \$1,000.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Wallerstein, Nina 2531 Campbell Rd., NW Albuquerque, NM 87104	University of New Mexico	8/3/98	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Faculty	Aggregate Year-to-Date > \$ 250.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Warsh, Herman 1915 San Leandro Lane Santa Barbara, CA 93108	Retired	7/9/98	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation:	Aggregate Year-to-Date > \$750.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Watkins, Anne L. 3128-2 Glenwood, NW Albuquerque, NM 87107-2944	City of Albuquerque	8/5/98	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Transit Director	Aggregate Year-to-Date > \$ 200.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Williams, Frances 1005 Bloomdale Las Cruces, NM 88005	Retired	9/12/98	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation:	Aggregate Year-to-Date > \$ 1,250.00	

SUBTOTAL of Receipts This Page (optional)	3,700.48
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 16 OF 17
FOR LINE NUMBER 11a1

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)

B. Shirley Baca for Congress

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Williams, Matthew 715 Kelli Circle Las Cruces, NM 88005	NMSU / Baca for Congress	8/13/98 8/17/98 9/12/98	10.00 4.67 In Kind 7.04 In Kind
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation STUDENT / Part-time office	Aggregate Year-to-Date > \$21.71	
B. Full Name, Mailing Address and ZIP Code Wilson, Keith 1500 S. Locust Las Cruces, NM 88001	Name of Employer	Date (month, day, year) 9/11/98	Amount of Each Receipt this Period 24.00 In Kind
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 24.00	
C. Full Name, Mailing Address and ZIP Code Wissel, Kathryn 226 Dartmouth, NE Albuquerque, NM 87106	Name of Employer Self	Date (month, day, year) 7/22/98	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$250.00	
D. Full Name, Mailing Address and ZIP Code Wooten, Kathy 1408 Fischer Rd. Las Cruces, NM 88005	Name of Employer Popcorn's, Inc.	Date (month, day, year) 9/12/98 9/14/98	Amount of Each Receipt this Period 200.00 In Kind 30.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Sales/Marketing/Adv.	Aggregate Year-to-Date > \$230.00	
E. Full Name, Mailing Address and ZIP Code Borunda, Fred P.O. Box 7855 Las Cruces, NM 88006	Name of Employer Self	Date (month, day, year) 8/20/98	Amount of Each Receipt this Period 87.60 In Kind
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Carpet Cleaning	Aggregate Year-to-Date > \$ 87.60	
F. Full Name, Mailing Address and ZIP Code Glenn, Tamara P.O. Box 2279 Las Cruces, NM 88004	Name of Employer	Date (month, day, year) 9/11/98	Amount of Each Receipt this Period 60.00 In Kind
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 60.00	
G. Full Name, Mailing Address and ZIP Code Nelson, Antonya 425 W. Las Cruces Ave. Las Cruces, NM 88005	Name of Employer	Date (month, day, year) 9/11/98	Amount of Each Receipt this Period 23.00 In Kind
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 23.00	

SUBTOTAL of Receipts This Page (optional)

696.31

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

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)
E. Shirley Baca for Congress

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Sheridan, Robert 1155 W. Miranda, Apt. G-5 Las Cruces, NM 88005		8/10/98 9/11/98	50.00 70.00 In Kind
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 120.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Smith, Peggy 901 Avenida de Mesilla Las Cruces, NM 88005		9/11/98	30.00 In Kind
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 30.00	
C. 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 > \$	
D. 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 > \$	
E. 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 > \$	
F. 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 > \$	
G. 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)	150.00
TOTAL This Period (last page this line number only)	39,053.94

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 3
FOR LINE NUMBER 11C

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NAME OF COMMITTEE (in Full)

