

**FEC  
FORM 3**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines

New Mexicans for Marty

ADDRESS (number and street) PO Box 91990

Check if different than previously reported. (ACC)

Albuquerque NM 87199

2. **FEC IDENTIFICATION NUMBER** C00440206

**CITY** **STATE** **ZIP CODE** **STATE** **DISTRICT**

3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

NM 00

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)  General (12G)  Runoff (12R)

Convention (12C)  Special (12S)

Election on [ ] [ ] [ ] in the State of [ ]

(c) 30-Day **POST**-Election Report for the:

General (30G)  Runoff (30R)  Special (30S)

Election on [ ] [ ] [ ] in the State of [ ]

5. Covering Period 10 01 2007 through 12 31 2007

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 Vivian Weidner

Signature of Treasurer Electronically Filed by Vivian Weidner Date 11 15 2007

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

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

New Mexicans for Marty

Report Covering the Period: From: 

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	7

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e)).....	283911.10	283911.10
(b) Total Contribution Refunds (from Line 20(d)).....	1500.00	1500.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	282411.10	282411.10
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17).....	272242.09	272242.09
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	272242.09	272242.09
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	<b>4254.70</b>	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	<b>0.00</b>	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	<b>0.00</b>	

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name  
New Mexicans for Marty

Report Covering the Period: From: 

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	7

**I. RECEIPTS**

**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

283911.10

283911.10

(ii) Unitemized.....

0.00

0.00

(iii) TOTAL of contributions

283911.10

283911.10

from individuals..... ▶

0.00

0.00

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACS).....

0.00

0.00

(d) The Candidate.....

(e) TOTAL CONTRIBUTIONS (other than loans)

(add Lines 11(a)(iii), (b), (c), and (d))

283911.10

283911.10

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....

0.00

0.00

13. LOANS

(a) Made or Guaranteed by the Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS

(add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....

0.00

0.00

15. OTHER RECEIPTS (Dividends, Interest, etc.).....

85.69

85.69

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

283996.79

283996.79

**DETAILED SUMMARY PAGE**

of Disbursements

**II. DISBURSEMENTS**

**COLUMN A  
Total This Period**

**COLUMN B  
Election Cycle-to-Date**

17. OPERATING EXPENDITURES.....	272242.09	272242.09
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	1500.00	1500.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	1500.00	1500.00
21. OTHER DISBURSEMENTS.....	6000.00	6000.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	279742.09	279742.09

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	283996.79
25. SUBTOTAL (add Line 23 and Line 24).....	283996.79
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	279742.09
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	4254.70

**CONSOLIDATED REPORT OF GROSS RECEIPTS FOR AUTHORIZED COMMITTEES (11 CFR 104.19)  
(Millionaires' Amendment)**

<b>Name of Candidate</b> Marty Chavez		<b>Candidate ID Number</b> S8NM00176
<b>Name of Principal Campaign Committee</b> New Mexicans for Marty		<b>Committee ID Number</b> C C00440206
<b>Committee Address</b> PO Box 91990		
<b>City</b> Albuquerque	<b>State</b> NM	<b>ZIP</b> 87199
Report Covering Period (check one) <input type="checkbox"/> through June 30, or <input checked="" type="checkbox"/> through December 31 of the year preceding the year of the general election		
	<b>Primary</b>	<b>General</b>
1. Gross receipts of authorized committees .....	283296.79	700.00
2. Aggregate amount of contributions from personal funds of the candidate .....	0.00	0.00
3. Gross receipts minus the candidate's personal contributions .....	283296.79	700.00

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 6 / 197  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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)  
New Mexicans for Marty

**A.** Full Name (Last, First, Middle Initial)  
Sally Adams  
Mailing Address 5815 Tierra Viva PI NW  
City Albuquerque State NM Zip Code 87107  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Clear Channel Outdoor Occupation GENERAL MANAGER  
Receipt For: 2008 Election Cycle-to-Date  
 Primary    General  
 Other (specify) ▼  
Date of Receipt 11 / 20 / 2007  
Transaction ID: C4131001  
Amount of Each Receipt this Period 200.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
BERNADETTE AGUIRRE  
Mailing Address 6313 ROCA FIEL NW  
City ALBUQUERQUE State NM Zip Code 87120-1323  
FEC ID number of contributing federal political committee. **C**  
Name of Employer CITY OF ALBUQUERQUE Occupation ASSISTANT TO THE MAYOR  
Receipt For: 2008 Election Cycle-to-Date  
 Primary    General  
 Other (specify) ▼  
Date of Receipt 10 / 11 / 2007  
Transaction ID: C4130815  
Amount of Each Receipt this Period 150.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
BERNADETTE AGUIRRE  
Mailing Address 6313 ROCA FIEL NW  
City ALBUQUERQUE State NM Zip Code 87120-1323  
FEC ID number of contributing federal political committee. **C**  
Name of Employer CITY OF ALBUQUERQUE Occupation ASSISTANT TO THE MAYOR  
Receipt For: 2008 Election Cycle-to-Date  
 Primary    General  
 Other (specify) ▼  
Date of Receipt 11 / 21 / 2007  
Transaction ID: C4131007  
Amount of Each Receipt this Period 25.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **375.00**  
**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 7 / 197</span>
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) Roberto Albertorio		Date of Receipt MM / DD / YYYY 12 / 07 / 2007		
	Mailing Address PO Box 91387		<b>Transaction ID:</b> C4131131		
	City Albuquerque	State NM	Zip Code 87199-1387	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer CITY OF ALBUQUERQUE	Occupation ATTORNEY	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>B.</b>	Full Name (Last, First, Middle Initial) ANATV		Date of Receipt MM / DD / YYYY 10 / 11 / 2007		
	Mailing Address 3317 CARDENAS NE		<b>Transaction ID:</b> C4130816		
	City Albuquerque	State NM	Zip Code 87110	Amount of Each Receipt this Period 200.00	
	FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer	Occupation	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>C.</b>	Full Name (Last, First, Middle Initial) CHRISTINE E. ANAYA		Date of Receipt MM / DD / YYYY 11 / 06 / 2007		
	Mailing Address 698 CAMINO VISTA RIO		<b>Transaction ID:</b> C4130878		
	City Bernalillo	State NM	Zip Code 87004	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer ROBLES, RAEL & ANAYA	Occupation ATTORNEY	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1200.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	





**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 9 / 197
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
<input type="checkbox"/> 14	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) PATRICK V. APODACA		Date of Receipt MM / DD / YYYY 11 / 12 / 2007
	Mailing Address 1646 Rancho Guadalupe Trl NW		<b>Transaction ID:</b> C4130925
	City ALBUQUERQUE	State NM	Zip Code 87103
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
	Name of Employer UNIVERSITY OF NEW MEXICO	Occupation ATTORNEY	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) YOLANDA APODACA		Date of Receipt MM / DD / YYYY 11 / 15 / 2007
	Mailing Address 6502 MENDIUS NE		<b>Transaction ID:</b> C4130956
	City Albuquerque	State NM	Zip Code 87109
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
	Name of Employer RETIRED	Occupation RETIRED	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 100.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) Adelmo Archuleta		Date of Receipt MM / DD / YYYY 12 / 05 / 2007
	Mailing Address 8313 Calle Picaflor NW		<b>Transaction ID:</b> C4131060
	City Albuquerque	State NM	Zip Code 87120-3105
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
	Name of Employer Molzen Corbin & Assoc	Occupation President	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1600.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) ELEANOR ARCHULETA		Date of Receipt MM / DD / YYYY 11 / 21 / 2007		
	Mailing Address 312 LA CORRIDA		<b>Transaction ID:</b> C4131014		
	City Bernalillo	State NM	Zip Code 87004	Amount of Each Receipt this Period 2300.00	
	FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer APPLIED RESEARCH ASSOCIATES	Occupation AP ADMINISTRATOR	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>B.</b>	Full Name (Last, First, Middle Initial) JOE ARMIJO		Date of Receipt MM / DD / YYYY 10 / 29 / 2007		
	Mailing Address 3843 RIVERVIEW RD NW		<b>Transaction ID:</b> C4130850		
	City ALBUQUERQUE	State NM	Zip Code 87105-1121	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer N/A	Occupation RETIRED	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>C.</b>	Full Name (Last, First, Middle Initial) SUSAN E. ATLER		Date of Receipt MM / DD / YYYY 10 / 23 / 2007		
	Mailing Address 122 1/2 9TH STREET		<b>Transaction ID:</b> C4130860		
	City Pacific Grove	State CA	Zip Code 93950	Amount of Each Receipt this Period 2300.00	
	FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer N/A	Occupation HOMEMAKER	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>5100.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 197
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) Andrew L Baca	Date of Receipt MM / DD / YYYY 11 / 07 / 2007
	Mailing Address 912 LOS PRADOS DE GUADALUPE	<b>Transaction ID:</b> C4130917
	City State Zip Code Los Ranchos NM 87107	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation ABBA TECHNOLOGIES, INC. OWNER	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Augustine Baca	Date of Receipt MM / DD / YYYY 11 / 17 / 2007
	Mailing Address 901 Field St SW	<b>Transaction ID:</b> C4130965
	City State Zip Code Albuquerque NM 87121-3255	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Youth Development Inc. PRESIDENT	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Debra Baca	Date of Receipt MM / DD / YYYY 11 / 17 / 2007
	Mailing Address 4303 Alba Place	<b>Transaction ID:</b> C4130959
	City State Zip Code Albuquerque NM 87114	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation YOUTH DEVELOPMENT HEAD START DIRECTOR	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 50.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	1550.00
<b>TOTAL</b> This Period (last page this line number only) .....	



**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) MARCOS BACA		Date of Receipt MM / DD / YYYY 11 / 17 / 2007		
	Mailing Address 6120 WHITMAN DR NW		<b>Transaction ID:</b> C4130971		
	City Albuquerque	State NM	Zip Code 87120	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer YOUTH DEVELOPMENT	Occupation MEDIA MANAGER			
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 100.00				

<b>B.</b>	Full Name (Last, First, Middle Initial) Nick Bakas		Date of Receipt MM / DD / YYYY 11 / 10 / 2007		
	Mailing Address 10601 Del Rey Ave NE		<b>Transaction ID:</b> C4130933		
	City Albuquerque	State NM	Zip Code 87122-3515	Amount of Each Receipt this Period 200.00	
	FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer CITY OF ALBUQUERQUE	Occupation DIRECTOR			
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 700.00				

<b>C.</b>	Full Name (Last, First, Middle Initial) Nick Bakas		Date of Receipt MM / DD / YYYY 12 / 05 / 2007		
	Mailing Address 10601 Del Rey Ave NE		<b>Transaction ID:</b> C4131080		
	City Albuquerque	State NM	Zip Code 87122-3515	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer CITY OF ALBUQUERQUE	Occupation DIRECTOR			
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 700.00				

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	800.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) BABBI BAKER		Date of Receipt
	Mailing Address 9360 OLD HWY 1A		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Estancia	NM	87016
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer SELF		Occupation CONTRACTOR	Transaction ID: C4131040
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	Amount of Each Receipt this Period
		<input type="text"/> 100.00	<input type="text"/> 100.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>B.</b>	Full Name (Last, First, Middle Initial) Heather Balas		Date of Receipt
	Mailing Address 32 PRIESTLY PLACE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Corrales	NM	87048
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer self		Occupation consultant	Transaction ID: C4131135
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	Amount of Each Receipt this Period
		<input type="text"/> 50.00	<input type="text"/> 50.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>C.</b>	Full Name (Last, First, Middle Initial) WILLIAM BALDWIN		Date of Receipt
	Mailing Address 726 PUEBLO SOLANO NW		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	ALBUQUERQUE	NM	87107-6416
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer BILLY'S LONG BAR, STONEFACE, HORSE & A		Occupation OWNER	Transaction ID: C4130852
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	Amount of Each Receipt this Period
		<input type="text"/> 2300.00	<input type="text"/> 200.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 350.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 197
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) WILLIAM BALDWIN	Date of Receipt MM / DD / YYYY 11 / 10 / 2007
	Mailing Address 726 PUEBLO SOLANO NW	<b>Transaction ID:</b> C4130910
	City State Zip Code ALBUQUERQUE NM 87107-6416	Amount of Each Receipt this Period 2100.00
	FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer BILLY'S LONG BAR, STONEFACE, HORSE & A Occupation OWNER Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2300.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) JOHN MATHEW BENAVIDEZ	Date of Receipt MM / DD / YYYY 11 / 17 / 2007
	Mailing Address 4501 WILLOW VIEW LANE NW	<b>Transaction ID:</b> C4130977
	City State Zip Code Albuquerque NM 87120	Amount of Each Receipt this Period 2300.00
	FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer KIRTLAND AIR FORCE BASE Occupation BUYER Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2300.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) STEVE BENOIT	Date of Receipt MM / DD / YYYY 11 / 10 / 2007
	Mailing Address 13724 ELENA GALLEGOS NE	<b>Transaction ID:</b> C4130919
	City State Zip Code Albuquerque NM 87111	Amount of Each Receipt this Period 2300.00
	FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer MOUNTAIN STATES CONSTRUCTION Occupation CONTRACTOR Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>6700.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) FRANK BERGED		Date of Receipt
	Mailing Address P.O. BOX 93036		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	ALBUQUERQUE	NM	87199
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: C4130829
Name of Employer LUXURY LIMOUSINES		Occupation LIMOUSINE OPERATOR	Amount of Each Receipt this Period
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 100.00
		<input type="text"/> 100.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>B.</b>	Full Name (Last, First, Middle Initial) HAROLD BITTEL		Date of Receipt
	Mailing Address 10732 CLYBURN PARK DR NE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Albuquerque	NM	87123
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: C4131124
Name of Employer Information Requested		Occupation Information Requested	Amount of Each Receipt this Period
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 20.00
		<input type="text"/> 20.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>C.</b>	Full Name (Last, First, Middle Initial) Barry J Bitzer		Date of Receipt
	Mailing Address PO Box 2266		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Corrales	NM	87048
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: C4131967
Name of Employer CITY OF ALBUQUEQUE		Occupation POLICY DIRECTOR	Amount of Each Receipt this Period
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 1000.00
		<input type="text"/> 1000.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 1120.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>



**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 17 / 197</span>
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) MARK BITZER		Date of Receipt MM / DD / YYYY 11 / 28 / 2007
	Mailing Address P.O. BOX 11048		<b>Transaction ID:</b> C4131022
	City Oakland	State CA	Zip Code 94611
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
	Name of Employer MARK BITZER REAL ESTATE	Occupation OWNER	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Brent Blackaby		Date of Receipt MM / DD / YYYY 11 / 23 / 2007
	Mailing Address 744 Grizzly Peak Blvd		<b>Transaction ID:</b> C4131975
	City Berkeley	State CA	Zip Code 94708
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1.00
	Name of Employer Blackrock Associates	Occupation Consultant	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 32.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) Brent Blackaby		Date of Receipt MM / DD / YYYY 12 / 04 / 2007
	Mailing Address 744 Grizzly Peak Blvd		<b>Transaction ID:</b> C4131962
	City Berkeley	State CA	Zip Code 94708
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 5.00
	Name of Employer Blackrock Associates	Occupation Consultant	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 32.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1006.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

**A.**

Full Name (Last, First, Middle Initial)  
Brent Blackaby

Mailing Address 744 Grizzly Peak Blvd

City Berkeley State CA Zip Code 94708

FEC ID number of contributing federal political committee. **C**

Name of Employer Blackrock Associates Occupation Consultant

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 32.00

Date of Receipt 12 / 04 / 2007

Transaction ID: C4131963

Amount of Each Receipt this Period 1.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
ROBERT BOGAN

Mailing Address 142 WALDEN RD

City Corrales State NM Zip Code 87048

FEC ID number of contributing federal political committee. **C**

Name of Employer DELTA AIRLINES Occupation PILOT

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

Date of Receipt 12 / 03 / 2007

Transaction ID: C4131039

Amount of Each Receipt this Period 2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
CHRISTIANE G. BOUGEN

Mailing Address 1318 NARCISCO ST NE

City Albuquerque State NM Zip Code 87112

FEC ID number of contributing federal political committee. **C**

Name of Employer RAYLEE VANTAGE HOMES Occupation COMPTROLLER

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

Date of Receipt 11 / 14 / 2007

Transaction ID: C4130941

Amount of Each Receipt this Period 2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **4601.00**

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) JOE BOWDICH		Date of Receipt MM / DD / YYYY 10 / 11 / 2007		
	Mailing Address 8604 EVERTON NE		<b>Transaction ID:</b> C4130836		
	City ALBUQUERQUE	State NM	Zip Code 87111	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer CITY OF ALBUQUERQUE	Occupation DEPUTY DIRECTOR	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>B.</b>	Full Name (Last, First, Middle Initial) ELEANOR BRESLIN		Date of Receipt MM / DD / YYYY 12 / 05 / 2007		
	Mailing Address 7 Avenida Vista Grande		<b>Transaction ID:</b> C4131966		
	City Santa Fe	State NM	Zip Code 87508-9198	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer Information Requested	Occupation Information Requested	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>C.</b>	Full Name (Last, First, Middle Initial) Paul E. Broome		Date of Receipt MM / DD / YYYY 12 / 05 / 2007		
	Mailing Address 10319 Karen Ave NE		<b>Transaction ID:</b> C4131099		
	City Albuquerque	State NM	Zip Code 87111-3673	Amount of Each Receipt this Period 300.00	
	FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer CITY OF ALBUQUERQUE	Occupation Education Coordinator	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	450.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) Norman Brownstein		Date of Receipt
	Mailing Address 410 th St. 22nd Fl.		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Denver	CO	80202
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> C4131104
Name of Employer BROWNSTEIN, HYATT, FARBER		Occupation ATTORNEY	Amount of Each Receipt this Period
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 1000.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>B.</b>	Full Name (Last, First, Middle Initial) DAVID BUCHHOLTZ		Date of Receipt
	Mailing Address 9921 BARRISON NE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Albuquerque	NM	87111
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> C4130913
Name of Employer BROWNSTEIN, HYATT & FARBER		Occupation ATTORNEY	Amount of Each Receipt this Period
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 2300.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>C.</b>	Full Name (Last, First, Middle Initial) Frank Budick		Date of Receipt
	Mailing Address PO Box 3023		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Gallup	NM	87305
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> C4130964
Name of Employer SILVERSTONE JEWELRY		Occupation OWNER	Amount of Each Receipt this Period
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 2300.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>5600.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) J.D. BULLINGTON		Date of Receipt MM / DD / YYYY 11 / 10 / 2007		
	Mailing Address 706 PEACHTREE RD SE		<b>Transaction ID:</b> C4130914		
	City Rio Rancho	State NM	Zip Code 87124	Amount of Each Receipt this Period 1300.00	
	FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer BROWNSTEIN, HYATT & FARBER	Occupation SENIOR POLICY ADVISOR			
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1300.00				

<b>B.</b>	Full Name (Last, First, Middle Initial) Brian Burnett		Date of Receipt MM / DD / YYYY 12 / 05 / 2007		
	Mailing Address 12904 Sand Cherry PI NE		<b>Transaction ID:</b> C4131061		
	City Albuquerque	State NM	Zip Code 87111-7569	Amount of Each Receipt this Period 1000.00	
	FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer BOHANNAN HOUSTON	Occupation ENGINEER			
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00				