E. Shirley Baca for Congress

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
AFSCME PAC 1625 L Street, NW Washington, DC 20036	Primary Debt Retiring	8/3/98	5,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 5,000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
AFSCME PAC 1625 L Street, NW Washington, DC 20036		8/3/98	5,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$10,000.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
American Nurses Association PAC 600 Maryland Ave. SW, Suite 100 West Washington, DC 20024-2571		8/11/98 9/22/98	500.00 4,500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$5,000.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
American Speech Language Assoc. PAC 1801 Rockville Pike Rockville, MD 20852		9/21/98	300.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 300.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Re- Committee to Elect Loretta Sanchez 9531 Via Ricardo Los Angeles, CA 91504		8/25/98	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$500.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DRIVE Political Fund 25 Louisiana Ave., NW Washington, DC 20001		8/13/98	5,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 5,000.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Evergreen Fund 607 Fourteenth St., NW Washington, DC 20005		7/16/98	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$1,000.00	

SUBTOTAL of Receipts This Page (optional)

21,800.00

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 3
FOR LINE NUMBER 115

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NAME OF COMMITTEE (In Full)

B. Shirley Baca for Congress

A. Full Name, Mailing Address and ZIP Code
Graphics Communications International Union PAC
1900 L Street, NW
Washington, DC 22036-5002

Name of Employer

Union PAC

Date (month, day, year)

9/14/98

Amount of Each Receipt this Period

200.00

Occupation

Receipt For: Primary General
 Other (specify):

Aggregate Year-to-Date > \$ 200.00

B. Full Name, Mailing Address and ZIP Code
Hispanic PAC USA, Inc.
12030 Sunrise Valley Dr., Suite 300
Reston, VA 20191

Name of Employer

Date (month, day, year)

8/10/98

Amount of Each Receipt this Period

3,000.00

Occupation

Receipt For: Primary General
 Other (specify):

Aggregate Year-to-Date > \$ 3,000.00

C. Full Name, Mailing Address and ZIP Code
IBEW COPE
1125 15th St., NW
Washington, DC 20005

Name of Employer

Date (month, day, year)

8/11/98

Amount of Each Receipt this Period

2,000.00

9/3/98

500.00

Occupation

Receipt For: Primary General
 Other (specify):

Aggregate Year-to-Date > \$ 5,000.00

D. Full Name, Mailing Address and ZIP Code
International Union of Operating Engineers
1125 Seventeenth St. NW
Washington, DC 20036

Name of Employer

Date (month, day, year)

9/15/98

Amount of Each Receipt this Period

500.00

Occupation

Receipt For: Primary General
 Other (specify):

Aggregate Year-to-Date > \$ 500.00

E. Full Name, Mailing Address and ZIP Code
Leadership 98
1800 K Street NW, Suite 710
Washington, DC 20006

Name of Employer

Date (month, day, year)

9/30/98

Amount of Each Receipt this Period

3,000.00

Occupation

Receipt For: Primary General
 Other (specify):

Aggregate Year-to-Date > \$ 3,000.00

F. Full Name, Mailing Address and ZIP Code
Machinists Non Partisan Political League
9000 Machinist Place
Upper Marlboro, MD 20772

Name of Employer

Date (month, day, year)

8/3/98

Amount of Each Receipt this Period

5,000.00

Occupation

Receipt For: Primary General
 Other (specify):

Aggregate Year-to-Date > \$ 5,000.00

G. Full Name, Mailing Address and ZIP Code
National Womens Political Caucus
1211 Connecticut Ave. NW, Suite 425
Washington, DC 20036

Name of Employer

Date (month, day, year)

8/20/98

Amount of Each Receipt this Period

500.00

Occupation

Receipt For: Primary General
 Other (specify):

Aggregate Year-to-Date > \$ 500.00

SUBTOTAL of Receipts This Page (optional)

14,700.00

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 3
FOR LINE NUMBER 110

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)

E. Shirley Baca for Congress

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
National Committee to Preserve Social Security 10 G St. NE, Suite 600 Washington, DC 20002-4215	Occupation	8/20/98	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$500.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
NEA - PAC 1201 16th St. NW Washington, DC 20036	Occupation	8/18/98	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$1,000.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Responsible Citizens Political League 3 Research Place Rockville, MD 20850	Occupation	7/6/98	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
UAW V CAP 8000 East Jefferson Avenue Detroit, MI 48214-3963	Occupation	9/15/98	5,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$7,500.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
United Food & Commercial Workers 1775 K Street NW Washington, DC 20006-1598	Occupation	7/7/98	5,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$7,500.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional)	12,000.00
TOTAL This Period (last page this line number only)	48,500.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE **1** OF **1**
 FOR LINE NUMBER **11d**