<b>C.</b>	Full Name (Last, First, Middle Initial) EMMA CASEY		Date of Receipt MM / DD / YYYY 10 / 31 / 2007		
	Mailing Address 12301 RANCHITOS NE		<b>Transaction ID:</b> C4130883		
	City Albuquerque	State NM	Zip Code 87122	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer N/A	Occupation RETIRED			
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 100.00				

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2400.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 22 / 197
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
<input type="checkbox"/> 14	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) JAMES CASEY	Date of Receipt MM / DD / YYYY 10 / 30 / 2007
	Mailing Address 145 WISCONSIN ST NE	<b>Transaction ID:</b> C4130854
	City State Zip Code Albuquerque NM 87108	Amount of Each Receipt this Period 400.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation EAST MESA ELECTRIC CEO	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 400.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) ROBERT CASEY	Date of Receipt MM / DD / YYYY 10 / 31 / 2007
	Mailing Address 12301 RANCHITOS NE	<b>Transaction ID:</b> C4130884
	City State Zip Code Albuquerque NM 87122	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation SELF PRIVATE INVESTIGATOR	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 100.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) BOB CASWELL	Date of Receipt MM / DD / YYYY 10 / 31 / 2007
	Mailing Address 7119 NATALIE JANAE NE	<b>Transaction ID:</b> C4130885
	City State Zip Code ALBUQUERQUE NM 87112	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation SELF PRIVATE INVESTIGATOR	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 100.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>600.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 197
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) LOWELL CATLETT		Date of Receipt MM / DD / YYYY 11 / 03 / 2007
	Mailing Address 2350 CALLE DE PARIAN		<b>Transaction ID:</b> C4130867
	City Mesilla	State NM	Zip Code 88046-0842
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2300.00
	Name of Employer NMSU	Occupation Professor	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Kathleen Chaves		Date of Receipt MM / DD / YYYY 11 / 08 / 2007
	Mailing Address 1501 Aircraft Ave SE		<b>Transaction ID:</b> C4130890
	City Albuquerque	State NM	Zip Code 87106
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2300.00
	Name of Employer AIRPORT PARKING	Occupation OWNER	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) DIANA CHAVEZ		Date of Receipt MM / DD / YYYY 10 / 11 / 2007
	Mailing Address 2511 HARRIS RD SW		<b>Transaction ID:</b> C4130819
	City ALBUQUERQUE	State NM	Zip Code 87105
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
	Name of Employer CITY OF ALBUQUERQUE	Occupation OFFICE MANAGER	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	5600.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 197
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) GLORIA C. CHAVEZ		Date of Receipt MM / DD / YYYY 11 / 17 / 2007		
	Mailing Address 7416 ASTER RD SW		<b>Transaction ID:</b> C4130974		
	City Albuquerque	State NM	Zip Code 87121	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer YOUTH DEVELOPMENT	Occupation EXECUTIVE ASSISTANT			
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 0.00				

<b>B.</b>	Full Name (Last, First, Middle Initial) GLORIA CHAVEZ		Date of Receipt MM / DD / YYYY 11 / 26 / 2007		
	Mailing Address P.O. BOX 913 SANDIA PARK		<b>Transaction ID:</b> C4131011		
	City Sandia Park	State NM	Zip Code 87047	Amount of Each Receipt this Period 1000.00	
	FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer Sandia National Labs	Occupation Physicist			
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00				

<b>C.</b>	Full Name (Last, First, Middle Initial) Larry Chavez, Jr.		Date of Receipt MM / DD / YYYY 12 / 05 / 2007		
	Mailing Address 7512 Vista Del Arroyo Ave NE		<b>Transaction ID:</b> C4131132		
	City Albuquerque	State NM	Zip Code 87109-2943	Amount of Each Receipt this Period 1000.00	
	FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer SUNROOMS PLUS, INC.	Occupation OWNER			
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00				

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2100.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	



**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 25 / 197  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

**A.** Full Name (Last, First, Middle Initial)  
MARC CHAVEZ  
Mailing Address 2415 ANGEL DR NW  
City ALBUQUERQUE State NM Zip Code 87120-1186  
FEC ID number of contributing federal political committee. **C**  
Name of Employer CITY OF ALBUQUERQUE Occupation ASSISTANT TO THE MAYOR  
Receipt For: 2008 Election Cycle-to-Date  
 Primary    General  
 Other (specify) ▼  
Date of Receipt 10 / 11 / 2007  
**Transaction ID:** C4130818  
Amount of Each Receipt this Period 500.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
PAMELA CHAVEZ  
Mailing Address P.O. BOX 25527  
City Albuquerque State NM Zip Code 87125  
FEC ID number of contributing federal political committee. **C**  
Name of Employer ENVIRONMENTAL SYSTEMS Occupation VICE PRESIDENT  
Receipt For: 2008 Election Cycle-to-Date  
 Primary    General  
 Other (specify) ▼  
Date of Receipt 11 / 20 / 2007  
**Transaction ID:** C4131026  
Amount of Each Receipt this Period 1000.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
PAUL CHAVEZ  
Mailing Address 2511 HARRIS RD SW  
City ALBUQUERQUE State NM Zip Code 87105  
FEC ID number of contributing federal political committee. **C**  
Name of Employer CHAVEZ AUTO PARTS Occupation AUTO PARTS SALESMAN  
Receipt For: 2008 Election Cycle-to-Date  
 Primary    General  
 Other (specify) ▼  
Date of Receipt 10 / 25 / 2007  
**Transaction ID:** C4130845  
Amount of Each Receipt this Period 200.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 1700.00  
**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 / 197
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) SYDNEY CHAVEZ		Date of Receipt MM / DD / YYYY 12 / 05 / 2007
	Mailing Address 1013 CAROL ST NE		<b>Transaction ID:</b> C4131108
	City Albuquerque	State NM	Zip Code 87112
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
	Name of Employer WEST STAFF	Occupation PROGRAM COORDINATOR-SENIOR AFFAIRS	<input type="checkbox"/> Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) VALARIE CHAVEZ		Date of Receipt MM / DD / YYYY 12 / 05 / 2007
	Mailing Address 5812 GUADALUPE TRAIL NW		<b>Transaction ID:</b> C4131055
	City Albuquerque	State NM	Zip Code 87107
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
	Name of Employer FRENCH & ASSOCIATES	Occupation OFFICE MANAGER	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) VIC CHAVEZ		Date of Receipt MM / DD / YYYY 10 / 11 / 2007
	Mailing Address 4700 LINCOLN NE # 102		<b>Transaction ID:</b> C4130833
	City Albuquerque	State NM	Zip Code 87109-2303
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
	Name of Employer CHAVEZ-GRIEVES	Occupation ENGINEER	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 50.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	800.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) CHRISTI M. CHRISTY		Date of Receipt MM / DD / YYYY 11 / 20 / 2007		
	Mailing Address 7408 PIMENTON DR NE		<b>Transaction ID:</b> C4131004		
	City ALBUQUERQUE	State NM	Zip Code 87113-1223	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer BLACK MESA COFFEE COMPANY	Occupation OWNER			
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00				

<b>B.</b>	Full Name (Last, First, Middle Initial) CYNTHIA CLARK-THOMPSON		Date of Receipt MM / DD / YYYY 10 / 23 / 2007		
	Mailing Address 2044 CALLE PAJARO AZUL		<b>Transaction ID:</b> C4130846		
	City ALBUQUERQUE	State NM	Zip Code 87120	Amount of Each Receipt this Period 2300.00	
	FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer RED MOUNTAIN FAMILY SERVICES	Occupation EXECUTIVE DIRECTOR			
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00				

<b>C.</b>	Full Name (Last, First, Middle Initial) PATRICIA CLOSS		Date of Receipt MM / DD / YYYY 11 / 17 / 2007		
	Mailing Address 12015 PERSIMMON AVE NE		<b>Transaction ID:</b> C4130983		
	City Albuquerque	State NM	Zip Code 87111	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer RETIRED	Occupation RETIRED			
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 100.00				

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	2900.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 / 197
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) BOBBIE Jean CLOUD		Date of Receipt MM / DD / YYYY 12 / 05 / 2007		
	Mailing Address 1412 DAKOTA ST NE		<b>Transaction ID:</b> C4131045		
	City ALBUQUERQUE	State NM	Zip Code 87110	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer RETIRED	Occupation RETIRED	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>B.</b>	Full Name (Last, First, Middle Initial) Marie Coleman		Date of Receipt MM / DD / YYYY 11 / 27 / 2007		
	Mailing Address P.O. BOX 8530		<b>Transaction ID:</b> C4131027		
	City Albuquerque	State NM	Zip Code 87198	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer CHURCH STREET CAFE	Occupation OWNER	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>C.</b>	Full Name (Last, First, Middle Initial) MICHAEL CONTRERAS		Date of Receipt MM / DD / YYYY 12 / 04 / 2007		
	Mailing Address 6301 INDIAN SCHOOL ROAD NE		<b>Transaction ID:</b> C4131043		
	City Albuquerque	State NM	Zip Code 87110	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer SENTINEL REAL ESTATE & INVESTMENTS	Occupation PRESIDENT	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 29 / 197
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
<input type="checkbox"/> 14	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) Teresa L Cordova	Date of Receipt MM / DD / YYYY 11 / 17 / 2007
	Mailing Address 716 Luna Rd SW	<b>Transaction ID:</b> C4130958
	City State Zip Code Albuquerque NM 87105-3318	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation UNIVERSITY OF NEW MEXICO PROFESSOR	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 50.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) MITCHELL B. COVEN	Date of Receipt MM / DD / YYYY 11 / 21 / 2007
	Mailing Address 7401 RIO GRANDE BLVD NW	<b>Transaction ID:</b> C4131006
	City State Zip Code Albuquerque NM 87107	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation VITALITY WORKS HERBAL EXT-RACTS OWNER	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) HENRY CRANE	Date of Receipt MM / DD / YYYY 11 / 12 / 2007
	Mailing Address P.O. BOX 2868	<b>Transaction ID:</b> C4130970
	City State Zip Code Corrales NM 87048	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation BRIDGELINE CAPITAL, LLC BROKER	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	1550.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 / 197
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) ANNETTE H. CRUZ		Date of Receipt MM / DD / YYYY 11 / 17 / 2007
	Mailing Address 3616 SAN IGNACIO SW		<b>Transaction ID:</b> C4130976
	City Albuquerque	State NM	Zip Code 87195
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2300.00
	Name of Employer RETIRED	Occupation RETIRED	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00
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<b>B.</b>	Full Name (Last, First, Middle Initial) Joe Cruz		Date of Receipt MM / DD / YYYY 11 / 10 / 2007
	Mailing Address 3613 San Ignacio SW		<b>Transaction ID:</b> C4130911
	City Albuquerque	State NM	Zip Code 87121
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2300.00
	Name of Employer Star Paving Co.	Occupation PRESIDENT	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00
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<b>C.</b>	Full Name (Last, First, Middle Initial) JOSEPH CRUZ		Date of Receipt MM / DD / YYYY 11 / 17 / 2007
	Mailing Address 301 CENTRAL AVE. NE APT. 111		<b>Transaction ID:</b> C4130981
	City Albuquerque	State NM	Zip Code 87102
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
	Name of Employer STAR PAVING	Occupation PROJECT MANAGER	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	5600.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) LUISA V. CRUZ		Date of Receipt MM / DD / YYYY 11 / 17 / 2007
	Mailing Address P.O. BOX 12333		<b>Transaction ID:</b> C4130967
	City Albuquerque	State NM	Zip Code 87195
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
	Name of Employer RETIRED	Occupation RETIRED	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 200.00
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<b>B.</b>	Full Name (Last, First, Middle Initial) Michael Daly		Date of Receipt MM / DD / YYYY 12 / 05 / 2007
	Mailing Address 305 Brownell Howland Rd		<b>Transaction ID:</b> C4131092
	City Santa Fe	State NM	Zip Code 87501-8840
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2300.00
	Name of Employer MESA DEL SOL	Occupation PROJECT MANAGER	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00
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<b>C.</b>	Full Name (Last, First, Middle Initial) MICHAEL DANIELS		Date of Receipt MM / DD / YYYY 11 / 27 / 2007
	Mailing Address 8220 LA MIRADA NE		<b>Transaction ID:</b> C4131029
	City Albuquerque	State NM	Zip Code 87109
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
	Name of Employer INTERSTATE PAVEMENT RESURFACING (IPR)	Occupation OWNER	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00
---	-------------------------------------

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	3500.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 / 197
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) RONALD DAVIS		Date of Receipt	
	Mailing Address 1304 HEATH		M M / D D / Y Y Y Y 1 2 / 0 5 / 2 0 0 7	
	City	State	Zip Code	<b>Transaction ID:</b> C4131105
	Artesia	NM	88210	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		1000.00	
Name of Employer ARTESIA FIRE EQUIPMENT		Occupation OWNER		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008		Election Cycle-to-Date ▼		
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	1000.00			

<b>B.</b>	Full Name (Last, First, Middle Initial) Jennie Day		Date of Receipt	
	Mailing Address 5944 Isleta Blvd SW		M M / D D / Y Y Y Y 1 1 / 1 7 / 2 0 0 7	
	City	State	Zip Code	<b>Transaction ID:</b> C4130989
	Albuquerque	NM	87105	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		100.00	
Name of Employer RETIRED		Occupation RETIRED		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008		Election Cycle-to-Date ▼		
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	100.00			

<b>C.</b>	Full Name (Last, First, Middle Initial) C.A. DE LA CRUZ		Date of Receipt	
	Mailing Address 1800 ELENA CIRCLE SW		M M / D D / Y Y Y Y 1 1 / 1 7 / 2 0 0 7	
	City	State	Zip Code	<b>Transaction ID:</b> C4130966
	Albuquerque	NM	87105	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		100.00	
Name of Employer CENTRAL COMMUNITY COLLEGE JOB CONNECTI		Occupation DIRECTOR		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008		Election Cycle-to-Date ▼		
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	100.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1200.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	



**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 / 197
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) ART DELACRUZ		Date of Receipt MM / DD / YYYY 11 / 09 / 2007		
	Mailing Address 1800 ELENA CIR SW		<b>Transaction ID:</b> C4130892		
	City ALBUQUERQUE	State NM	Zip Code 87105-4627	Amount of Each Receipt this Period 1000.00	
	FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer CITY OF ALBUQUERQUE	Occupation DEPUTY DIRECTOR			
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00				

<b>B.</b>	Full Name (Last, First, Middle Initial) JUAN DELGADILLO		Date of Receipt MM / DD / YYYY 11 / 10 / 2007		
	Mailing Address P.O. BOX 65514		<b>Transaction ID:</b> C4130901		
	City Albuquerque	State NM	Zip Code 87193	Amount of Each Receipt this Period 200.00	
	FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer ASOCIACION DE COMERCIANTES LATINOS DE	Occupation PRESIDENT			
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 200.00				

<b>C.</b>	Full Name (Last, First, Middle Initial) DAVID DELGADO		Date of Receipt MM / DD / YYYY 12 / 05 / 2007		
	Mailing Address 792 BUCKBOARD RD SE		<b>Transaction ID:</b> C4131088		
	City Rio Rancho	State NM	Zip Code 87124	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer CITY OF ALBUQUERQUE	Occupation SUPERVISOR			
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00				

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1450.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 34 / 197  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

**A.**

Full Name (Last, First, Middle Initial)  
JUAN DELGODILLO

Mailing Address 7804 DESERT CANYON PLACE

City State Zip Code  
ALBUQUERQUE NM 87121

FEC ID number of contributing federal political committee. **C**

Name of Employer DELGODILLO & ASSOCIATES Occupation CONSULTANT

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 1 / 2 0 0 7

Transaction ID: C4130838

Amount of Each Receipt this Period  
50.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
JANE DILLON

Mailing Address 6501 AMERICAS PARKWAY NE

City State Zip Code  
Albuquerque NM 87110

FEC ID number of contributing federal political committee. **C**

Name of Employer JANE DILLON DESIGN GROUP, LLC Occupation OWNER

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 1 9 / 2 0 0 7

Transaction ID: C4130991

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
Peter Dinelli

Mailing Address 1309 Dakota NE

City State Zip Code  
Albuquerque NM 87110

FEC ID number of contributing federal political committee. **C**

Name of Employer CITY OF ALBUQUERQUE Occupation Attorney

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 1 0 / 2 0 0 7

Transaction ID: C4130909

Amount of Each Receipt this Period  
2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **3350.00**

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 / 197
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) EDWARD J. DOBBS		Date of Receipt MM / DD / YYYY 12 / 04 / 2007		
	Mailing Address 1000 RIDGEWAY LOOP RD		<b>Transaction ID:</b> C4131038		
	City Memphis	State TN	Zip Code 38120	Amount of Each Receipt this Period 2300.00	
	FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer PREMIER DISTRIBUTING	Occupation OWNER	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>B.</b>	Full Name (Last, First, Middle Initial) Roger Downey		Date of Receipt MM / DD / YYYY 11 / 17 / 2007		
	Mailing Address 2155 Louisiana Blvd NE Ste 8950		<b>Transaction ID:</b> C4130968		
	City Albuquerque	State NM	Zip Code 87110	Amount of Each Receipt this Period 1000.00	
	FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer DOWNEY INSURANCE	Occupation SELF EMPLOYED	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>C.</b>	Full Name (Last, First, Middle Initial) DAVID DOYLE		Date of Receipt MM / DD / YYYY 11 / 11 / 2007		
	Mailing Address P.O. BOX 92226		<b>Transaction ID:</b> C4130929		
	City Albuquerque	State NM	Zip Code 87199	Amount of Each Receipt this Period 1000.00	
	FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer ENTERPRISE BUILDERS CORP	Occupation VICE-PRESIDENT	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	4300.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 / 197
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) Tilden L. Drinkard		Date of Receipt MM / DD / YYYY 11 / 15 / 2007
	Mailing Address PO Box 807		<b>Transaction ID:</b> C4130936
	City Corrales	State NM	Zip Code 87048-0807
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
	Name of Employer LA POSADA DE ALBUQUERQUE	Occupation MANAGING DIRECTOR	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 100.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) DANIEL J. DUHIGG		Date of Receipt MM / DD / YYYY 11 / 17 / 2007
	Mailing Address 789 HAMLET ST		<b>Transaction ID:</b> C4130998
	City Columbus	State OH	Zip Code 43215
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2300.00
	Name of Employer OHIO STATE UNIVERSITY	Occupation PHYSICIAN	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) DAVID DUHIGG		Date of Receipt MM / DD / YYYY 10 / 21 / 2007
	Mailing Address 1750 SHADYSIDE DRIVE SW		<b>Transaction ID:</b> C4130843
	City Albuquerque	State NM	Zip Code 87105-5740
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2300.00
	Name of Employer DUHIGG, CRONIN & SPRING	Occupation ATTORNEY	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	4700.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 37 / 197</span>
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) JOHN DUHIGG		Date of Receipt MM / DD / YYYY 10 / 11 / 2007		
	Mailing Address P.O. BOX 527		<b>Transaction ID:</b> C4130820		
	City ALBUQUERQUE	State NM	Zip Code 87103	Amount of Each Receipt this Period 2300.00	
	FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer DUHIGG, CRONIN & SPRING	Occupation ATTORNEY			
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00				