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NAME OF COMMITTEE (In Full)

E. Shirley Baca for Congress

A. Full Name, Mailing Address and ZIP Code

E. Shirley Baca
 1501 Boutz Rd.
 Las Cruces, NM 88001

Name of Employer

Self

Date (month, day, year)

9/11/98

Amount of Each Receipt This Period

35.00
 In Kind

Occupation

Consultant

Aggregate Year-to-Date > \$ 35.00.

Receipt For:

Primary General
 Other (specify):

B. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month, day, year)

Amount of Each Receipt This Period

Receipt For:

Primary General
 Other (specify):

Occupation

Aggregate Year-to-Date > \$

C. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month, day, year)

Amount of Each Receipt This Period

Receipt For:

Primary General
 Other (specify):

Occupation

Aggregate Year-to-Date > \$

D. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month, day, year)

Amount of Each Receipt This Period

Receipt For:

Primary General
 Other (specify):

Occupation

Aggregate Year-to-Date > \$

E. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month, day, year)

Amount of Each Receipt This Period

Receipt For:

Primary General
 Other (specify):

Occupation

Aggregate Year-to-Date > \$

F. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month, day, year)

Amount of Each Receipt This Period

Receipt For:

Primary General
 Other (specify):

Occupation

Aggregate Year-to-Date > \$

G. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month, day, year)

Amount of Each Receipt This Period

Receipt For:

Primary General
 Other (specify):

Occupation

Aggregate Year-to-Date > \$

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

35.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedules for each category of the Detailed Summary Page

PAGE 1 OF 8
FOR LINE NUMBER 17

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NAME OF COMMITTEE (in Full)

E. Shirley Baca for Congress

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
New Mexico Sports 2595 E. Missouri Las Cruces, NM 88001	T-Shirts Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/3/98	1,595.63
B. Full Name, Mailing Address and ZIP Code 101 Gold FM/KVLC 105 E. Idaho Las Cruces, NM 88001	Advertising Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/4/98	239.34
C. Full Name, Mailing Address and ZIP Code VISA P.O. Box 530800 Atlanta, GA 30353-0800	Computer Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/8/98	2,892.70
D. Full Name, Mailing Address and ZIP Code Office Max 2561 E. Lohman Las Cruces, NM 88001	Office Supplies Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/20/98 9/8/98	82.24 287.18
E. Full Name, Mailing Address and ZIP Code The Print Factory 600 S. Solano Las Cruces, NM 88001	Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/13/98 9/8/98	236.16 374.65
F. Full Name, Mailing Address and ZIP Code El Paso Electric P.O. Box 20982 El Paso, TX 79998-0982	Electricity / Utility Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 9/14/98 9/23/98	Amount of Each Disbursement This Period 259.97 257.37
G. Full Name, Mailing Address and ZIP Code Judy Kelso P.O. Box 5000 Las Cruces, NM 88006	Fundraising Commission / Contract Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 9/15/98	Amount of Each Disbursement This Period 1,000.00
H. Full Name, Mailing Address and ZIP Code Ermit Brooks Recording Studio 115 E. Idaho Las Cruces, NM 88001	Recording for Ads Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 9/16/98	Amount of Each Disbursement This Period 382.95
I. Full Name, Mailing Address and ZIP Code City of Las Cruces P.O. Drawer CLC Las Cruces, NM 88004	Gas/Water / Utility Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 9/18/98	Amount of Each Disbursement This Period 241.60
SUBTOTAL of Disbursements This Page (optional)			7,849.79
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 2 OF 6
FOR LINE NUMBER 17

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NAME OF COMMITTEE (in Full)

E. Shirley Baca for Congress

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Fristoe, Norman CPA 780 E. Walnut, Bldg. 6 Las Cruces, NM 88001	Accounting Services	8/12/98	173.93
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/16/98	82.44
B. Full Name, Mailing Address and ZIP Code Community First National Bank 201 N. Church St. Las Cruces, NM 88001	Purpose of Disbursement Bank Service Charges	Date (month, day, year) 7/31/98 8/4/98 9/30/98 8/31/98	Amount of Each Disbursement This Period 24.79 23.40 38.24 30.64
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
C. Full Name, Mailing Address and ZIP Code Community First National Bank 201 N. Church St. Las Cruces, NM 88001	Purpose of Disbursement 941 Deposits	Date (month, day, year) 8/14/98 9/15/98	Amount of Each Disbursement This Period 823.22 1,210.86
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
D. Full Name, Mailing Address and ZIP Code Acosta, Virginia 5045 Moon Shadow Place Las Cruces, NM 88011	Purpose of Disbursement Employee Wages	Date (month, day, year) 8/15/98 8/31/98	Amount of Each Disbursement This Period 438.75 438.75
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
E. Full Name, Mailing Address and ZIP Code Sav-On Office Supply 1160 El Paso Rd., Suite D-7 Las Cruces, NM 88001	Purpose of Disbursement Office Supplies	Date (month, day, year) 7/9/98 8/10/98 8/24/98	Amount of Each Disbursement This Period 39.02 39.81 77.11
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
F. Full Name, Mailing Address and ZIP Code BlueSky, Cetan P.O. Box 1124 Dona Ana, NM 88032	Purpose of Disbursement Employee Wages and Expense Reimbursement	Date (month, day, year) 8/27/98 9/3/98 9/15/98	Amount of Each Disbursement This Period 33.91 205.87 412.93
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
G. Full Name, Mailing Address and ZIP Code Sutherland's 845 El Paseo Rd. Las Cruces, NM 88001	Purpose of Disbursement Sign Supplies	Date (month, day, year) 8/27/98	Amount of Each Disbursement This Period 719.87
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
H. Full Name, Mailing Address and ZIP Code Shy, Ruth 9626 Salem Rd. NE Albuquerque, NM 87112	Purpose of Disbursement Contract Labor	Date (month, day, year) 8/31/98	Amount of Each Disbursement This Period 900.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
I. Full Name, Mailing Address and ZIP Code Las Cruces Sun News 256 W. Las Cruces Ave. Las Cruces, NM 88001	Purpose of Disbursement Advertising	Date (month, day, year) 9/2/98	Amount of Each Disbursement This Period 475.49
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional)

6,189.03

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 8
FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

E. Shirley Baca for Congress

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Signergy Productions 1695 N. Main Las Cruces, NM 88001	Signs	7/30/98	596.66
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	8/27/98	2,501.94
	<input type="checkbox"/> Other (specify)	9/8/98	596.66
Tortilla Coast 400 First St. SE Washington, DC 20003	Fundraiser / Food	7/30/98	450.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		
	<input type="checkbox"/> Other (specify)		
United States Postal Service 201 E. Las Cruces Ave. Las Cruces, NM 88001	Postage	7/31/98	320.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	8/4/98	320.00
	<input type="checkbox"/> Other (specify)	8/20/98	320.00
Rico, Maura 320 W. Railroad Ave. Lordsburg, NM 88045	Contract Labor	7/31/98	1,500.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	8/31/98	500.00
	<input type="checkbox"/> Other (specify)		
Ceballos, Ruben P.O. Box 1018 Mesilla, NM 88046	Employee Wages & Expense Reimbursement	7/31/98	577.19
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	8/12/98	180.27
	<input type="checkbox"/> Other (specify)	8/15/98	666.22
Ceballos, Ruben P.O. Box 1018 Mesilla, NM 88046	Employee Wages	8/31/98	666.22
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	9/15/98	666.22
	<input type="checkbox"/> Other (specify)		
Griego, Regina 775 S. Esperanza Las Cruces, NM 88001	Employee Wages	7/31/98	461.75
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	8/15/98	106.56
	<input type="checkbox"/> Other (specify)		
Solliday, Olivia 2600 E. Idaho, #142 Las Cruces, NM 88001	Employee Wages	7/31/98	193.93
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	8/15/98	199.48
	<input type="checkbox"/> Other (specify)	8/31/98	326.96
ABC Printing 406 N. Main St. Las Cruces, NM 88001	Printing	7/24/98	132.97
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	7/31/98	132.97
	<input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional)