<b>B.</b>	Full Name (Last, First, Middle Initial) ANNA MARIE DURAN		Date of Receipt MM / DD / YYYY 11 / 21 / 2007		
	Mailing Address 11401 COSTA DEL SOL NE		<b>Transaction ID:</b> C4131018		
	City Albuquerque	State NM	Zip Code 87111	Amount of Each Receipt this Period 2300.00	
	FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer HALLMARK	Occupation MERCHANDISER			
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00				

<b>C.</b>	Full Name (Last, First, Middle Initial) C.M. DZIAK		Date of Receipt MM / DD / YYYY 11 / 11 / 2007		
	Mailing Address P.O. BOX 1804		<b>Transaction ID:</b> C4130898		
	City Corrales	State NM	Zip Code 87048	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer ASSOCIATED INSURANCE PROFESSIONALS	Occupation AGENT			
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00				

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	5100.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 38 / 197  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

**A.** Full Name (Last, First, Middle Initial)  
KEVIN W. EADES  
Mailing Address 2453 TYLER LOOP NE  
City RIO RANCHO State NM Zip Code 87144-6539  
FEC ID number of contributing federal political committee. **C**  
Name of Employer MOLZEN CORBIN AND ASSOCIATES Occupation ENGINEER  
Receipt For: 2008 Election Cycle-to-Date  
 Primary    General  
 Other (specify) ▼  
Date of Receipt 12 / 05 / 2007  
Transaction ID: C4131066  
Amount of Each Receipt this Period 500.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Tim Eichenberg  
Mailing Address PO Box 573  
City Albuquerque State NM Zip Code 87103-0573  
FEC ID number of contributing federal political committee. **C**  
Name of Employer HEIGHTS REALTY Occupation REALTOR  
Receipt For: 2008 Election Cycle-to-Date  
 Primary    General  
 Other (specify) ▼  
Date of Receipt 11 / 21 / 2007  
Transaction ID: C4131013  
Amount of Each Receipt this Period 2000.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
MAC ETHRIDGE  
Mailing Address 6201 Montgomery Blvd NE  
City Albuquerque State NM Zip Code 87109-1414  
FEC ID number of contributing federal political committee. **C**  
Name of Employer ETHRIDGE TIRE Occupation OWNER  
Receipt For: 2008 Election Cycle-to-Date  
 Primary    General  
 Other (specify) ▼  
Date of Receipt 12 / 13 / 2007  
Transaction ID: C4131136  
Amount of Each Receipt this Period 100.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 2600.00  
**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 39 / 197  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

**A.** Full Name (Last, First, Middle Initial)  
Cathy Fenner Garcia

Mailing Address 6301 Indian School Rd Ne  
Ste 200

City Albuquerque State NM Zip Code 87110-8104

FEC ID number of contributing federal political committee. **C**

Name of Employer Competitive Benefits Administrators Occupation OWNER

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt 12 / 04 / 2007  
**Transaction ID:** C4131035  
 Amount of Each Receipt this Period 2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Mark Fleisher

Mailing Address 9451Thornton Ave. NE

City Albuquerque State NM Zip Code 87109

FEC ID number of contributing federal political committee. **C**

Name of Employer Victory Group, The Occupation CONSULTANT

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt 12 / 22 / 2007  
**Transaction ID:** C4131870  
 Amount of Each Receipt this Period 760.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
James Folkman

Mailing Address 8505 VINA DEL SOL

City Albuquerque State NM Zip Code 87122

FEC ID number of contributing federal political committee. **C**

Name of Employer HOME BUILDERS ASSOCIATION OF CENTRAL N Occupation EXECUTIVE VICE PRESIDENT

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt 12 / 07 / 2007  
**Transaction ID:** C4131125  
 Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **4060.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) ROBERT FORREST		Date of Receipt
	Mailing Address 7004 DEL OSO CT NE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 0 8 / 2 0 0 7
	City	State	Zip Code
	Albuquerque	NM	87109
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID: C4130897</b>
Name of Employer PAGES APPLIANCE		Occupation GENERAL MANAGER	Amount of Each Receipt this Period
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 1000.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>B.</b>	Full Name (Last, First, Middle Initial) Stephen G. French		Date of Receipt
	Mailing Address 500 Marquette Ave NW French & Associates, PC		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 0 9 / 2 0 0 7
	City	State	Zip Code
	Albuquerque	NM	87102-5312
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID: C4130899</b>
Name of Employer FRENCH AND ASSOCIATES		Occupation ATTORNEY	Amount of Each Receipt this Period
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 250.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>C.</b>	Full Name (Last, First, Middle Initial) HECTOR H. GALLEGOS		Date of Receipt
	Mailing Address 4201 COORS BLVD SW TRLR 110		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 1 7 / 2 0 0 7
	City	State	Zip Code
	Albuquerque	NM	87121
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID: C4130980</b>
Name of Employer SELF		Occupation INDEPENDENT TRUCK DRIVER	Amount of Each Receipt this Period
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 500.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 1750.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>



**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) KATHERINE I. GALLEGOS		Date of Receipt MM / DD / YYYY 11 / 17 / 2007
	Mailing Address 1961 CLEARWATER LOOP NE		<b>Transaction ID:</b> C4130985
	City Rio Rancho	State NM	Zip Code 87144
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 100.00
	Name of Employer STAR PAVING	Occupation SERVICE MANAGER	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 100.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) SHARI GALVAN		Date of Receipt MM / DD / YYYY 10 / 11 / 2007
	Mailing Address 203 REESE NE		<b>Transaction ID:</b> C4130821
	City Albuquerque	State NM	Zip Code 87107
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 50.00
	Name of Employer NMHCA	Occupation OFFICE MANAGER	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 50.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Lee Gamelsky		Date of Receipt MM / DD / YYYY 12 / 05 / 2007
	Mailing Address 4113 Hannett Ave NE		<b>Transaction ID:</b> C4131048
	City Albuquerque	State NM	Zip Code 87110-4940
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 200.00
	Name of Employer LEE GAMELSKY ARCHITECTS, PC	Occupation OWNER	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 200.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>350.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) DEBBIE GARCIA		Date of Receipt MM / DD / YYYY 12 / 05 / 2007
	Mailing Address 713 CAROLINA DR		<b>Transaction ID:</b> C4131090
	City	State	Zip Code
	Bernalillo	NM	87004
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer TLC UNIFORMS		Occupation OWNER	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 250.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) DENISE GARCIA		Date of Receipt MM / DD / YYYY 11 / 14 / 2007
	Mailing Address 10601 PISCES CT NW		<b>Transaction ID:</b> C4130932
	City	State	Zip Code
	Albuquerque	NM	87114
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2300.00
Name of Employer RAYLEE VANTAGE HOMES		Occupation SALES ADMINISTRATOR	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 2300.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) JOE E. GARCIA		Date of Receipt MM / DD / YYYY 12 / 12 / 2007
	Mailing Address 917 WILLIAMS SE		<b>Transaction ID:</b> C4131976
	City	State	Zip Code
	Albuquerque	NM	87102
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 25.00
Name of Employer Information Requested		Occupation Information Requested	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 25.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>2575.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 43 / 197  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

**A.** Full Name (Last, First, Middle Initial)  
MARY J.C. GARCIA

Mailing Address 2310 ESPANOLA ST NE

City State Zip Code  
Albuquerque NM 87110

FEC ID number of contributing federal political committee. **C**

Name of Employer A.I.C. Occupation EXECUTIVE DIRECTOR

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
11 / 14 / 2007

**Transaction ID:** C4130987

Amount of Each Receipt this Period  
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
SAMUEL L. GARCIA, Jr.

Mailing Address 6301 Indian School Rd Ne Ste 200

City State Zip Code  
Albuquerque NM 87110-8104

FEC ID number of contributing federal political committee. **C**

Name of Employer COMPETITIVE BENEFITS ADMINISTRATORS Occupation OWNER

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
12 / 04 / 2007

**Transaction ID:** C4131036

Amount of Each Receipt this Period  
2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Vincent Garcia

Mailing Address 600 Central Ave SW Ste 300

City State Zip Code  
Albuquerque NM 87102-3195

FEC ID number of contributing federal political committee. **C**

Name of Employer La Posada Occupation owner

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
11 / 26 / 2007

**Transaction ID:** C4131012

Amount of Each Receipt this Period  
2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **4700.00**

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 44 / 197  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

**A.** Full Name (Last, First, Middle Initial)  
CAITLIN GARRITY  
Mailing Address P.O. BOX 6494

City State Zip Code  
Albuquerque NM 87197

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
GARRITY INSULATION OFFICE MANAGER

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
11 / 21 / 2007

**Transaction ID:** C4131008

Amount of Each Receipt this Period  
2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Bridget M. Gavahan  
Mailing Address 9921 Barrinson NE

City State Zip Code  
Albuquerque NM 87111-5895

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
New Mexico Court of Appeals Attorney

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
11 / 10 / 2007

**Transaction ID:** C4130915

Amount of Each Receipt this Period  
2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
James Giannelli  
Mailing Address P.O. BOX 91447

City State Zip Code  
Albuquerque NM 87199

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RMCI Construction PRESIDENT

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
12 / 05 / 2007

**Transaction ID:** C4131050

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **5300.00**

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) JAMES GIFFORD	Date of Receipt MM / DD / YYYY 12 / 05 / 2007
	Mailing Address 3308 VISTA DEL SUR ST NW	<b>Transaction ID:</b> C4131062
	City State Zip Code ALBUQUERQUE NM 87120-1546	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer REAL ESTATE INVESTOR/DEVELOPER/SELF	Occupation REAL ESTATE INVESTOR	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Virgil S. Gill	Date of Receipt MM / DD / YYYY 11 / 27 / 2007
	Mailing Address 6506 Calle Redonda NW	<b>Transaction ID:</b> C4131028
	City State Zip Code Albuquerque NM 87120-2728	Amount of Each Receipt this Period 2300.00
	FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Virgil Gill Construction	Occupation OWNER	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) RHONDA GILLILAND	Date of Receipt MM / DD / YYYY 11 / 08 / 2007
	Mailing Address 500 THOROUGHbred SW	<b>Transaction ID:</b> C4130902
	City State Zip Code Albuquerque NM 87121	Amount of Each Receipt this Period 125.00
	FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer MECHANICAL CONTRACTORS ASSOCIATION OF	Occupation ADMINISTRATIVE ASSISTANT	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 125.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>3425.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) Patti Gladstone		Date of Receipt MM / DD / YYYY 11 / 14 / 2007
	Mailing Address 429 Montclair Dr SE		<b>Transaction ID:</b> C4130943
	City Albuquerque	State NM	Zip Code 87108-2629
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
	Name of Employer retired	Occupation RETIRED	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Receipt For: 2008	Election Cycle-to-Date ▼
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	200.00
<input type="checkbox"/> Other (specify) ▼	

<b>B.</b>	Full Name (Last, First, Middle Initial) RICK GOLDMAN		Date of Receipt MM / DD / YYYY 12 / 07 / 2007
	Mailing Address 1263 GLENCOE AVENUE		<b>Transaction ID:</b> C4131969
	City Highland Park	State IL	Zip Code 60035
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
	Name of Employer GOLDMAN FAMILY HOLDINGS, LLC	Occupation REAL ESTATE	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Receipt For: 2008	Election Cycle-to-Date ▼
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	1000.00
<input type="checkbox"/> Other (specify) ▼	

<b>C.</b>	Full Name (Last, First, Middle Initial) PAUL GORDER		Date of Receipt MM / DD / YYYY 12 / 05 / 2007
	Mailing Address 9 CHACO LOOP		<b>Transaction ID:</b> C4131069
	City SANDIA PARK	State NM	Zip Code 87047
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
	Name of Employer CDM ENGINEERING	Occupation ENGINEER	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Receipt For: 2008	Election Cycle-to-Date ▼
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	250.00
<input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	1450.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) Herman Grace	Date of Receipt MM / DD / YYYY 11 / 19 / 2007
	Mailing Address 1625 CAMINO LA CANADA	<b>Transaction ID:</b> C4130996
	City State Zip Code Santa Fe NM 87507-2916	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Motor Mart Occupation owner Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 100.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) ERIN GREENLEE	Date of Receipt MM / DD / YYYY 11 / 17 / 2007
	Mailing Address 789 HAMLET ST	<b>Transaction ID:</b> C4130997
	City State Zip Code Columbus OH 43215	Amount of Each Receipt this Period 2300.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer OHIO STATE UNIVERSITY Occupation STUDENT Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2300.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Richard Guay	Date of Receipt MM / DD / YYYY 12 / 24 / 2007
	Mailing Address 1850 OLD PECOS TRAIL	<b>Transaction ID:</b> C4131874
	City State Zip Code SANTA FE NM 87505	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer RG STRATEGIES, LLC Occupation OWNER Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	3400.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 48 / 197  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

**A.** Full Name (Last, First, Middle Initial)  
ELIZA GUTIERREZ  
Mailing Address 6809 LA LUCENA  
City Albuquerque State NM Zip Code 87113  
FEC ID number of contributing federal political committee. **C**  
Name of Employer BERNALILLO PUBLIC SCHOOLS Occupation TRANSPORTATION DIRECTOR  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 2300.00  
Date of Receipt 11 / 21 / 2007  
Transaction ID: C4131019  
Amount of Each Receipt this Period 2300.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
JONI M GUTIERREZ  
Mailing Address PO Box 842  
City MESILLA State NM Zip Code 88046-0842  
FEC ID number of contributing federal political committee. **C**  
Name of Employer SELF Occupation ARCHITECT/LANDSCAPING  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 2300.00  
Date of Receipt 10 / 19 / 2007  
Transaction ID: C4130840  
Amount of Each Receipt this Period 2300.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Charles Haegelin  
Mailing Address 9806 Greenbrier Rd NE  
City Albuquerque State NM Zip Code 87111-5824  
FEC ID number of contributing federal political committee. **C**  
Name of Employer FACILITY BUILD Occupation PRESIDENT/CEO  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 2000.00  
Date of Receipt 12 / 05 / 2007  
Transaction ID: C4131067  
Amount of Each Receipt this Period 2000.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 6600.00  
**TOTAL** This Period (last page this line number only) ..... ▶



**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) Richard Hanna			Date of Receipt MM / DD / YYYY 12 / 24 / 2007		
	Mailing Address 10701 Lomas Blvd NE Hanna Commercial LLC			<b>Transaction ID:</b> C4131866		
	City Albuquerque		State NM	Zip Code 87112-5471		
	FEC ID number of contributing federal political committee. <b>C</b>			Amount of Each Receipt this Period 1000.00		
	Name of Employer HANNA COMMERCIAL, LLC		Occupation OWNER			
	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1000.00			

<b>B.</b>	Full Name (Last, First, Middle Initial) JEREMY HARITON			Date of Receipt MM / DD / YYYY 12 / 05 / 2007		
	Mailing Address 431 LORENZO DR			<b>Transaction ID:</b> C4131098		
	City Oak Park		State CA	Zip Code 91377		
	FEC ID number of contributing federal political committee. <b>C</b>			Amount of Each Receipt this Period 1000.00		
	Name of Employer BURN & RAVE ENTERPRISES, LTD		Occupation PRESIDENT			
	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1000.00			