11,885.66

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 4 OF 8
FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

E. Shirley Baca for Congress

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Lightning Computer Systems 1067 N. Valley Dr. Las Cruces, NM 88005	Computer Software Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/4/98	553.07
B. Full Name, Mailing Address and ZIP Code U.S. West Communications P.O. Box 29060 Phoenix, AZ 85038-9060	Telephone / Utility Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/13/98 8/11/98 8/24/98 9/2/98	337.05 349.72 1,115.00 350.61
C. Full Name, Mailing Address and ZIP Code Telstar Communications P.O. Box 2019 Las Cruces, NM 88004	Long Distance Service Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/13/98 8/12/98 9/16/98	789.38 730.72 898.28
D. Full Name, Mailing Address and ZIP Code GTE Wireless P.O. Box 33049 St. Petersburg, FL 33733	Mobile Phone Service Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/13/98 7/17/98 9/16/98	141.82 1,338.98 436.12
E. Full Name, Mailing Address and ZIP Code GTE Wireless P.O. Box 33049 St. Petersburg, FL 33733	Mobile Phone Service Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/18/98 9/24/98	910.85 171.75
F. Full Name, Mailing Address and ZIP Code Fraioni, Inc. 807 St., NW, #804 Washington, DC 20001	Consulting Services Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/13/98 8/12/98 9/16/98	4,134.04 4,712.38 1,560.81
G. Full Name, Mailing Address and ZIP Code Telebeeper of NM P.O. Box 25161 Albuquerque, NM 87125	Pager Service Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/22/98	491.01
H. Full Name, Mailing Address and ZIP Code Marshfield Travel Advisors 2008 Ocean St. Marshfield, MA 02050	Travel Expenses Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/24/98	544.50
I. Full Name, Mailing Address and ZIP Code Radisson Hotel 2500 Carlisle, NM Albuquerque, NM 87110	Fundraiser - Food/Room Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/24/98	700.00
SUBTOTAL of Disbursements This Page (optional)			20,266.09
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 5 OF 8

FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

E. Shirley Baca for Congress

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Internal Revenue Service Ogden, UT 84201	Taxes	7/27/98	534.02
	Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General	9/3/98	42.50
	<input type="checkbox"/> Other (specify)		
Mendoza, Felipe 1135 Monte Vista #7 Las Cruces, NM 88001	Employee Wages	8/15/98	115.44
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	8/31/98	480.87
	<input type="checkbox"/> Other (specify)	9/15/98	276.65
Mendoza, Felipe 1135 Monte Vista #7 Las Cruces, NM 88001	Contract Labor	7/1/98	750.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General	7/31/98	1,000.00
	<input type="checkbox"/> Other (specify)		
Flemming, Roger 1022 Elm St. #D Las Cruces, NM 88005	Contract Labor / Expense	7/2/98	310.15
	Reimbursement / In Kind	7/10/98	1,500.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General	7/24/98	13.50 In Kind
	<input type="checkbox"/> Other (specify)	8/1/98	90.75 In Kind
Flemming, Roger 1022 Elm St. #D Las Cruces, NM 88005	Employee Wages	7/31/98	1,237.25
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	8/15/98	618.62
	<input type="checkbox"/> Other (specify)	8/31/98	618.62
Flemming, Roger 1022 Elm St. #D Las Cruces, NM 88005	Employee Wages & Expense	9/11/98	134.19
	Reimbursement	9/15/98	618.62
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		
Garcia, M. Jean 3860 Coral Rd., Apt. #7 Las Cruces, NM 88005	Contract Labor	7/2/98	1,000.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General	7/31/98	1,025.00
	<input type="checkbox"/> Other (specify)	8/31/98	1,000.00
Garcia, M. Jean 3860 Coral Rd., Apt. #7 Las Cruces, NM 88005	Wages & Travel Reimb.	7/8/98	600.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	7/31/98	721.30
	<input type="checkbox"/> Other (specify)	9/4/98	411.55
Folsom, Stacey 2002 S. Solano Las Cruces, NM 88001	Employee Wages	7/3/98	344.29
	Contract Labor	7/20/98	189.44
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	7/31/98	344.29
	<input type="checkbox"/> Other (specify)	8/31/98	1,000.00

SUBTOTAL of Disbursements This Page (optional)

14,420.05

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 6 OF 8
FOR LINE NUMBER 17

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NAME OF COMMITTEE (in Full)

E. Shirley Baca for Congress

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Adams, Robert 2002 S. Solano Las Cruces, NM 88001	Contract Labor	7/6/98	1,250.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/28/98 8/20/98 8/28/98	1,250.00 625.00 625.00
B. Full Name, Mailing Address and ZIP Code Birchfield, Ben 1018 S. Main Las Cruces, NM 88005	Purpose of Disbursement Rent (w/ Water Bill)	Date (month, day, year) 7/7/98	Amount of Each Disbursement This Period 696.10
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/1/98 9/1/98	625.00 1,200.00
C. Full Name, Mailing Address and ZIP Code Williams, Matthew 715 Kelli Circle Las Cruces, NM 88005	Purpose of Disbursement Contract Labor & In Kind Donations	Date (month, day, year) 7/7/98	Amount of Each Disbursement This Period 300.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/17/98 9/12/98	4.67 In Kind 7.04 In Kind
D. Full Name, Mailing Address and ZIP Code Williams, Matthew 715 Kelli Circle Las Cruces, NM 88005	Purpose of Disbursement Employee Wages	Date (month, day, year) 7/31/98	Amount of Each Disbursement This Period 277.05
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/15/98 8/31/98 9/15/98	138.52 138.52 161.61
E. Full Name, Mailing Address and ZIP Code Old Pueblo Printers 255 South Stone Ave. Tucson, AZ 85701	Purpose of Disbursement Printing	Date (month, day, year) 7/13/98	Amount of Each Disbursement This Period 267.88
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
F. Full Name, Mailing Address and ZIP Code The Print Shop 1114 Espanola Las Cruces, NM 88001	Purpose of Disbursement Printing	Date (month, day, year) 7/13/98	Amount of Each Disbursement This Period 315.07
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/27/98 8/27/98	71.90 450.42
G. Full Name, Mailing Address and ZIP Code The Print Shop 1114 Espanola Las Cruces, NM 88001	Purpose of Disbursement Printing	Date (month, day, year) 9/8/98	Amount of Each Disbursement This Period 1,351.21
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/22/98	265.94
H. Full Name, Mailing Address and ZIP Code Sun Country Senior Living P.O. Box 534 Las Cruces, NM 88004	Purpose of Disbursement Advertisement	Date (month, day, year) 9/18/98	Amount of Each Disbursement This Period 303.17
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
I. Full Name, Mailing Address and ZIP Code American Income Life 130 Alvarado NE, Suite 100 Albuquerque, NM 87108	Purpose of Disbursement Employee Medical Insurance	Date (month, day, year) 9/22/98	Amount of Each Disbursement This Period 299.90
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional)

10,624.00

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 7 OF 8

FOR LINE NUMBER 17

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NAME OF COMMITTEE (in Full)