<b>C.</b>	Full Name (Last, First, Middle Initial) JACK HARNEY			Date of Receipt MM / DD / YYYY 11 / 12 / 2007		
	Mailing Address 4004 ARAPAHOE AVE NW			<b>Transaction ID:</b> C4130894		
	City Albuquerque		State NM	Zip Code 87114		
	FEC ID number of contributing federal political committee. <b>C</b>			Amount of Each Receipt this Period 2300.00		
	Name of Employer AMERICAN PROPERTY TAX CO		Occupation INVESTOR			
	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 2300.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>4300.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) SUSAN HARRIS		Date of Receipt MM / DD / YYYY 10 / 26 / 2007
	Mailing Address P.O. BOX 828		<b>Transaction ID:</b> C4130847
	City Mesquite	State NM	Zip Code 88048
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
	Name of Employer GRUBB ELLIS	Occupation REALTOR	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Jay Hart		Date of Receipt MM / DD / YYYY 12 / 05 / 2007
	Mailing Address 9621 San Francisco Rd NE		<b>Transaction ID:</b> C4131054
	City Albuquerque	State NM	Zip Code 87122-3438
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
	Name of Employer CITY OF ALBUQUERQUE	Occupation DIRECTOR	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 0.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) KURT E. HELLERMANN		Date of Receipt MM / DD / YYYY 12 / 05 / 2007
	Mailing Address 4908 CALLE DE LUNA NE		<b>Transaction ID:</b> C4131053
	City Albuquerque	State NM	Zip Code 87111
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 50.00
	Name of Employer CH2M	Occupation VICE PRESIDENT	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 50.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1550.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) RICHARD HERIG		Date of Receipt
	Mailing Address 5305 VISTA LEJANNE NE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Albuquerque	NM	87111
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: C4130893
Name of Employer KEVA JUICE		Occupation OWNER	Amount of Each Receipt this Period
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/>
		<input type="text"/> 2300.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>B.</b>	Full Name (Last, First, Middle Initial) DAVID HERRERA		Date of Receipt
	Mailing Address 5611 ALTA VISTA CT. SW		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Albuquerque	NM	87106
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: C4130832
Name of Employer GARRITY, INC		Occupation MANAGER	Amount of Each Receipt this Period
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/>
		<input type="text"/> 100.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>C.</b>	Full Name (Last, First, Middle Initial) Thomas Horan		Date of Receipt
	Mailing Address 510 Laguna Blvd SW		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Albuquerque	NM	87104-1117
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: C4131033
Name of Employer self - Horan Ltd.		Occupation Lobbyist	Amount of Each Receipt this Period
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/>
		<input type="text"/> 683.10	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 3083.10
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 / 197
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) LAWRENCE HUYNH		Date of Receipt MM / DD / YYYY 12 / 04 / 2007
	Mailing Address 2626 WASHINGTON ST NE		<b>Transaction ID:</b> C4131964
	City Albuquerque	State NM	Zip Code 87110
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5.00
	Name of Employer RETIRED	Occupation RETIRED	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 5.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) JOSE JARAMILLO		Date of Receipt MM / DD / YYYY 12 / 05 / 2007
	Mailing Address 301 ENCHANTED VALLEY ROAD NW		<b>Transaction ID:</b> C4131089
	City Albuquerque	State NM	Zip Code 87107
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
	Name of Employer FIRST INN, INC.	Occupation SALES-FIRE EQUIPMENT	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1000.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Jeffrey Jesionowski		Date of Receipt MM / DD / YYYY 12 / 05 / 2007
	Mailing Address 10408 Morning Star Dr NE		<b>Transaction ID:</b> C4131070
	City Albuquerque	State NM	Zip Code 87111-7539
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
	Name of Employer AMC	Occupation REAL ESTATE DEVELOPER	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1255.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 / 197
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) Bo Johnson	Date of Receipt MM / DD / YYYY 12 / 05 / 2007
	Mailing Address 5905 Azuelo Ave NW	<b>Transaction ID:</b> C4131072
	City State Zip Code Albuquerque NM 87120-2045	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Bokay Construction/Management Inc.	Occupation President	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) LYNN JOHNSON	Date of Receipt MM / DD / YYYY 12 / 05 / 2007
	Mailing Address 4115 SILVERY MINNOW PLACE NW	<b>Transaction ID:</b> C4131107
	City State Zip Code Albuquerque NM 87120	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer KELLER WILLIAMS	Occupation REALTOR	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 50.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) ALISSA KELLY	Date of Receipt MM / DD / YYYY 11 / 20 / 2007
	Mailing Address 6501 SAN ANTONIO #2903	<b>Transaction ID:</b> C4130993
	City State Zip Code Albuquerque NM 87109	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer RED MOUNTAIN FAMILY SERVICES	Occupation TREATMENT COORDINATOR	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 100.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1150.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) Michael Kelly		Date of Receipt MM / DD / YYYY 11 / 09 / 2007
	Mailing Address 6501 Americas Pkwy NE Ste 650		<b>Transaction ID:</b> C4130922
	City Albuquerque	State NM	Zip Code 87110-8190
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
	Name of Employer Realty Mortgage & Investment Co. Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Investor Election Cycle-to-Date ▼ 1000.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>B.</b>	Full Name (Last, First, Middle Initial) KIM KLOEPPEL		Date of Receipt MM / DD / YYYY 12 / 05 / 2007
	Mailing Address 7225 LUELLA ANNE NE		<b>Transaction ID:</b> C4131084
	City Albuquerque	State NM	Zip Code 87109
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 75.00
	Name of Employer UNIVERSITY OF NEW MEXICO Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation ADMINISTRATOR FOR STUDENT AFFAIRS Election Cycle-to-Date ▼ 75.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>C.</b>	Full Name (Last, First, Middle Initial) Nathan Korn		Date of Receipt MM / DD / YYYY 11 / 16 / 2007
	Mailing Address 1660 Eubank Blvd NE		<b>Transaction ID:</b> C4130986
	City Albuquerque	State NM	Zip Code 87112-4115
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
	Name of Employer Kaufman's West Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Owner Election Cycle-to-Date ▼ 1000.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>2075.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 / 197
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) C.D. KRUGER	Date of Receipt MM / DD / YYYY 12 / 05 / 2007
	Mailing Address 8500 SNAKEDANCE CT NE	<b>Transaction ID:</b> C4131071
	City State Zip Code Albuquerque NM 87111	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer A.S. HORNER	Occupation CONTRACTOR	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) JON KWAKO	Date of Receipt MM / DD / YYYY 10 / 31 / 2007
	Mailing Address 1803 CANYON PLACE NE	<b>Transaction ID:</b> C4130889
	City State Zip Code Albuquerque NM 87110	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 20.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Celinda C Lake	Date of Receipt MM / DD / YYYY 12 / 05 / 2007
	Mailing Address 126 F STREET SE	<b>Transaction ID:</b> C4131126
	City State Zip Code Washington DC 20003	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer SELF	Occupation CONSULTANT	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>2020.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 / 197
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) Anna Lamberson		Date of Receipt MM / DD / YYYY 12 / 05 / 2007		
	Mailing Address 1016 6TH STREET NW		<b>Transaction ID:</b> C4131087		
	City Albuquerque	State NM	Zip Code 87102	Amount of Each Receipt this Period 1000.00	
	FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer CITY OF ALBUQUERQUE	Occupation BUDGET OFFICER	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Election Cycle-to-Date ▼ 1000.00					

<b>B.</b>	Full Name (Last, First, Middle Initial) Berry Lang		Date of Receipt MM / DD / YYYY 12 / 05 / 2007		
	Mailing Address 5980 E TERRA GRANDE		<b>Transaction ID:</b> C4131094		
	City TUCSON	State AZ	Zip Code 85750-1043	Amount of Each Receipt this Period 1150.00	
	FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer MESA DEL SOL	Occupation PRESIDENT	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Election Cycle-to-Date ▼ 1150.00					

<b>C.</b>	Full Name (Last, First, Middle Initial) Janet Lang		Date of Receipt MM / DD / YYYY 12 / 05 / 2007		
	Mailing Address 5980 E Terra Grande		<b>Transaction ID:</b> C4131093		
	City Tucson	State AZ	Zip Code 85750-1043	Amount of Each Receipt this Period 1150.00	
	FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer RETIRED	Occupation RETIRED	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Election Cycle-to-Date ▼ 1150.00					

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	3300.00
<b>TOTAL</b> This Period (last page this line number only) .....	



**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) BRIAN LEE		Date of Receipt MM / DD / YYYY 11 / 17 / 2007
	Mailing Address 5703 S. 31ST DRIVE		<b>Transaction ID:</b> C4130979
	City Phoenix	State AZ	Zip Code 85041
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
	Name of Employer CITY OF ALBUQUERQUE	Occupation ASSISTANT TO THE MAYOR	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 50.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) MATTHEW LEHMAN		Date of Receipt MM / DD / YYYY 11 / 21 / 2007
	Mailing Address 7412 VANCOUVER NW		<b>Transaction ID:</b> C4131000
	City Albuquerque	State NM	Zip Code 87114
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1500.00
	Name of Employer TLC PLUMBING	Occupation CONSTRUCTION DIVISION MANAGER	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1500.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) DONALD LEONARD		Date of Receipt MM / DD / YYYY 10 / 18 / 2007
	Mailing Address 201 LOMAS BLVD. NW		<b>Transaction ID:</b> C4130848
	City ALBUQUERQUE	State NM	Zip Code 87102
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
	Name of Employer LEONARD TIRE & AUTO REPAIR	Occupation OWNER	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	2550.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 / 197
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) JACK LEVERENCE		Date of Receipt MM / DD / YYYY 12 / 05 / 2007		
	Mailing Address 8400 BLUSH RD NW		<b>Transaction ID:</b> C4131100		
	City Albuquerque	State NM	Zip Code 87120	Amount of Each Receipt this Period 2000.00	
	FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer FREIGHTLINER, INC.	Occupation FIRE EQUIPMENT MAINTENANCE	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>B.</b>	Full Name (Last, First, Middle Initial) JAMES LONG		Date of Receipt MM / DD / YYYY 11 / 08 / 2007		
	Mailing Address 201 3RD ST NW		<b>Transaction ID:</b> C4130896		
	City Albuquerque	State NM	Zip Code 87102	Amount of Each Receipt this Period 2300.00	
	FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer ALBUQUERQUE HERITAGE HOTELS AND RESORT	Occupation PRESIDENT	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>C.</b>	Full Name (Last, First, Middle Initial) Marcia E. Lubar		Date of Receipt MM / DD / YYYY 11 / 12 / 2007		
	Mailing Address 5424 Black Bear Loop NE		<b>Transaction ID:</b> C4130924		
	City Albuquerque	State NM	Zip Code 87122	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer N/A	Occupation RETIRED	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	4550.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) ROBERT LUCERO	Date of Receipt MM / DD / YYYY 12 / 11 / 2007
	Mailing Address 2325 HEADINGLY AVE NW	<b>Transaction ID:</b> C4131134
	City State Zip Code Albuquerque NM 87107	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation UNKNOWN UNKNOWN	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) ROBERT A. LUPTON	Date of Receipt MM / DD / YYYY 12 / 05 / 2007
	Mailing Address 8600 GLENRIDGE PL NW	<b>Transaction ID:</b> C4131082
	City State Zip Code ALBUQUERQUE NM 87114	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation WILSON LUPTON GROUP, INC. VICE PRESIDENT	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) JOE S. MADRID	Date of Receipt MM / DD / YYYY 11 / 17 / 2007
	Mailing Address 2107 JUDY ST SW	<b>Transaction ID:</b> C4130978
	City State Zip Code Albuquerque NM 87105	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation SELF REALTOR	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 100.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1600.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 60 / 197
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
<input type="checkbox"/> 14	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) Miguel A. Maestas		Date of Receipt MM / DD / YYYY 11 / 17 / 2007
	Mailing Address 9400 Harbor Rd NW		<b>Transaction ID:</b> C4130984
	City Albuquerque	State NM	Zip Code 87121
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
	Name of Employer YOUTH DEVELOPMENT	Occupation ADMINISTRATOR	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 100.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Rebecca Maloy		Date of Receipt MM / DD / YYYY 11 / 15 / 2007
	Mailing Address 7820 Coors Blvd SW		<b>Transaction ID:</b> C4130939
	City Albuquerque	State NM	Zip Code 87121
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
	Name of Employer MALOY CONSTRUCTION	Occupation PRESIDENT	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) JAMES MANNING		Date of Receipt MM / DD / YYYY 10 / 28 / 2007
	Mailing Address P.O. BOX 30765		<b>Transaction ID:</b> C4130872
	City Sea Island Branch	State GA	Zip Code 31561
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2300.00
	Name of Employer SELF	Occupation PRIVATE INVESTOR	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	3400.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) JEANNE K MANNING	Date of Receipt MM / DD / YYYY 10 / 28 / 2007
	Mailing Address PO Box 30765	<b>Transaction ID:</b> C4130869
	City State Zip Code Sea Island GA 31561	Amount of Each Receipt this Period 2300.00
	FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer SELF	Occupation PRIVATE INVESTOR	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) ILENE MARCHANT	Date of Receipt MM / DD / YYYY 12 / 03 / 2007
	Mailing Address #8 MARQUEZ LANE	<b>Transaction ID:</b> C4131044
	City State Zip Code Los Lunas NM 87031	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer EASTERN CHILD DEVELOPMENT CENTER	Occupation DIRECTOR	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 100.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) CHERYL MARLOW	Date of Receipt MM / DD / YYYY 11 / 20 / 2007
	Mailing Address 11 KENNEDY LANE	<b>Transaction ID:</b> C4131003
	City State Zip Code Tijeras NM 87059	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer CHERYL MARLOW AND ASSOC. PRUDENTIAL SW	Occupation SELF EMPLOYED	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>2650.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) RUDY MARTIN		Date of Receipt MM / DD / YYYY 10 / 25 / 2007
	Mailing Address P.O. BOX 2668		<b>Transaction ID:</b> C4130856
	City Espanola	State NM	Zip Code 87532
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
	Name of Employer SELF	Occupation ATTORNEY	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 300.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) MICHAEL MARTINEZ		Date of Receipt MM / DD / YYYY 11 / 18 / 2007
	Mailing Address 2740 BARCELONA PL SW		<b>Transaction ID:</b> C4130992
	City Albuquerque	State NM	Zip Code 87121
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
	Name of Employer STAR PAVING	Occupation CONTRACTOR	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 100.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) TONI L. MARTORELLI		Date of Receipt MM / DD / YYYY 12 / 04 / 2007
	Mailing Address 1750 SHADYSIDE DR SW		<b>Transaction ID:</b> C4131938
	City ALBUQUERQUE	State NM	Zip Code 87105-5740
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
	Name of Employer City of Albuquerque	Occupation Director of Cultural Services	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1400.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) DIANE MASON		Date of Receipt
	Mailing Address 2877 PARADISE RD Apt 2904		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 0 / 1 2 / 2 0 0 7
	City	State	Zip Code
	LAS VEGAS	NV	89109
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> C4130824
Name of Employer SELF		Occupation FILM MAKER	Amount of Each Receipt this Period
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text"/>	<input type="text"/> 1150.00
		<input type="text"/> 2300.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>B.</b>	Full Name (Last, First, Middle Initial) DIANE MASON		Date of Receipt
	Mailing Address 2877 PARADISE RD Apt 2904		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 2 / 0 5 / 2 0 0 7
	City	State	Zip Code
	LAS VEGAS	NV	89109
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> C4131096
Name of Employer SELF		Occupation FILM MAKER	Amount of Each Receipt this Period
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text"/>	<input type="text"/> 1150.00
		<input type="text"/> 2300.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>C.</b>	Full Name (Last, First, Middle Initial) JOHN MCGEE		Date of Receipt
	Mailing Address 610 RICHMOND DR NE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 1 0 / 2 0 0 7
	City	State	Zip Code
	Albuquerque	NM	87106
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> C4130903
Name of Employer ENVIRONMENTAL DYNAMICS, INC.		Occupation PRINCIPAL	Amount of Each Receipt this Period
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text"/>	<input type="text"/> 2000.00
		<input type="text"/> 2000.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 4300.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 / 197
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) PATRICIA MCGUINNESS		Date of Receipt MM / DD / YYYY 11 / 14 / 2007		
	Mailing Address 11704 RICHFIELD NE		<b>Transaction ID:</b> C4130942		
	City Albuquerque	State NM	Zip Code 87122	Amount of Each Receipt this Period 2300.00	
	FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer RAYLEE VANTAGE HOMES	Occupation ACCOUNTS PAYABLE CLERK			
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00				

<b>B.</b>	Full Name (Last, First, Middle Initial) TANDA MEADORS		Date of Receipt MM / DD / YYYY 12 / 05 / 2007		
	Mailing Address 818 EDITH SE		<b>Transaction ID:</b> C4131083		
	City Albuquerque	State NM	Zip Code 87102	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer CITY OF ALBUQUERQUE	Occupation ADMINISTRATOR			
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 600.00				

<b>C.</b>	Full Name (Last, First, Middle Initial) TANDA MEADORS		Date of Receipt MM / DD / YYYY 12 / 07 / 2007		
	Mailing Address 818 EDITH SE		<b>Transaction ID:</b> C4131123		
	City Albuquerque	State NM	Zip Code 87102	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer CITY OF ALBUQUERQUE	Occupation ADMINISTRATOR			
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 600.00				

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	2900.00
<b>TOTAL</b> This Period (last page this line number only) .....	



**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 / 197
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) CHARLES MELTON		Date of Receipt
	Mailing Address 4030 ANDERSON AVE SE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 11 / 10 / 2007
	City	State	Zip Code
	Albuquerque	NM	87108
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> C4130900
Name of Employer SELF		Occupation CONSULTANT	Amount of Each Receipt this Period
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 1000.00
		<input type="text"/> 1700.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>B.</b>	Full Name (Last, First, Middle Initial) CHARLES MELTON		Date of Receipt
	Mailing Address 4030 ANDERSON AVE SE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 11 / 21 / 2007
	City	State	Zip Code
	Albuquerque	NM	87108
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> C4130999
Name of Employer SELF		Occupation CONSULTANT	Amount of Each Receipt this Period
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 700.00
		<input type="text"/> 1700.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>C.</b>	Full Name (Last, First, Middle Initial) Deborah Metro		Date of Receipt
	Mailing Address 8860 DESERT FINCH LANE NE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 12 / 05 / 2007
	City	State	Zip Code
	Albuquerque	NM	87122
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> C4131064
Name of Employer ALBUQUERQUE PUBLIC SCHOOLS		Occupation TEACHER	Amount of Each Receipt this Period
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 2300.00
		<input type="text"/> 2300.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 4000.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 / 197
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) Peter Mitchell	Date of Receipt MM / DD / YYYY 11 / 15 / 2007
	Mailing Address 23 Bosque Loop	<b>Transaction ID:</b> C4130988
	City State Zip Code Santa Fe NM 87508-2231	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation CITY OF ALBUQUERQUE DIRECTOR	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) CYNTHIA MOHLER	Date of Receipt MM / DD / YYYY 12 / 05 / 2007
	Mailing Address 6850 PIEDRA QUEMADA NW	<b>Transaction ID:</b> C4131056
	City State Zip Code Albuquerque NM 87114	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation MOLZEN CORBIN & ASSOC. VP ADMINISTRATION	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) DEBRA MONDRAGON	Date of Receipt MM / DD / YYYY 11 / 14 / 2007
	Mailing Address 4 NIGHTSHADE CT.	<b>Transaction ID:</b> C4130951
	City State Zip Code Los Lunas NM 87031	Amount of Each Receipt this Period 2300.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation ST. TIMOTHY MONTESSORRI SCHOOL DIRECTOR	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	3300.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) JOHN MONDRAGON		Date of Receipt
	Mailing Address 4 NIGHTSHADE CT		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 1 4 / 2 0 0 7
	City	State	Zip Code
	Los Lunas	NM	87031
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> C4130950
Name of Employer MOUNTAIN WEST GOLFSCAPES		Occupation PRESIDENT	Amount of Each Receipt this Period
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 2300.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>B.</b>	Full Name (Last, First, Middle Initial) DAVID MONTOYA		Date of Receipt
	Mailing Address P.O. BOX 6740		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 2 1 / 2 0 0 7
	City	State	Zip Code
	Albuquerque	NM	87197
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> C4131016
Name of Employer DAVID MONTOYA CONSTRUCTION		Occupation OWNER	Amount of Each Receipt this Period
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 2300.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>C.</b>	Full Name (Last, First, Middle Initial) MARYJEAN V. MONTOYA		Date of Receipt
	Mailing Address 7805 SILVERBERRY SW		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 1 7 / 2 0 0 7
	City	State	Zip Code
	ALBUQUERQUE	NM	87121
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> C4130975
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 100.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>4700.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 / 197
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) MICHAEL MONTOYA		Date of Receipt MM / DD / YYYY 11 / 21 / 2007
	Mailing Address 5720 EL PRADO NW		<b>Transaction ID:</b> C4131015
	City	State	Zip Code
	Albuquerque	NM	87107
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2300.00
Name of Employer CUSTOM GRADING, INC.		Occupation PRESIDENT	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) PABLO MONTOYA		Date of Receipt MM / DD / YYYY 10 / 11 / 2007
	Mailing Address 136 TYLER ROAD NW		<b>Transaction ID:</b> C4130831
	City	State	Zip Code
	Albuquerque	NM	87107
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 50.00
Name of Employer SUNWEST SILVER		Occupation CLERK SPECIALIST	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 50.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) PAMELA MONTOYA		Date of Receipt MM / DD / YYYY 11 / 21 / 2007
	Mailing Address P.O. BOX 6740		<b>Transaction ID:</b> C4131017
	City	State	Zip Code
	Albuquerque	NM	87197
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2300.00
Name of Employer LA PARADA		Occupation OWNER	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>4650.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 69 / 197  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

**A.** Full Name (Last, First, Middle Initial)  
Baker H. H. Morrow  
Mailing Address 1609 Morningside Dr NE  
City Albuquerque State NM Zip Code 87110-5641  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Morrow & Co., Ltd. Occupation landscape architect-OWNER  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 350.00  
Date of Receipt 12 / 05 / 2007  
Transaction ID: C4131049  
Amount of Each Receipt this Period 350.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
RICHARD MURPHY  
Mailing Address 1846 DANNY GALLEGOS  
City Los Lunas State NM Zip Code 87031  
FEC ID number of contributing federal political committee. **C**  
Name of Employer RAYLEE VANTAGE HOMES Occupation MANAGER  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 2300.00  
Date of Receipt 11 / 14 / 2007  
Transaction ID: C4130931  
Amount of Each Receipt this Period 2300.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
RICHARD MURPHY  
Mailing Address 506 DEFIANCE  
City Gallup State NM Zip Code 87301  
FEC ID number of contributing federal political committee. **C**  
Name of Employer MURPHY BUILDERS, INC. Occupation CONTRACTOR  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1000.00  
Date of Receipt 12 / 05 / 2007  
Transaction ID: C4131106  
Amount of Each Receipt this Period 1000.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3650.00  
**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 70 / 197
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
<input type="checkbox"/> 14	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) John Myers		Date of Receipt MM / DD / YYYY 12 / 05 / 2007
	Mailing Address 1713 Camino Gallo NW		<b>Transaction ID:</b> C4131058
	City Albuquerque	State NM	Zip Code 87107
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
	Name of Employer MYERS, OLIVER & PRICE	Occupation ATTORNEY	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 150.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) NICHOLAS NELLOS		Date of Receipt MM / DD / YYYY 11 / 15 / 2007
	Mailing Address 4439 AVENIDA DEL SOL NE		<b>Transaction ID:</b> C4130990
	City Albuquerque	State NM	Zip Code 87110
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
	Name of Employer RAGIN' SHRIMP	Occupation OWNER	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 200.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) Jeffrey D. Nichol		Date of Receipt MM / DD / YYYY 12 / 11 / 2007
	Mailing Address 9800 Guadalupe Trl NW		<b>Transaction ID:</b> C4131133
	City Albuquerque	State NM	Zip Code 87114-2009
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
	Name of Employer VCA ADOBE ANIMAL HOSPITAL	Occupation VETERINARIAN	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>850.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 / 197
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) JOHN NITZEL	Date of Receipt MM / DD / YYYY 12 / 05 / 2007
	Mailing Address 2922 CALLE DE OVEJAS	<b>Transaction ID:</b> C4131047
	City State Zip Code Santa Fe NM 87505	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation CH2M HILL TRAFFIC ENGINEER	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 40.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) MICHAEL S. OGAS	Date of Receipt MM / DD / YYYY 11 / 17 / 2007
	Mailing Address 225 WITTWER CT	<b>Transaction ID:</b> C4130961
	City State Zip Code Los Lunas NM 87031	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation YOUTH DEVELOPMENT VICE PRESIDENT EDUCATION SUPPORT	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Craig Orraj	Date of Receipt MM / DD / YYYY 11 / 15 / 2007
	Mailing Address 8319 Tierra Serena PI NE	<b>Transaction ID:</b> C4130938
	City State Zip Code Albuquerque NM 87122-2841	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation SELF-LAW OFFICES OF CRAIG ORRAJ ATTORNEY	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 100.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>390.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 72 / 197
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
<input type="checkbox"/> 14	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) Bianca Ortiz-Wertheim		Date of Receipt MM / DD / YYYY 12 / 05 / 2007		
	Mailing Address 1709 Sigma Chi Rd NE		<b>Transaction ID:</b> C4131103		
	City Albuquerque	State NM	Zip Code 87106-3814	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer CITY OF ALBUQUERQUE	Occupation LEGISLATIVE ANALYST	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>B.</b>	Full Name (Last, First, Middle Initial) TINA OTTENI		Date of Receipt MM / DD / YYYY 12 / 11 / 2007		
	Mailing Address 3401 AVENIDA CHARADA NW		<b>Transaction ID:</b> C4131971		
	City Albuquerque	State NM	Zip Code 87107	Amount of Each Receipt this Period 2300.00	
	FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer RETIRED	Occupation RETIRED	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>C.</b>	Full Name (Last, First, Middle Initial) Barbara Page-Parent		Date of Receipt MM / DD / YYYY 11 / 27 / 2007		
	Mailing Address 501 Quailbrush Dr NW		<b>Transaction ID:</b> C4131023		
	City Albuquerque	State NM	Zip Code 87121-9568	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer Retired	Occupation Retired	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	3300.00
<b>TOTAL</b> This Period (last page this line number only) .....	



**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

**A.**

Full Name (Last, First, Middle Initial)  
Bonnie Paisley

Mailing Address 6504 Calle Candela NW

City Albuquerque State NM Zip Code 87107

FEC ID number of contributing federal political committee. **C**

Name of Employer BROWNSTEIN, HYATT & FARBER Occupation Attorney

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 460.00

Date of Receipt 11 / 07 / 2007

Transaction ID: C4130916

Amount of Each Receipt this Period 460.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
DAVID PALACIOS

Mailing Address 7205 VILLA CLAVO

City Albuquerque State NM Zip Code 87113

FEC ID number of contributing federal political committee. **C**

Name of Employer ALBUQUERQUE CUSTOM TINT Occupation OWNER

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 50.00

Date of Receipt 10 / 11 / 2007

Transaction ID: C4130830

Amount of Each Receipt this Period 50.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
GEORGE PARRA

Mailing Address 7161 FERNHILL DR

City Malibu State CA Zip Code 90265

FEC ID number of contributing federal political committee. **C**

Name of Employer PANGEA PICTURES Occupation FILM PRODUCER

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 12 / 05 / 2007

Transaction ID: C4131102

Amount of Each Receipt this Period 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1010.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 / 197
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) JOHN QUINN PATE		Date of Receipt MM / DD / YYYY 12 / 05 / 2007
	Mailing Address 1007 IDLEWILDE LANE SE		<b>Transaction ID:</b> C4131068
	City Albuquerque	State NM	Zip Code 87108
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
	Name of Employer MOLZEN-CORBIN & ASSOCIATES	Occupation ARCHITECT/PLANNER	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) John Paulson, Jr		Date of Receipt MM / DD / YYYY 12 / 05 / 2007
	Mailing Address 670 LAKEVIEW CIRCLE		<b>Transaction ID:</b> C4131081
	City Rio Rancho	State NM	Zip Code 87124
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 800.00
	Name of Employer SOLAR EQUIPMENT AND SERVICE	Occupation OWNER	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 800.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) Klarissa J. Pena		Date of Receipt MM / DD / YYYY 11 / 17 / 2007
	Mailing Address 6525 Sunset Gardens Rd SW		<b>Transaction ID:</b> C4130972
	City Albuquerque	State NM	Zip Code 87121
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
	Name of Employer YOUTH DEVELOPMENT	Occupation SPECIAL PROJECTS DIRECTOR	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	2300.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 / 197
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

**A.** Full Name (Last, First, Middle Initial)  
ALISON PETERSON

Mailing Address 2325 SAN PEDRO ST NE

City Albuquerque State NM Zip Code 87125

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation **HOMEMAKER**

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

Date of Receipt: 10 / 22 / 2007  
Transaction ID: C4130849  
Amount of Each Receipt this Period: 2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
DOUGLAS H. PETERSON

Mailing Address 2325 SAN PEDRO NE Ste 2A

City ALBUQUERQUE State NM Zip Code 87110

FEC ID number of contributing federal political committee. **C**

Name of Employer PETERSON PROPERTIES Occupation **REALTOR**

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

Date of Receipt: 10 / 09 / 2007  
Transaction ID: C4130822  
Amount of Each Receipt this Period: 2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Elliot Pierce

Mailing Address 7707 Elena Dr NE

City Albuquerque State NM Zip Code 87122-3741

FEC ID number of contributing federal political committee. **C**

Name of Employer OSTEOPOROSIS DIAGNOSTIC CENTER Occupation **PHYSICIAN**

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

Date of Receipt: 11 / 12 / 2007  
Transaction ID: C4130949  
Amount of Each Receipt this Period: 2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **6900.00**

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 76 / 197  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

**A.**

Full Name (Last, First, Middle Initial)  
LEBA PIERCE

Mailing Address 7707 Elena Dr NE

City State Zip Code  
Albuquerque NM 87122-3741

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
MUSEUM ON WHEELS PRESIDENT

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
10 / 30 / 2007

**Transaction ID:** C4130873

Amount of Each Receipt this Period  
200.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
DWAYNE PINO

Mailing Address 1501 POLO NW

City State Zip Code  
Albuquerque NM 87114

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
AMERI-CONTRACTORS, LLC OWNER

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
11 / 11 / 2007

**Transaction ID:** C4130947

Amount of Each Receipt this Period  
2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
VINCENT PIZZONIA

Mailing Address 11333 WOODMAR ST NE

City State Zip Code  
Albuquerque NM 87111

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
VBI PRESIDENT

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
12 / 05 / 2007

**Transaction ID:** C4131065

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **3500.00**

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 77 / 197</span>
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) GARY D PLANTE		Date of Receipt MM / DD / YYYY 11 / 05 / 2007		
	Mailing Address 1692 PACE ROAD NW		<b>Transaction ID:</b> C4130874		
	City Albuquerque	State NM	Zip Code 87114-4135	Amount of Each Receipt this Period 2300.00	
	FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer SELF	Occupation DEVELOPER			
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00				

<b>B.</b>	Full Name (Last, First, Middle Initial) GARRETT PRICE		Date of Receipt MM / DD / YYYY 10 / 11 / 2007		
	Mailing Address 1422 STANFORD DRIVE NE		<b>Transaction ID:</b> C4130825		
	City Albuquerque	State NM	Zip Code 87106	Amount of Each Receipt this Period 200.00	
	FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer PULTE HOMES	Occupation VICE-PRESIDENT			
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 200.00				

<b>C.</b>	Full Name (Last, First, Middle Initial) TERRY PROFITT		Date of Receipt MM / DD / YYYY 11 / 16 / 2007		
	Mailing Address 1104 ANTHONY AVE.		<b>Transaction ID:</b> C4130960		
	City Gallup	State NM	Zip Code 87301	Amount of Each Receipt this Period 400.00	
	FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer AMIGO CHEVROLET	Occupation OWNER			
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 400.00				

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	2900.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 78 / 197  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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)  
New Mexicans for Marty

**A.**

Full Name (Last, First, Middle Initial)  
JOHN M. PROVINE

Mailing Address 6145 AGATE NW

City State Zip Code  
Albuquerque NM 87120

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
MOLZEN CORBIN ENGINEERS CIVIL ENGINEER

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
12 / 05 / 2007

**Transaction ID:** C4131051

Amount of Each Receipt this Period  
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
MASHALLAH QURAIISHI

Mailing Address 3012 CENTRAL SE

City State Zip Code  
Albuquerque NM 87106

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
MASHA MANUFACTURING OWNER

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
12 / 04 / 2007

**Transaction ID:** C4131037

Amount of Each Receipt this Period  
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
PHILLIP RABY

Mailing Address 3408 CALLE VIGO NW

City State Zip Code  
Albuquerque NM 87104

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
NEW URBAN INVESTMENTS, LLC REAL ESTATE

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
12 / 11 / 2007

**Transaction ID:** C4131972

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **2000.00**

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 / 197
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) Marcus Rael	Date of Receipt MM / DD / YYYY 11 / 06 / 2007
	Mailing Address 3208 Vista Maravillosa NW	<b>Transaction ID:</b> C4130880
	City State Zip Code Albuquerque NM 87120-1500	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer ROBLES, RAEI AND ANAYA, PC	Occupation ATTORNEY	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Pablo R. R. Rael	Date of Receipt MM / DD / YYYY 12 / 05 / 2007
	Mailing Address 322 Osuna Rd NW	<b>Transaction ID:</b> C4131059
	City State Zip Code Albuquerque NM 87107-6125	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer AULC	Occupation UTILITY LOCATER	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) LARRY RAINOSEK	Date of Receipt MM / DD / YYYY 11 / 14 / 2007
	Mailing Address 600 FOUR HILLS RD SE	<b>Transaction ID:</b> C4130952
	City State Zip Code ALBUQUERQUE NM 87123-4106	Amount of Each Receipt this Period 2300.00
	FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer FRONTIER RESTAURANT	Occupation OWNER	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>3050.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 80 / 197  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

**A.** Full Name (Last, First, Middle Initial)  
JACQUELINE RANDALL

Mailing Address 6031 KENSINGTON DR NW

City State Zip Code  
Albuquerque NM 87107

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
ASTRA ZENICA COMPANY PHARMACEUTICAL REPRESENTATIVE

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
10 / 30 / 2007

**Transaction ID:** C4130861

Amount of Each Receipt this Period  
2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Brian Ratner

Mailing Address 50 Public Sq  
STE 1600

City State Zip Code  
Cleveland OH 44113-2295

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RMS REAL ESTATE DEVELOPER

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 07 / 2007

**Transaction ID:** C4131116

Amount of Each Receipt this Period  
750.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Charles Ratner

Mailing Address 50 Public Sq  
STE 1600F

City State Zip Code  
Cleveland OH 44113-2202

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RMS REAL ESTATE DEVELOPER

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 05 / 2007

**Transaction ID:** C4131113

Amount of Each Receipt this Period  
750.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3800.00**

**TOTAL** This Period (last page this line number only) ..... ►



**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 / 197
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) James Ratner	Date of Receipt MM / DD / YYYY 12 / 05 / 2007
	Mailing Address 50 Public Sq STE 1600	<b>Transaction ID:</b> C4131112
	City Cleveland      State OH      Zip Code 44113-2295	Amount of Each Receipt this Period 750.00
	FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer RMS      Occupation REAL ESTATE DEVELOPER Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 750.00

<b>B.</b>	Full Name (Last, First, Middle Initial) KEVIN RATNER	Date of Receipt MM / DD / YYYY 12 / 07 / 2007
	Mailing Address 50 PUBLIC SQUARE, SUITE 1600	<b>Transaction ID:</b> C4131117
	City Cleveland      State OH      Zip Code 44113	Amount of Each Receipt this Period 850.00
	FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer RMS      Occupation REAL ESTATE DEVELOPER Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 850.00

<b>C.</b>	Full Name (Last, First, Middle Initial) Ronald Ratner	Date of Receipt MM / DD / YYYY 12 / 05 / 2007
	Mailing Address 50 Public Sq STE 1600	<b>Transaction ID:</b> C4131114
	City Cleveland      State OH      Zip Code 44113-2295	Amount of Each Receipt this Period 750.00
	FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer RMS      Occupation REAL ESTATE DEVELOPER Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 750.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>2350.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 82 / 197
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
<input type="checkbox"/> 14	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) Deborah Ratner Salzberg		Date of Receipt MM / DD / YYYY 12 / 07 / 2007
	Mailing Address 50 Public Sq STE 1600F		<b>Transaction ID:</b> C4131115
	City Cleveland	State OH	Zip Code 44113-2202
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 750.00
	Name of Employer RMS	Occupation REAL ESTATE DEVELOPER	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 750.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Bill Richardson		Date of Receipt MM / DD / YYYY 11 / 29 / 2007
	Mailing Address 222 W Historic Highway 66 Richardson's Trading Company		<b>Transaction ID:</b> C4131031
	City Gallup	State NM	Zip Code 87301-6354
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
	Name of Employer RICHARDSON TRADING CO & CASH PAWN, INC	Occupation OWNER	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 500.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) ASHLEY ROBEDA		Date of Receipt MM / DD / YYYY 11 / 14 / 2007
	Mailing Address 4615 TRUMBULL SE		<b>Transaction ID:</b> C4130934
	City Albuquerque	State NM	Zip Code 87108
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2300.00
	Name of Employer RAYLEE ADVANTAGE HOMES	Occupation PURCHASING	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 2300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>3550.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 / 197
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) RICHARD RODRIGUEZ		Date of Receipt MM / DD / YYYY 11 / 17 / 2007
	Mailing Address #30 BLACKBERRY LANE		<b>Transaction ID:</b> C4130982
	City Los Lunas	State NM	Zip Code 87031
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
	Name of Employer TOM GROWNEY EQUIPMENT	Occupation SALES MANAGER	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) BILL RODWAY		Date of Receipt MM / DD / YYYY 12 / 03 / 2007
	Mailing Address 604 CEDAR HILL RD NE		<b>Transaction ID:</b> C4131041
	City Albuquerque	State NM	Zip Code 87112
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
	Name of Employer SANDIA LEARNING CENTER	Occupation OWNER	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 100.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) James Rogers		Date of Receipt MM / DD / YYYY 12 / 05 / 2007
	Mailing Address 4407 Lomas Blvd NE		<b>Transaction ID:</b> C4131052
	City Albuquerque	State NM	Zip Code 87110
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 350.00
	Name of Employer SELF	Occupation DEVELOPER	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 350.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	700.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) WILLIAM ROGERS	Date of Receipt MM / DD / YYYY 11 / 11 / 2007
	Mailing Address 200 CRESCENT CT	<b>Transaction ID:</b> C4130927
	City State Zip Code Dallas TX 75201	Amount of Each Receipt this Period 2300.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation HALIFAX GROUP CHAIRMAN	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Tom Rojas	Date of Receipt MM / DD / YYYY 12 / 22 / 2007
	Mailing Address PO Box 25671	<b>Transaction ID:</b> C4131865
	City State Zip Code Albuquerque NM 87106	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation SELF ENTERTAINMENT/PROMOTER	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) JONATHAN ROSE	Date of Receipt MM / DD / YYYY 10 / 26 / 2007
	Mailing Address 33 KATONAH AVE	<b>Transaction ID:</b> C4130875
	City State Zip Code Katonah NY 10536	Amount of Each Receipt this Period 2300.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation JONATHAN ROSE COMPANIES PRESIDENT	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	5100.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 / 197
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) WILLIAM ROUSE	Date of Receipt MM / DD / YYYY 11 / 17 / 2007
	Mailing Address 935 CALLE CORONADO	<b>Transaction ID:</b> C4130969
	City State Zip Code Albuquerque NM 87123	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer ROUSE & ROUSE ASSOCIATES, INC.	Occupation BROKER	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) BENNY ROYBAL	Date of Receipt MM / DD / YYYY 12 / 05 / 2007
	Mailing Address P.O. BOX 2044	<b>Transaction ID:</b> C4131057
	City State Zip Code Española NM 87532	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer CUTLER REPAVING	Occupation CONTRACTOR	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 300.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) MIRIAM RUIZ	Date of Receipt MM / DD / YYYY 11 / 10 / 2007
	Mailing Address 1128 ATRISCO NW	<b>Transaction ID:</b> C4130908
	City State Zip Code Albuquerque NM 87105	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer N/A	Occupation HOMEMAKER	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1300.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 86 / 197  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