E. Shirley Baca for Congress

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Statewide Information Systems 1990 Third St., Suite 450 Sacramento, CA 95814	Walk Lists Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/22/98	168.74
B. Full Name, Mailing Address and ZIP Code The Red Barn 708 Silver Heights Blvd. Silver City, NM 88061	Purpose of Disbursement Fundraiser - Food/Room Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/23/98	1,472.00
C. Full Name, Mailing Address and ZIP Code Mail Boxes, Etc. 2001 E. Lohman, #110 Las Cruces, NM 88001	Purpose of Disbursement Shipping Costs Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/13/98 7/13/98 8/12/98	33.14 97.28 110.09
D. Full Name, Mailing Address and ZIP Code Democratic Party of Dona Ana County P.O. Box 879 Las Cruces, NM 88004-0879	Purpose of Disbursement Ad in Newsletter Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/12/98	100.00
E. Full Name, Mailing Address and ZIP Code Benavidez, Steve P.O. Box 66 La Mesa, NM 88044	Purpose of Disbursement In Kind / Food-Fundraiser Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/12/98	252.90 In Kind
F. Full Name, Mailing Address and ZIP Code Goodacre, Glenna 1524 Canyon Rd. Santa Fe, NM 87501	Purpose of Disbursement In Kind / Artwork Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/10/98	250.00 In Kind
G. Full Name, Mailing Address and ZIP Code Harmon, Judy 1200 N. Main Las Cruces, NM 88001	Purpose of Disbursement In Kind / Door Prize Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/11/98	35.00 In Kind
H. Full Name, Mailing Address and ZIP Code Miyazaki, Carol 26 Cuetes Canyon Rd. Las Cruces, NM 88011	Purpose of Disbursement IN Kind / Food-Fundraiser Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/12/98	350.00 In Kind
I. Full Name, Mailing Address and ZIP Code O'Hara, Ellen 822 E. Lohman Las Cruces, NM 88001	Purpose of Disbursement In Kind / Door Prize Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/11/98	70.00 In Kind
SUBTOTAL of Disbursements This Page (optional)			2,939.15
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 8 OF 10

FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

E. Shirley Baca for Congress

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Peterson, Renee 105 E. Idaho Las Cruces, NM 88001	In Kind / Door Prize Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/11/98	35.00 In Kind
Wilson, Keith 1500 S. Locust Las Cruces, NM 88001	In Kind / Door Prize Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/11/98	24.00 In Kind
Wooten, Kathy 1408 Fischer Rd. Las Cruces, NM 88005	In Kind / Room for Fundraiser Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/12/98	200.00 In Kind
Borunda, Fred P.O. Box 7855 Las Cruces, NM 88006	In Kind / Carpet Cleaning Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/20/98	87.60 In Kind
Glenn, Tamara P.O. Box 2279 Las Cruces, NM 88004	In Kind / Door Prize Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/11/98	60.00 In Kind
Nelson, Antonya 425 W. Las Cruces Ave. Las Cruces, NM 88005	In Kind / Door Prize Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/11/98	23.00 In Kind
Sheridan, Robert 1155 N. Miranda, Apt. G-5 Las Cruces, NM 88005	In Kind / Door Prize Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/11/98	70.00 In Kind
Smith, Peggy 901 Avenida de Mesilla Las Cruces, NM 88005	In Kind / Door Prize Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/11/98	30.00 In Kind
Baca, E. Shirley 1501 Boutz Rd. Las Cruces, NM 88001	In Kind / Door Prize Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/11/98	35.00 In Kind

SUBTOTAL of Disbursements This Page (optional)

564.60

TOTAL This Period (last page this line number only)

74,738.37

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 21

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NAME OF COMMITTEE (in Full)			
E. Shirley Baca for Congress			
A. Full Name, Mailing Address and ZIP Code E. Shirley Baca 1501 Boutz Rd. Las Cruces, NM 88001	Purpose of Disbursement Retire Primary Debt Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 8/10/98	Amount of Each Disbursement This Period 5,000.00
B. 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
C. 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
D. 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
E. 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
F. 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
G. 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
H. 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
I. 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)			
TOTAL This Period (last page this line number only)			5,000.00

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Page 1 of 1 for
LINE NUMBER _____
(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
E. Shirley Baca for Congress				
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
E. Shirley Baca 1501 Boutz Rd. LasCruces, NM 88001	5,802.41	-0-	5,000.00	802.41
Nature of Debt (Purpose):				
Travel; Communications; Office Exp.				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
1) SUBTOTALS This Period This Page (optional)				
2) TOTALS This Period (last page in this line only)				802.41
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)				802.41

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 checked="" type="checkbox"/> Hand Delivered	Date of Receipt <i>10/15/98</i>
<input type="checkbox"/> First Class Mail	POSTMARKED
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED
<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>RSS</i> PREPARER	<i>10/15/98</i> DATE PREPARED