**A.** Full Name (Last, First, Middle Initial)  
THOMAS RYAN  
 Mailing Address 2800 RIO ORILLA LANE NW  
 City Albuquerque State NM Zip Code 87120  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ALBUQUERQUE PUBLIC SCHOOLS Occupation ASSISTANT SUPERINTENDENT FOR TECHNICAL EDUCATION  
 Receipt For: 2008 Election Cycle-to-Date  
 Primary    General  
 Other (specify) ▼  
 Date of Receipt 11 / 27 / 2007  
**Transaction ID:** C4131024  
 Amount of Each Receipt this Period 200.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
ROBERT SAHD  
 Mailing Address 10012 SAN BERNARDINO NE  
 City Albuquerque State NM Zip Code 87122  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF Occupation PRIVATE INVESTOR  
 Receipt For: 2008 Election Cycle-to-Date  
 Primary    General  
 Other (specify) ▼  
 Date of Receipt 11 / 09 / 2007  
**Transaction ID:** C4130905  
 Amount of Each Receipt this Period 1800.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
LARRY SAIZ  
 Mailing Address 13612 SUNSET CANYON NE  
 City Albuquerque State NM Zip Code 87111  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SAIZ TRUCKING & EARTHMOVING Occupation OWNER  
 Receipt For: 2008 Election Cycle-to-Date  
 Primary    General  
 Other (specify) ▼  
 Date of Receipt 11 / 15 / 2007  
**Transaction ID:** C4130955  
 Amount of Each Receipt this Period 2300.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **4300.00**  
**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) PAUL C. SAIZ		Date of Receipt MM / DD / YYYY 11 / 15 / 2007		
	Mailing Address 1658 CLIFFSIDE DR NW		<b>Transaction ID:</b> C4130954		
	City ALBUQUERQUE	State NM	Zip Code 87105-1017	Amount of Each Receipt this Period 2300.00	
	FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer RETIRED	Occupation RETIRED	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>B.</b>	Full Name (Last, First, Middle Initial) FRED SALLS		Date of Receipt MM / DD / YYYY 12 / 05 / 2007		
	Mailing Address 6500 CALLE REDONDA		<b>Transaction ID:</b> C4131063		
	City Albuquerque	State NM	Zip Code 87120	Amount of Each Receipt this Period 1000.00	
	FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer SALLS BROTHERS CONSTRUCTION	Occupation CONTRACTOR	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>C.</b>	Full Name (Last, First, Middle Initial) DEBRA SANCHEZ		Date of Receipt MM / DD / YYYY 11 / 14 / 2007		
	Mailing Address 1512 32ND CIRCLE		<b>Transaction ID:</b> C4130935		
	City Rio Rancho	State NM	Zip Code 87124	Amount of Each Receipt this Period 2300.00	
	FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer RAYLEE ADVANTAGE HOMES	Occupation ADMINISTRATOR	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	5600.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) Gilbert Sanchez		Date of Receipt MM / DD / YYYY 12 / 22 / 2007
	Mailing Address 5704 Central Ave SW		<b>Transaction ID:</b> C4131863
	City Albuquerque	State NM	Zip Code 87105-1850
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 600.00
	Name of Employer GILBERT SANCHEZ TAX SERVICES	Occupation CPA	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 600.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) MAX R. SANCHEZ		Date of Receipt MM / DD / YYYY 12 / 05 / 2007
	Mailing Address 920 DENTON STREET		<b>Transaction ID:</b> C4131075
	City Española	State NM	Zip Code 87532
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
	Name of Employer SELF	Occupation C.P.A.	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 150.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) Michele Sanchez		Date of Receipt MM / DD / YYYY 10 / 11 / 2007
	Mailing Address 7905 Marigold Dr NW		<b>Transaction ID:</b> C4130826
	City Albuquerque	State NM	Zip Code 87120-3279
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
	Name of Employer SELF	Occupation REALTOR	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 50.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	800.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	



**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 / 197
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) STEVEN M. SANCHEZ		Date of Receipt MM / DD / YYYY 12 / 05 / 2007		
	Mailing Address 2501 W. ZIA ROAD 5-203		<b>Transaction ID:</b> C4131046		
	City Santa Fe	State NM	Zip Code 87505	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer HOME RUN PIZZA	Occupation OWNER	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>B.</b>	Full Name (Last, First, Middle Initial) Jerry W Sandel		Date of Receipt MM / DD / YYYY 11 / 16 / 2007		
	Mailing Address 1570 SAGUARO TRAIL		<b>Transaction ID:</b> C4130963		
	City Farmington	State NM	Zip Code 87401	Amount of Each Receipt this Period 2300.00	
	FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer AZTEC OIL AND GAS CO.	Occupation OWNER	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>C.</b>	Full Name (Last, First, Middle Initial) ANTHONY SANTILLANES		Date of Receipt MM / DD / YYYY 10 / 11 / 2007		
	Mailing Address 2621 8th St NW		<b>Transaction ID:</b> C4130837		
	City ALBUQUERQUE	State NM	Zip Code 87107-1201	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer CITY OF ALBUQUERQUE	Occupation SPORTS COORDINATOR	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	2450.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 90 / 197  
(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

**A.**

Full Name (Last, First, Middle Initial)  
FRANKLIN SCHARGEL

Mailing Address 10209 JARASH PL NE

City State Zip Code  
Albuquerque NM 87122

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SCHARGEL CONSULTING OWNER

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
12 / 05 / 2007

**Transaction ID:** C4131086

Amount of Each Receipt this Period  
50.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
JOANNE SCHIABOR

Mailing Address 9400 DEL ARROYO AVE NE

City State Zip Code  
Albuquerque NM 87122

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SCOTT PATRICK HOMES OWNER

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
11 / 28 / 2007

**Transaction ID:** C4131025

Amount of Each Receipt this Period  
2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
KELLY SCHIABOR

Mailing Address 9400 DEL ARROYO AVE NE

City State Zip Code  
Albuquerque NM 87122

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
DUKE UNIVERSITY STUDENT

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
11 / 28 / 2007

**Transaction ID:** C4131030

Amount of Each Receipt this Period  
2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **4650.00**

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 / 197
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) SCOTT SCHIABOR	Date of Receipt MM / DD / YYYY 11 / 09 / 2007
	Mailing Address 9400 DEL ARROYO AVE NE	<b>Transaction ID:</b> C4130907
	City State Zip Code Albuquerque NM 87108	Amount of Each Receipt this Period 1800.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation SCOTT PATRICK HOMES OWNER	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1800.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) BETHANNE SCHIFFER	Date of Receipt MM / DD / YYYY 12 / 07 / 2007
	Mailing Address 1436 CATRON SE	<b>Transaction ID:</b> C4131970
	City State Zip Code Albuquerque NM 87123	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation THE GOLDEN WISH FUND EXECUTIVE DIRECTOR	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 100.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) GERTRUDE ZACHARY SCHMIDT	Date of Receipt MM / DD / YYYY 11 / 20 / 2007
	Mailing Address 1613 2ND NW	<b>Transaction ID:</b> C4131005
	City State Zip Code Albuquerque NM 87102	Amount of Each Receipt this Period 2300.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation GERTRUDE ZACHARY JEWELRY & ANTIQUE STO OWNER	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	4200.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 / 197
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) BARBARA SCHULER		Date of Receipt MM / DD / YYYY 12 / 05 / 2007		
	Mailing Address 35 MAGIC VALLEY DRIVE		<b>Transaction ID:</b> C4131101		
	City Sandia Park	State NM	Zip Code 87047	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer Information Requested		Occupation Information Requested			
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼			
		500.00			

<b>B.</b>	Full Name (Last, First, Middle Initial) JAMES SCHUMACHER		Date of Receipt MM / DD / YYYY 10 / 31 / 2007		
	Mailing Address 7412 LA JARA CT NE		<b>Transaction ID:</b> C4130876		
	City Albuquerque	State NM	Zip Code 87109	Amount of Each Receipt this Period 200.00	
	FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer SCARPAS/COOPERAGE		Occupation OWNER			
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼			
		200.00			

<b>C.</b>	Full Name (Last, First, Middle Initial) JANET SCIARRILLO		Date of Receipt MM / DD / YYYY 12 / 05 / 2007		
	Mailing Address 8300 HILLSBORO CT NW		<b>Transaction ID:</b> C4131091		
	City Albuquerque	State NM	Zip Code 87120	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer THE GARAGE		Occupation OWNER			
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼			
		500.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1200.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 / 197
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) ERIC SEDILLO-JEFFRIES	Date of Receipt MM / DD / YYYY 10 / 09 / 2007
	Mailing Address 3312 CALLE DE DANIEL NW	<b>Transaction ID:</b> C4130823
	City State Zip Code Albuquerque NM 87104	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation ERIC SEDILLO-JEFFRIES, LLC OWNER	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 300.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Lawrence Segura	Date of Receipt MM / DD / YYYY 11 / 30 / 2007
	Mailing Address 2904 Carlota Rd NW	<b>Transaction ID:</b> C4131032
	City State Zip Code Albuquerque NM 87104-2806	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation CITY OF ALBUQUERQUE SUPERVISOR	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 100.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Steven Seligman	Date of Receipt MM / DD / YYYY 12 / 04 / 2007
	Mailing Address 12124 Hickory Ct NE	<b>Transaction ID:</b> C4131130
	City State Zip Code Albuquerque NM 87111-6267	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation REMINGTON ADVISORS, INC. PRESIDENT	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 200.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	600.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 / 197
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) Dan Serrano		Date of Receipt MM / DD / YYYY 12 / 05 / 2007		
	Mailing Address PO Box 6024		<b>Transaction ID:</b> C4131110		
	City Albuquerque	State NM	Zip Code 87197	Amount of Each Receipt this Period 1500.00	
	FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer SERRANO & SON'S CONSTRUCT-ORS, LLC		Occupation OWNER			
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1500.00			

<b>B.</b>	Full Name (Last, First, Middle Initial) HARISH SHARMA		Date of Receipt MM / DD / YYYY 11 / 12 / 2007		
	Mailing Address 11412 BRUSSELS AVE NE		<b>Transaction ID:</b> C4130926		
	City Albuquerque	State NM	Zip Code 87111	Amount of Each Receipt this Period 501.00	
	FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer DEPARTMENT OF ENERGY-NNSA		Occupation ENGINEER			
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 501.00			

<b>C.</b>	Full Name (Last, First, Middle Initial) KENNETH SHEER		Date of Receipt MM / DD / YYYY 10 / 10 / 2007		
	Mailing Address 8360 W Sahara Ave Ste 230		<b>Transaction ID:</b> C4130827		
	City Las Vegas	State NV	Zip Code 89117-8945	Amount of Each Receipt this Period 1150.00	
	FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer COVINGTON CAPITAL		Occupation REAL ESTATE DEVELOPER			
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1150.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	3151.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 95 / 197  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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)  
New Mexicans for Marty

**A.** Full Name (Last, First, Middle Initial)  
CHUCK SHELDON  
Mailing Address 1701 MOON NE  
City Albuquerque State NM Zip Code 87110  
FEC ID number of contributing federal political committee. **C**  
Name of Employer THE SHELDON COMPANY Occupation OWNER  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 500.00  
Date of Receipt 12 / 04 / 2007  
Transaction ID: C4131042  
Amount of Each Receipt this Period 500.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
D.S. SMOAK  
Mailing Address 28 DON QUIJOTE CT  
City Albuquerque State NM Zip Code 87122  
FEC ID number of contributing federal political committee. **C**  
Name of Employer COLDWELL-LAS COLINAS Occupation BANKER  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 2300.00  
Date of Receipt 11 / 11 / 2007  
Transaction ID: C4130928  
Amount of Each Receipt this Period 2300.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
ADEL A. SOKKARY  
Mailing Address 6708 LEANDER AVE NE  
City Albuquerque State NM Zip Code 87109  
FEC ID number of contributing federal political committee. **C**  
Name of Employer RETIRED Occupation RETIRED  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 500.00  
Date of Receipt 12 / 03 / 2007  
Transaction ID: C4131034  
Amount of Each Receipt this Period 500.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 3300.00  
**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 96 / 197  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

**A.** Full Name (Last, First, Middle Initial)  
ROCK SOUTHWAY  
Mailing Address 117 WHITE PINE DR  
City Alamosa State CO Zip Code 81101  
FEC ID number of contributing federal political committee. **C**  
Name of Employer SOUTHWAY CONSTRUCTION Occupation OWNER  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 2300.00  
Date of Receipt 12 / 04 / 2007  
Transaction ID: C4131128  
Amount of Each Receipt this Period 2300.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
TRINETTE L. SOUTHWAY  
Mailing Address 117 WHITE PINE DR  
City Alamosa State CO Zip Code 81101  
FEC ID number of contributing federal political committee. **C**  
Name of Employer RETIRED Occupation RETIRED  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 2300.00  
Date of Receipt 12 / 04 / 2007  
Transaction ID: C4131129  
Amount of Each Receipt this Period 2300.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Linda Stover  
Mailing Address 1412 Dakota St NE  
City Albuquerque State NM Zip Code 87110  
FEC ID number of contributing federal political committee. **C**  
Name of Employer RETIRED Occupation RETIRED  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 2300.00  
Date of Receipt 10 / 09 / 2007  
Transaction ID: C4129543  
Amount of Each Receipt this Period 2300.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 6900.00  
**TOTAL** This Period (last page this line number only) ..... ▶



**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 97 / 197  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

**A.**

Full Name (Last, First, Middle Initial)  
KAREN STRICKHOLM

Mailing Address 720 Mesilla Rd

City State Zip Code  
Santa Fe NM 87501-2473

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Occupation Information Requested  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 25.00

Date of Receipt  
MM / DD / YYYY  
12 / 05 / 2007

**Transaction ID:** C4131965

Amount of Each Receipt this Period  
25.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
ANNA B. SU

Mailing Address 7810 COVINGTON PARKWAY

City State Zip Code  
Amarillo TX 79121

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Occupation Information Requested  
AZUMA RESTAURANT OWNER  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 2300.00

Date of Receipt  
MM / DD / YYYY  
11 / 20 / 2007

**Transaction ID:** C4130995

Amount of Each Receipt this Period  
2300.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
JILL SWEENEY

Mailing Address 7424 ANKARA RD NE

City State Zip Code  
Albuquerque NM 87122

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Occupation Information Requested  
BROWNSTEIN, HYATT, FARBER, SCHRECK, PC ATTORNEY  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 840.00

Date of Receipt  
MM / DD / YYYY  
12 / 07 / 2007

**Transaction ID:** C4131968

Amount of Each Receipt this Period  
840.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3165.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 98 / 197  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

**A.** Full Name (Last, First, Middle Initial)  
Barbara L. Taylor  
Mailing Address 6301 Tauton PI NW  
City Albuquerque State NM Zip Code 87120-6230  
FEC ID number of contributing federal political committee. **C**  
Name of Employer City of Albuquerque Occupation manager  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 100.00  
Date of Receipt 11 / 17 / 2007  
**Transaction ID:** C4130962  
Amount of Each Receipt this Period 100.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
KIUTUS TECUMSEH  
Mailing Address 2704 VALENCIA DR NE  
City ALBUQUERQUE State NM Zip Code 87110-3212  
FEC ID number of contributing federal political committee. **C**  
Name of Employer RETIRED Occupation RETIRED  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 200.00  
Date of Receipt 11 / 13 / 2007  
**Transaction ID:** C4130948  
Amount of Each Receipt this Period 200.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
LAWRENCE TORRES  
Mailing Address 1924 CHEROKEE RD NW  
City Albuquerque State NM Zip Code 87107  
FEC ID number of contributing federal political committee. **C**  
Name of Employer CITY OF ALBUQUERQUE Occupation MANAGER  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 100.00  
Date of Receipt 12 / 05 / 2007  
**Transaction ID:** C4131127  
Amount of Each Receipt this Period 100.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 400.00  
**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 / 197
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) Charity Townsend	Date of Receipt MM / DD / YYYY 11 / 11 / 2007
	Mailing Address 28 Don Quixote Ct	<b>Transaction ID:</b> C4130923
	City State Zip Code Corrales NM 87048	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer SELF Occupation VOLUNTEER Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 250.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) COLLEEN TROUT	Date of Receipt MM / DD / YYYY 11 / 20 / 2007
	Mailing Address 10409 TUNA PLACE NW	<b>Transaction ID:</b> C4131002
	City State Zip Code Albuquerque NM 87114	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer IDEAL IMAGE Occupation RECEPTIONIST Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 200.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) ROY TURPEN	Date of Receipt MM / DD / YYYY 10 / 11 / 2007
	Mailing Address 3412 REINA DR NE	<b>Transaction ID:</b> C4130828
	City State Zip Code ALBUQUERQUE NM 87111-5042	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer CITY OF ALBUQUERQUE Occupation DEPUTY DIRECTOR Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 50.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	500.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 100 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) CONNIE VASQUEZ		Date of Receipt MM / DD / YYYY 10 / 31 / 2007		
	Mailing Address 12301 RANCHITOS		<b>Transaction ID:</b> C4130886		
	City Albuquerque	State NM	Zip Code 87122	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer N/A	Occupation RETIRED	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>B.</b>	Full Name (Last, First, Middle Initial) Douglas Vaughn		Date of Receipt MM / DD / YYYY 11 / 20 / 2007		
	Mailing Address 11708 ZINFANDEL AVE NE		<b>Transaction ID:</b> C4131020		
	City Albuquerque	State NM	Zip Code 87109-3345	Amount of Each Receipt this Period 2300.00	
	FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer VAUGHN COMPANY REALTORS	Occupation OWNER	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>C.</b>	Full Name (Last, First, Middle Initial) Douglas Vaughn		Date of Receipt MM / DD / YYYY 11 / 20 / 2007		
	Mailing Address 11708 ZINFANDEL AVE NE		<b>Transaction ID:</b> C4131021		
	City Albuquerque	State NM	Zip Code 87109-3345	Amount of Each Receipt this Period 700.00	
	FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer VAUGHN COMPANY REALTORS	Occupation OWNER	Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	3100.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 101 / 197
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) JOE VELASQUEZ	Date of Receipt MM / DD / YYYY 11 / 20 / 2007
	Mailing Address 1617 INLET CT	<b>Transaction ID:</b> C4130994
	City Reston State VA Zip Code 20190	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer VELASQUEZ & ASSOCIATES Occupation OWNER Receipt For: 2008 Election Cycle-to-Date <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) ANTHONY VILLEGAS	Date of Receipt MM / DD / YYYY 11 / 08 / 2007
	Mailing Address P.O. BOX 12275	<b>Transaction ID:</b> C4130920
	City Albuquerque State NM Zip Code 87195	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer COYOTE GRAVEL Occupation PRESIDENT Receipt For: 2008 Election Cycle-to-Date <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1000.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) MARK R. VILLEGAS	Date of Receipt MM / DD / YYYY 11 / 17 / 2007
	Mailing Address P.O. BOX 72764	<b>Transaction ID:</b> C4130973
	City Albuquerque State NM Zip Code 87195	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer EAGLE SAND & GRAVEL, COYOTE CONCRETE Occupation OWNER Receipt For: 2008 Election Cycle-to-Date <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>2500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 102 / 197
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) Jerry Wade		Date of Receipt MM / DD / YYYY 11 / 14 / 2007		
	Mailing Address 4420 Tower Rd SW		<b>Transaction ID:</b> C4130953		
	City Albuquerque	State NM	Zip Code 87121-3422	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer ARTISTIC HOMES, INC.	Occupation OWNER	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>B.</b>	Full Name (Last, First, Middle Initial) Charles K. Walker		Date of Receipt MM / DD / YYYY 12 / 05 / 2007		
	Mailing Address 4512 Harpers Ferry Ct NW		<b>Transaction ID:</b> C4131109		
	City Albuquerque	State NM	Zip Code 87120	Amount of Each Receipt this Period 1000.00	
	FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer TKO ADVERTISING	Occupation OWNER	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>C.</b>	Full Name (Last, First, Middle Initial) BONNIE WEINSTEIN		Date of Receipt MM / DD / YYYY 10 / 11 / 2007		
	Mailing Address 1190 LAUREL LOOP NE		<b>Transaction ID:</b> C4130814		
	City ALBUQUERQUE	State NM	Zip Code 87122	Amount of Each Receipt this Period 2300.00	
	FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer N/A	Occupation None/Homemaker	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	3800.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 103 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) GERALD WEINSTEIN	Date of Receipt MM / DD / YYYY 11 / 15 / 2007
	Mailing Address 4012 BIG SKY DR	<b>Transaction ID:</b> C4130940
	City State Zip Code Albuquerque NM 87111	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation N/A RETIRED	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 100.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Michael Weinstein	Date of Receipt MM / DD / YYYY 10 / 11 / 2007
	Mailing Address 1190 Laurel Loop NE	<b>Transaction ID:</b> C4130813
	City State Zip Code Albuquerque NM 87122-1184	Amount of Each Receipt this Period 2300.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation MILITARY RELIGIOUS FREEDOM FOUNDATION PRESIDENT	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) GERALD WENDEL	Date of Receipt MM / DD / YYYY 12 / 05 / 2007
	Mailing Address 8360 W Sahara Ave Ste 230	<b>Transaction ID:</b> C4131095
	City State Zip Code Las Vegas NV 89117-8945	Amount of Each Receipt this Period 1150.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation COVINGTON CAPITAL CHAIRMAN OF BOARD	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1150.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	3550.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 104 / 197  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

**A.** Full Name (Last, First, Middle Initial)  
PAMELA WHITNEY  
Mailing Address 66 DON QUIJOTE CT  
City Corrales State NM Zip Code 87048  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation UNEMPLOYED  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 250.00  
Date of Receipt 11 / 12 / 2007  
Transaction ID: C4130930  
Amount of Each Receipt this Period 250.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
REX WILSON  
Mailing Address 4619 INSPIRATION DRIVE SE  
City Albuquerque State NM Zip Code 87108  
FEC ID number of contributing federal political committee. **C**  
Name of Employer WILSON LUPTON GROUP, INC. Occupation PRESIDENT  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 1000.00  
Date of Receipt 12 / 05 / 2007  
Transaction ID: C4131111  
Amount of Each Receipt this Period 1000.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
JACOB M WINOWICH  
Mailing Address 7408 Terry Ct NE  
City Albuquerque State NM Zip Code 87110-2720  
FEC ID number of contributing federal political committee. **C**  
Name of Employer CITY OF ALBUQUERQUE Occupation ASSISTANT TO THE MAYOR  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 50.00  
Date of Receipt 12 / 24 / 2007  
Transaction ID: C4131867  
Amount of Each Receipt this Period 50.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1300.00  
**TOTAL** This Period (last page this line number only) ..... ►



**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 105 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) NICHOLAS WINOWICH		Date of Receipt MM / DD / YYYY 11 / 26 / 2007		
	Mailing Address 2003 HUBER ROAD		<b>Transaction ID:</b> C4131010		
	City Charleston	State WV	Zip Code 25314	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer RETIRED	Occupation RETIRED	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>B.</b>	Full Name (Last, First, Middle Initial) ROBERT B. WOOD		Date of Receipt MM / DD / YYYY 12 / 05 / 2007		
	Mailing Address 4901 CREEK PL NW		<b>Transaction ID:</b> C4131073		
	City Albuquerque	State NM	Zip Code 87114	Amount of Each Receipt this Period 1000.00	
	FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer ALBUQUERQUE ASPHALT	Occupation PRESIDENT	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>C.</b>	Full Name (Last, First, Middle Initial) GARY YOUNG		Date of Receipt MM / DD / YYYY 10 / 11 / 2007		
	Mailing Address 532 94th St SW		<b>Transaction ID:</b> C4130834		
	City Albuquerque	State NM	Zip Code 87121-9516	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
	Name of Employer UNITED STATES FOREST SERVICE	Occupation ACCOUNTANT	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 106 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) JIM ZANIOS		Date of Receipt MM / DD / YYYY 10 / 30 / 2007
	Mailing Address 6505 AVENIDA LA CUCHILLA NW		<b>Transaction ID:</b> C4130858
	City ALBUQUERQUE	State NM	Zip Code 87107
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
	Name of Employer ZANIOS FOODS	Occupation OWNER	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Brent Blackaby		Date of Receipt MM / DD / YYYY 11 / 16 / 2007
	Mailing Address 744 Grizzly Peak Blvd		<b>Transaction ID:</b> C4131827A
	City Berkeley	State CA	Zip Code 94708
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
	Name of Employer Blackrock Associates	Occupation Consultant	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 32.00		

\* Earmarked Contribution:  
See Below

<b>C.</b>	Full Name (Last, First, Middle Initial) ActBlue		Date of Receipt MM / DD / YYYY 11 / 07 / 2007
	Mailing Address PO Box 390728		<b>Transaction ID:</b> C4131827AB
	City Cambridge	State MA	Zip Code 02139-0008
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
	Name of Employer	Occupation Conduit total: 3,000.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ .00		

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	525.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 107 / 197  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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)  
New Mexicans for Marty

**A.** Full Name (Last, First, Middle Initial)  
Ryan Doyle

Mailing Address 1811 S. Madison St

City State Zip Code  
Denver CO 80210

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Champps Restaurant and Bar Server

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
10 / 30 / 2007

**Transaction ID:** C4131836A

Amount of Each Receipt this Period  
25.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

\* Earmarked Contribution:  
See Below

**B.** Full Name (Last, First, Middle Initial)  
ActBlue

Mailing Address PO Box 390728

City State Zip Code  
Cambridge MA 02139-0008

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Conduit total: 3,000.00

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
11 / 09 / 2007

**Transaction ID:** C4131836AB

Amount of Each Receipt this Period  
25.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**C.** Full Name (Last, First, Middle Initial)  
JULIAN GRACE

Mailing Address P.O. BOX 2245

City State Zip Code  
SANTA FE NM 87504

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
11 / 26 / 2007

**Transaction ID:** C4131960A

Amount of Each Receipt this Period  
50.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

\* Earmarked Contribution:  
See Below

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **75.00**

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 108 / 197
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) ActBlue		Date of Receipt MM / DD / YYYY 12 / 05 / 2007
	Mailing Address PO Box 390728		<b>Transaction ID:</b> C4131960AB
	City Cambridge	State MA	Zip Code 02139-0008
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
	Name of Employer Occupation Conduit total: 3,000.00	Election Cycle-to-Date .00	

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

<b>B.</b>	Full Name (Last, First, Middle Initial) Kathleen Davison Lebeck		Date of Receipt MM / DD / YYYY 11 / 09 / 2007
	Mailing Address 1006 Tramway Lane NE		<b>Transaction ID:</b> C4131832A
	City Albuquerque	State NM	Zip Code 87122
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
	Name of Employer self Occupation attorney Conduit total: 3,000.00	Election Cycle-to-Date 500.00	

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
 \* Earmarked Contribution:  
 See Below

<b>C.</b>	Full Name (Last, First, Middle Initial) ActBlue		Date of Receipt MM / DD / YYYY 11 / 16 / 2007
	Mailing Address PO Box 390728		<b>Transaction ID:</b> C4131832AB
	City Cambridge	State MA	Zip Code 02139-0008
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
	Name of Employer Occupation Conduit total: 3,000.00	Election Cycle-to-Date .00	

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**  
 Note: Above Contribution earmarked through this organization.

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	500.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 109 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) Reuben Montes	Date of Receipt MM / DD / YYYY 11 / 12 / 2007
	Mailing Address 3036 Cliff Palace	<b>Transaction ID:</b> C4131833A
	City State Zip Code Santa Fe NM 87507	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Federal Government Rural Development Administrator	<b>* Earmarked Contribution:</b> See Below
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 50.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) ActBlue	Date of Receipt MM / DD / YYYY 11 / 16 / 2007
	Mailing Address PO Box 390728	<b>Transaction ID:</b> C4131833AB
	City State Zip Code Cambridge MA 02139-0008	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Conduit total: 3,000.00	<b>[MEMO ITEM]</b> Note: Above Contribution earmarked through this organization.
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ .00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Daniel Najjar	Date of Receipt MM / DD / YYYY 11 / 07 / 2007
	Mailing Address 2594 Calle Delfino	<b>Transaction ID:</b> C4131831A
	City State Zip Code Santa Fe NM 87505	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Virtue, Najjar & Brown PC Attorney	<b>* Earmarked Contribution:</b> See Below
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>550.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 110 / 197  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

**A.**

Full Name (Last, First, Middle Initial)  
ActBlue

Mailing Address PO Box 390728

City State Zip Code  
Cambridge MA 02139-0008

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Conduit total: 3,000.00

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
.00

Date of Receipt  
MM / DD / YYYY  
11 / 16 / 2007

**Transaction ID:** C4131831AB

Amount of Each Receipt this Period  
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**B.**

Full Name (Last, First, Middle Initial)  
Matthew Padilla

Mailing Address 10101 Grosvenor Pl  
Unit 1309

City State Zip Code  
N Bethesda MD 20852

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
none Student

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
100.00

Date of Receipt  
MM / DD / YYYY  
11 / 18 / 2007

**Transaction ID:** C4131829A

Amount of Each Receipt this Period  
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**\* Earmarked Contribution:  
See Below**

**C.**

Full Name (Last, First, Middle Initial)  
ActBlue

Mailing Address PO Box 390728

City State Zip Code  
Cambridge MA 02139-0008

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Conduit total: 3,000.00

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
.00

Date of Receipt  
MM / DD / YYYY  
11 / 07 / 2007

**Transaction ID:** C4131829AB

Amount of Each Receipt this Period  
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **100.00**

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 111 / 197  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

**A.** Full Name (Last, First, Middle Initial)  
DEBRA SAINE  
Mailing Address 9217 Ironshore N.E.  
City Albuquerque State NM Zip Code 87111  
FEC ID number of contributing federal political committee. **C**  
Name of Employer City of Albuquerque Occupation Manager  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 250.00  
Date of Receipt 11 / 19 / 2007  
Transaction ID: C4131825A  
Amount of Each Receipt this Period 250.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
\* Earmarked Contribution: See Below

**B.** Full Name (Last, First, Middle Initial)  
ActBlue  
Mailing Address PO Box 390728  
City Cambridge State MA Zip Code 02139-0008  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation Conduit total: 3,000.00  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ .00  
Date of Receipt 11 / 20 / 2007  
Transaction ID: C4131825AB  
Amount of Each Receipt this Period 250.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**C.** Full Name (Last, First, Middle Initial)  
David Soherr-Hadwiger  
Mailing Address 1604 Lafayette NE  
City Albuquerque State NM Zip Code 87106  
FEC ID number of contributing federal political committee. **C**  
Name of Employer New Mexico Highlands University Occupation Professor  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 250.00  
Date of Receipt 11 / 20 / 2007  
Transaction ID: C4131826A  
Amount of Each Receipt this Period 250.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
\* Earmarked Contribution: See Below

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 500.00  
**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 112 / 197
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
<input type="checkbox"/> 14	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) ActBlue	Date of Receipt MM / DD / YYYY 11 / 20 / 2007
	Mailing Address PO Box 390728	<b>Transaction ID:</b> C4131826AB
	City State Zip Code Cambridge MA 02139-0008	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Conduit total: 3,000.00	<b>[MEMO ITEM]</b> Note: Above Contribution earmarked through this organization.
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ .00	

<b>B.</b>	Full Name (Last, First, Middle Initial) alan swain	Date of Receipt MM / DD / YYYY 10 / 11 / 2007
	Mailing Address 3425 Anderson Ave SE Apt C	<b>Transaction ID:</b> C4131818A
	City State Zip Code Albuquerque NM 87106	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Location Manager	<b>* Earmarked Contribution: See Below</b>
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) ActBlue	Date of Receipt MM / DD / YYYY 12 / 10 / 2007
	Mailing Address PO Box 390728	<b>Transaction ID:</b> C4131818AB
	City State Zip Code Cambridge MA 02139-0008	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Conduit total: 3,000.00	<b>[MEMO ITEM]</b> Note: Above Contribution earmarked through this organization.
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ .00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>250.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	



**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 113 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

**A.**

Full Name (Last, First, Middle Initial) alan swain		Date of Receipt MM / DD / YYYY 11 / 16 / 2007
Mailing Address 3425 Anderson Ave SE Apt C		<b>Transaction ID:</b> C4131828A
City Albuquerque	State NM	Zip Code 87106
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 0.00
Name of Employer Sony Films	Occupation Location Manager	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

\* Earmarked Contribution:  
See Below

**B.**

Full Name (Last, First, Middle Initial) ActBlue		Date of Receipt MM / DD / YYYY 11 / 07 / 2007
Mailing Address PO Box 390728		<b>Transaction ID:</b> C4131828AB
City Cambridge	State MA	Zip Code 02139-0008
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 0.00
Name of Employer	Occupation Conduit total: 3,000.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ .00	

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**C.**

Full Name (Last, First, Middle Initial) Eric Taylor		Date of Receipt MM / DD / YYYY 11 / 01 / 2007
Mailing Address 1746 spreckels lane		<b>Transaction ID:</b> C4131837A
City Redondo Beach	State CA	Zip Code 90278
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer self	Occupation Asset Manager	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

\* Earmarked Contribution:  
See Below

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 114 / 197
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
<input type="checkbox"/> 14	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

A.

Full Name (Last, First, Middle Initial) ActBlue		Date of Receipt MM / DD / YYYY 11 / 09 / 2007
Mailing Address PO Box 390728		Transaction ID: C4131837AB
City Cambridge	State MA	Zip Code 02139-0008
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer	Occupation Conduit total: 3,000.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <b>[MEMO ITEM]</b> Note: Above Contribution earmarked through this organization.
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ .00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	283911.10

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 115 / 197
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

**A.**

Full Name (Last, First, Middle Initial)  
UNION SAVINGS BANK

Mailing Address 1500 Mercantile Ave NE

City Albuquerque State NM Zip Code 87107-7000

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 85.69

Date of Receipt 11 / 02 / 2007

**Transaction ID: C4133324**

Amount of Each Receipt this Period 80.69

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
UNION SAVINGS BANK

Mailing Address 1500 Mercantile Ave NE

City Albuquerque State NM Zip Code 87107-7000

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 85.69

Date of Receipt 12 / 11 / 2007

**Transaction ID: C4133325**

Amount of Each Receipt this Period 5.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	85.69
<b>TOTAL</b> This Period (last page this line number only) .....	▶	85.69

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

PAGE 116 / 197

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

**A.**

Full Name (Last, First, Middle Initial)  
AC LARRY R. WALKUP ACQUATIC CENTER

**Transaction ID:** D154568

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	6	/	2	0	0	7

Mailing Address 2760 CANYON ROAD

Amount of Each Disbursement this Period

40.00
-------

City Los Alamos State NM Zip Code 87544

Purpose of Disbursement  
ROOM RENTAL-INDOOR

007  
Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

**B.**

Full Name (Last, First, Middle Initial)  
ACT BLUE

**Transaction ID:** D154936

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	0	7

Mailing Address P.O. BOX 390728

Amount of Each Disbursement this Period

118.53
--------

City Cambridge State MA Zip Code 02139

Purpose of Disbursement  
CREDIT CARD PROCESSING FEES

001  
Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

**C.**

Full Name (Last, First, Middle Initial)  
ADVOCACY, INC

**Transaction ID:** D154626

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	2	/	2	0	0	7

Mailing Address 1001 G St NW  
Ste 460A

Amount of Each Disbursement this Period

250.00
--------

City Washington State DC Zip Code 20001-4514

Purpose of Disbursement  
START AND CANCEL THE APPEND FOR WEBSITE

003  
Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

408.53

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

PAGE 117 / 197

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

**A. ALBUQUERQUE HOME AND LIFESTYLE SHOW**

Full Name (Last, First, Middle Initial)

Mailing Address 34 SANDIA HEIGHTS NE

City ALBUQUERQUE State NM Zip Code 87122

Purpose of Disbursement  
BOOTH RENTAL

Candidate Name

007  
Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

Transaction ID: D154554

Date of Disbursement

11 / 11 / 2007

Amount of Each Disbursement this Period

400.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**B. ALBUQUERQUE PUBLISHING COMPANY**

Full Name (Last, First, Middle Initial)

Mailing Address 777 JEFFERSON ST NE

City Albuquerque State NM Zip Code 87109

Purpose of Disbursement  
SUBSCRIPTION

Candidate Name

001  
Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

Transaction ID: D154581

Date of Disbursement

11 / 28 / 2007

Amount of Each Disbursement this Period

76.50

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**C. ALBUQUERQUE PUBLISHING COMPANY**

Full Name (Last, First, Middle Initial)

Mailing Address 777 JEFFERSON ST NE

City Albuquerque State NM Zip Code 87109

Purpose of Disbursement  
SUBSCRIPTION

Candidate Name

001  
Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

Transaction ID: D154582

Date of Disbursement

11 / 28 / 2007

Amount of Each Disbursement this Period

20.25

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

496.75

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

PAGE 118 / 197

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

A.	Full Name (Last, First, Middle Initial) ALLTELL	Transaction ID: D154524 Date of Disbursement 10 / 24 / 2007
	Mailing Address ALBUQ	
	City Albuquerque State NM Zip Code 87107	Amount of Each Disbursement this Period 1600.00
	Purpose of Disbursement PHONE EQUIPMENT & SERVICE Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type

B.	Full Name (Last, First, Middle Initial) AMY GONZALES	Transaction ID: D154631 Date of Disbursement 12 / 12 / 2007
	Mailing Address 6136 ALDERMAN DR NW	
	City ALBUQUERQUE State NM Zip Code 87120	Amount of Each Disbursement this Period 448.89
	Purpose of Disbursement CATERING COSTS Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		007 Category/Type

C.	Full Name (Last, First, Middle Initial) ANTHONY SEGURA	Transaction ID: D154557 Date of Disbursement 11 / 14 / 2007
	Mailing Address 200 SELWAY PL NW	
	City Albuquerque State NM Zip Code 87120	Amount of Each Disbursement this Period 176.00
	Purpose of Disbursement OFFICE REMODELING Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2224.89
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

PAGE 119 / 197

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

**A.**

Full Name (Last, First, Middle Initial)  
AQUILA TRAVEL

**Transaction ID:** D154609

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	6		2	0	0	7

Mailing Address 8415 WASHINGTON PLACE NE

Amount of Each Disbursement this Period

383.10
--------

City State Zip Code  
Albuquerque NM 87113

Purpose of Disbursement  
AIRLINE TICKETS

002  
Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

**B.**

Full Name (Last, First, Middle Initial)  
AQUILA TRAVEL

**Transaction ID:** D154610

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	6		2	0	0	7

Mailing Address 8415 WASHINGTON PLACE NE

Amount of Each Disbursement this Period

240.80
--------

City State Zip Code  
Albuquerque NM 87113

Purpose of Disbursement  
AIRLINE TICKETS

002  
Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

**C.**

Full Name (Last, First, Middle Initial)  
ARTICULATED MAN

**Transaction ID:** D154623

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	2		2	0	0	7

Mailing Address 1508 W Sunnyside Ave

Amount of Each Disbursement this Period

5875.00
---------

City State Zip Code  
Chicago IL 60640-5906

Purpose of Disbursement  
WEB DESIGN & DEVELOPMENT FINAL PYMT

004  
Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

6498.90
---------

**TOTAL** This Period (last page this line number only) ..... ►

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**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

PAGE 120 / 197

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) <b>ARTICULATED MAN</b> <hr/> Mailing Address 1508 W Sunnyside Ave <hr/> City Chicago State IL Zip Code 60640-5906 <hr/> Purpose of Disbursement WEB DESIGN & DEVELOPMENT FEE Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D154552 Date of Disbursement 11 / 11 / 2007 <hr/> Amount of Each Disbursement this Period 5500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B.</b>	Full Name (Last, First, Middle Initial) <b>AZUCUNA SERRANO</b> <hr/> Mailing Address 9600 CENTRAL AVE SW <hr/> City ALBUQUERQUE State NM Zip Code 87121 <hr/> Purpose of Disbursement CATERING COSTS Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D154646 Date of Disbursement 12 / 28 / 2007 <hr/> Amount of Each Disbursement this Period 175.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>C.</b>	Full Name (Last, First, Middle Initial) <b>BANK CARD USA MERCHANT SERVICES</b> <hr/> Mailing Address 5701 Lindero Canyon Rd Bldg 3 <hr/> City Westlake Village State CA Zip Code 91362-4060 <hr/> Purpose of Disbursement CREDIT CARD PROCESSING FEES Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D155939 Date of Disbursement 11 / 26 / 2007 <hr/> Amount of Each Disbursement this Period 0.02 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>5675.02</b>
<b>TOTAL</b> This Period (last page this line number only) .....	



**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

PAGE 121 / 197

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

A.	Full Name (Last, First, Middle Initial) <b>BANK CARD USA MERCHANT SERVICES</b>	<b>Transaction ID: D155944</b>
	Mailing Address 5701 Lindero Canyon Rd Bldg 3	Date of Disbursement 12 / 04 / 2007
	City Westlake Village State CA Zip Code 91362-4060	Amount of Each Disbursement this Period 0.26
	Purpose of Disbursement CREDIT CARD PROCESSING FEE Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	003 Category/Type
	State: District:	

B.	Full Name (Last, First, Middle Initial) <b>BANK CARD USA MERCHANT SERVICES</b>	<b>Transaction ID: D155945</b>
	Mailing Address 5701 Lindero Canyon Rd Bldg 3	Date of Disbursement 12 / 04 / 2007
	City Westlake Village State CA Zip Code 91362-4060	Amount of Each Disbursement this Period 6.83
	Purpose of Disbursement CREDIT CARD PROCESSING FEE Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	003 Category/Type
	State: District:	

C.	Full Name (Last, First, Middle Initial) <b>BANK CARD USA MERCHANT SERVICES</b>	<b>Transaction ID: D155946</b>
	Mailing Address 5701 Lindero Canyon Rd Bldg 3	Date of Disbursement 12 / 04 / 2007
	City Westlake Village State CA Zip Code 91362-4060	Amount of Each Disbursement this Period 38.32
	Purpose of Disbursement CREDIT CARD PROCESSING Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	003 Category/Type
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>45.41</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

PAGE 122 / 197

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

A.	Full Name (Last, First, Middle Initial) <b>BANK CARD USA MERCHANT SERVICES</b>	Transaction ID: D155947 Date of Disbursement 12 / 05 / 2007
	Mailing Address 5701 Lindero Canyon Rd Bldg 3	Amount of Each Disbursement this Period 1.75
	City Westlake Village State CA Zip Code 91362-4060	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement CREDIT CARD PROCESSING FEE Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		003 Category/Type

B.	Full Name (Last, First, Middle Initial) <b>BANK CARD USA MERCHANT SERVICES</b>	Transaction ID: D155948 Date of Disbursement 12 / 07 / 2007
	Mailing Address 5701 Lindero Canyon Rd Bldg 3	Amount of Each Disbursement this Period 68.50
	City Westlake Village State CA Zip Code 91362-4060	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement CREDIT CARD PROCESSING FEE Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		003 Category/Type

C.	Full Name (Last, First, Middle Initial) <b>BANK CARD USA MERCHANT SERVICES</b>	Transaction ID: D155949 Date of Disbursement 12 / 11 / 2007
	Mailing Address 5701 Lindero Canyon Rd Bldg 3	Amount of Each Disbursement this Period 82.72
	City Westlake Village State CA Zip Code 91362-4060	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement CREDIT CARD PROCESSING FEES Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		003 Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	152.97
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

**A.**

Full Name (Last, First, Middle Initial)  
**BANK CARD USA MERCHANT SERVICES**

**Transaction ID: D155950**

Date of Disbursement

Mailing Address 5701 Lindero Canyon Rd  
Bldg 3

/   /

City State Zip Code  
Westlake Village CA 91362-4060

Amount of Each Disbursement this Period

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Category/  
Type

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

**B.**

Full Name (Last, First, Middle Initial)  
**BERNALILLO COUNTY -COUNTY CLERK**

**Transaction ID: D154537**

Date of Disbursement

Mailing Address ONE CIVIC PLAZA-P.O. BOX 542

/   /

City State Zip Code  
Albuquerque NM 87102

Amount of Each Disbursement this Period

Purpose of Disbursement  
ELECTION MAPS

Category/  
Type

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

**C.**

Full Name (Last, First, Middle Initial)  
**BLACKROCK ASSOCIATES, LLC**

**Transaction ID: D154618**

Date of Disbursement

Mailing Address 1936 UNIVERSITY AVE., SUITE 191

/   /

City State Zip Code  
Berkeley CA 94704

Amount of Each Disbursement this Period

Purpose of Disbursement  
MARKETING & FUNDRAISING CONSULTING

Category/  
Type

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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17  18  19a  19b  
 20a  20b  20c  21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

**A.** Full Name (Last, First, Middle Initial)  
BROWN, INC.-THE WAY THE WEST IS WON

Mailing Address 720 E. ZIA ROAD

City Santa Fe State NM Zip Code 87505

Purpose of Disbursement CONSULTANT/PUBLIC RELATIONS

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

**Transaction ID:** D154522  
**Date of Disbursement:** 10 / 24 / 2007

Amount of Each Disbursement this Period: 3741.59

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Category/Type: 001

**B.** Full Name (Last, First, Middle Initial)  
BROWN, INC.-THE WAY THE WEST IS WON

Mailing Address 720 E. ZIA ROAD

City Santa Fe State NM Zip Code 87505

Purpose of Disbursement CONSULTANT/PUBLIC RELATIONS

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

**Transaction ID:** D154539  
**Date of Disbursement:** 11 / 19 / 2007

Amount of Each Disbursement this Period: 2542.96

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Category/Type: 001

**C.** Full Name (Last, First, Middle Initial)  
BUZZMAKER, LLC

Mailing Address C/O MATT MCMILLAN

City Washington State DC Zip Code 20010

Purpose of Disbursement HOSTING OF WEB SITE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

**Transaction ID:** D154599  
**Date of Disbursement:** 12 / 02 / 2007

Amount of Each Disbursement this Period: 49.95

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Category/Type: 004

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶ 6334.50

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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17     18     19a     19b  
 20a     20b     20c     21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

**A.** Full Name (Last, First, Middle Initial)  
BUZZMAKER, LLC

Mailing Address C/O MATT MCMILLAN

City Washington State DC Zip Code 20010

Purpose of Disbursement URL ACQUISITION

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

**Transaction ID:** D154600  
**Date of Disbursement:** 12 / 02 / 2007

Amount of Each Disbursement this Period: 616.36

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Category/Type: 004

**B.** Full Name (Last, First, Middle Initial)  
CASSIDY PLUMBING

Mailing Address 2064 SEDONA HILLS PKWY

City Las Cruces State NM Zip Code 88011

Purpose of Disbursement PLUMBING REPAIR- CAMPAIGN HEADQUARTERS

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

**Transaction ID:** D154563  
**Date of Disbursement:** 11 / 15 / 2007

Amount of Each Disbursement this Period: 849.46

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Category/Type: 001

**C.** Full Name (Last, First, Middle Initial)  
CITY OF ALBUQUERQUE

Mailing Address P.O. BOX 1293

City Albuquerque State NM Zip Code 87102

Purpose of Disbursement ALARM REGISTRATION FEE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

**Transaction ID:** D154585  
**Date of Disbursement:** 11 / 28 / 2007

Amount of Each Disbursement this Period: 25.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Category/Type: 001

**SUBTOTAL** of Disbursements This Page (optional) ..... ► 1490.82

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

A.	Full Name (Last, First, Middle Initial) COCA COLA ENTERPRISES	Transaction ID: D154561 Date of Disbursement 11 / 16 / 2007
	Mailing Address 75 REMITTANCE DRIVE STE#1215	Amount of Each Disbursement this Period 468.38
	City Chicago State IL Zip Code 60675	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement CATERING COSTS-BEVERAGES Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type

B.	Full Name (Last, First, Middle Initial) COMCAST	Transaction ID: D154578 Date of Disbursement 11 / 24 / 2007
	Mailing Address 4611 MONTBEL PL NE	Amount of Each Disbursement this Period 284.36
	City Albuquerque State NM Zip Code 87107	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement HIGH SPEED INTERNET & CABLE Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type

C.	Full Name (Last, First, Middle Initial) COMPUTER CORNER	Transaction ID: D154577 Date of Disbursement 11 / 24 / 2007
	Mailing Address 4410 MENAUL NE	Amount of Each Disbursement this Period 1068.70
	City Albuquerque State NM Zip Code 87110	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement COMPUTER & SOFTWARE Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1821.44
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

A.	Full Name (Last, First, Middle Initial) COSTCO, INC.	Transaction ID: D154538
	Mailing Address 1420 N Renaissance Blvd NE	Date of Disbursement 11 / 16 / 2007
	City Albuquerque State NM Zip Code 87107-7008	Amount of Each Disbursement this Period 781.77
	Purpose of Disbursement CATERING COSTS Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		007 Category/Type

B.	Full Name (Last, First, Middle Initial) DELUXE CHECKS	Transaction ID: D155943
	Mailing Address 3680 Victoria St N	Date of Disbursement 11 / 02 / 2007
	City Saint Paul State MN Zip Code 55126-2906	Amount of Each Disbursement this Period 288.96
	Purpose of Disbursement CHECK ORDER Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type

C.	Full Name (Last, First, Middle Initial) DEMOCRATIC PARTY OF NEW MEXICO	Transaction ID: D154520
	Mailing Address 1301 San Pedro Dr NE	Date of Disbursement 10 / 20 / 2007
	City Albuquerque State NM Zip Code 87110-6727	Amount of Each Disbursement this Period 200.00
	Purpose of Disbursement TABLE RESERVATION FOR SCC MEETING Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		007 Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1270.73
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

**A.**

Full Name (Last, First, Middle Initial)  
DEMOCRATIC PARTY OF NEW MEXICO

**Transaction ID:** D154567

Mailing Address 1301 San Pedro Dr NE

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	0		2	0	0	7

City Albuquerque State NM Zip Code 87110-6727

Amount of Each Disbursement this Period

2000.00
---------

Purpose of Disbursement  
PARTIAL PYMT. FOR VOTER FILE FOR NM

001  
Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

**B.**

Full Name (Last, First, Middle Initial)  
DEMOCRATIC PARTY OF NEW MEXICO

**Transaction ID:** D154634

Mailing Address 1301 San Pedro Dr NE

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	2		2	0	0	7

City Albuquerque State NM Zip Code 87110-6727

Amount of Each Disbursement this Period

3000.00
---------

Purpose of Disbursement  
FINAL PYMT. FOR VOTER FILE

001  
Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

**C.**

Full Name (Last, First, Middle Initial)  
DEMOCRATIC WOMEN OF BERNALILLO COUNTY

**Transaction ID:** D154608

Mailing Address C/O 2528 KELLY AVE SW

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	6		2	0	0	7

City ALBUQUERQUE State NM Zip Code 87105

Amount of Each Disbursement this Period

250.00
--------

Purpose of Disbursement  
TABLE FOR EVENT

007  
Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

5250.00
---------

**TOTAL** This Period (last page this line number only) ..... ►

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**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

**A.**

Full Name (Last, First, Middle Initial)  
DISCO DISPLAY HOUSE

Mailing Address 3123 CENTRAL AVE NE

City Albuquerque State NM Zip Code 87106

Purpose of Disbursement  
PRESENTATION FLAGS

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D154560

Date of Disbursement

11 / 17 / 2007

Amount of Each Disbursement this Period

409.97

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**B.**

Full Name (Last, First, Middle Initial)  
ECLIPSE AVIATION

Mailing Address 2503 CLARK KARR LOOP SE

City Albuquerque State NM Zip Code 87106

Purpose of Disbursement  
RENTAL OF HANGAR FOR ANNOUNCEMENT

Candidate Name

007  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D154544

Date of Disbursement

11 / 10 / 2007

Amount of Each Disbursement this Period

250.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**C.**

Full Name (Last, First, Middle Initial)  
EDDIE KING

Mailing Address 12116 Morrow Ave NE

City Albuquerque State NM Zip Code 87112-3519

Purpose of Disbursement  
CAMPAIGN OFFICE HEADQUARTERS PAINT

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D154534

Date of Disbursement

11 / 06 / 2007

Amount of Each Disbursement this Period

849.84

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

1509.81

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b> Full Name (Last, First, Middle Initial) FED EX Mailing Address 2003 Southern Blvd SE City Albuquerque State NM Zip Code 87124-3751 Purpose of Disbursement OVERNIGHT DELIVERY Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D154555 Date of Disbursement 11 / 11 / 2007 Amount of Each Disbursement this Period 41.63 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Category/Type 001
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) FED-EX Mailing Address 2003 Southern Blvd SE City Albuquerque State NM Zip Code 87124-3751 Purpose of Disbursement OVERNIGHT DELIVERY Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D154531 Date of Disbursement 11 / 02 / 2007 Amount of Each Disbursement this Period 49.67 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Category/Type 001
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) FLORES, ARNOLD & FIORI Mailing Address P.O. BOX 1492 City Santa Cruz State NM Zip Code 87567 Purpose of Disbursement RESEARCH, INFO. & MEDIA SERVICES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D154628 Date of Disbursement 12 / 12 / 2007 Amount of Each Disbursement this Period 1600.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Category/Type 004
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

1691.30

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

A.	Full Name (Last, First, Middle Initial) FOCUS INK, INC.	Transaction ID: D154541 Date of Disbursement 11 / 10 / 2007
	Mailing Address 335 B JEFFERSON SE	Amount of Each Disbursement this Period 1456.77
	City Albuquerque State NM Zip Code 87108	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <input type="checkbox"/>
	Purpose of Disbursement TEE SHIRTS & PRINTING Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		004 Category/Type

B.	Full Name (Last, First, Middle Initial) GARCIA DRYWALL	Transaction ID: D154535 Date of Disbursement 11 / 01 / 2007
	Mailing Address 505 GRAPE CIRCLE	Amount of Each Disbursement this Period 1900.00
	City ALBUQUERQUE State NM Zip Code 87105	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <input type="checkbox"/>
	Purpose of Disbursement CAMPAIGN OFFICE REMODELING Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type

C.	Full Name (Last, First, Middle Initial) GLYNN HARRIS DBA VT MORE THAN DIGITAL	Transaction ID: D154523 Date of Disbursement 10 / 24 / 2007
	Mailing Address 12512 INDIAN TRAIL NE	Amount of Each Disbursement this Period 2003.91
	City Albuquerque State NM Zip Code 87112	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <input type="checkbox"/>
	Purpose of Disbursement FIELD/LOCATION VIDEO PRODUCTIONS Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		004 Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	5360.68
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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17     18     19a     19b  
 20a     20b     20c     21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

**A.** Full Name (Last, First, Middle Initial)  
**GRAIN DEALERS MUTUAL INSURANCE COMPANY**

Mailing Address 6201 CORPORATE DRIVE

City INDIANAPOLIS State IN Zip Code 46278-2930

Purpose of Disbursement COMMERCIAL INSURANCE POLICY

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

**Transaction ID: D154619**  
Date of Disbursement 12 / 10 / 2007

Amount of Each Disbursement this Period 241.75

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

001  
Category/Type

**B.** Full Name (Last, First, Middle Initial)  
**GREETINGS, ETC! INC.**

Mailing Address 2505 COMMERCIAL NE

City Albuquerque State NM Zip Code 87102

Purpose of Disbursement PRINTING SERVICES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

**Transaction ID: D154602**  
Date of Disbursement 12 / 05 / 2007

Amount of Each Disbursement this Period 42.75

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

003  
Category/Type

**C.** Full Name (Last, First, Middle Initial)  
**GREETINGS, ETC! INC.**

Mailing Address 2505 COMMERCIAL NE

City Albuquerque State NM Zip Code 87102

Purpose of Disbursement PRINTING SERVICES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

**Transaction ID: D154603**  
Date of Disbursement 12 / 05 / 2007

Amount of Each Disbursement this Period 254.17

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

003  
Category/Type

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶ 538.67

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

**A.**

Full Name (Last, First, Middle Initial)  
GREETINGS, ETC! INC.

**Transaction ID:** D154604

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	5		2	0	0	7

Mailing Address 2505 COMMERCIAL NE

Amount of Each Disbursement this Period

21.38
-------

City Albuquerque State NM Zip Code 87102

Purpose of Disbursement  
COPY SERVICE

003  
Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

**B.**

Full Name (Last, First, Middle Initial)  
GREETINGS, ETC! INC.

**Transaction ID:** D154605

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	5		2	0	0	7

Mailing Address 2505 COMMERCIAL NE

Amount of Each Disbursement this Period

613.25
--------

City Albuquerque State NM Zip Code 87102

Purpose of Disbursement  
COPY SERVICE, MAIL SERVICE & POSTAGE

003  
Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

**C.**

Full Name (Last, First, Middle Initial)  
GREETINGS, ETC! INC.

**Transaction ID:** D154606

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	5		2	0	0	7

Mailing Address 2505 COMMERCIAL NE

Amount of Each Disbursement this Period

1112.41
---------

City Albuquerque State NM Zip Code 87102

Purpose of Disbursement  
PRINTING SERVICES

006  
Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

1747.04
---------

**TOTAL** This Period (last page this line number only) ..... ▶

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**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

**A.**

Full Name (Last, First, Middle Initial)  
GREETINGS, ETC! INC.

**Transaction ID:** D154607

Date of Disbursement

Mailing Address 2505 COMMERCIAL NE

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	5		2	0	0	7

City Albuquerque State NM Zip Code 87102

Amount of Each Disbursement this Period

57.12
-------

Purpose of Disbursement  
COPY SERVICES

003  
Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

**B.**

Full Name (Last, First, Middle Initial)  
GREETINGS, ETC! INC.

**Transaction ID:** D154526

Date of Disbursement

Mailing Address 2505 COMMERCIAL NE

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	4		2	0	0	7

City Albuquerque State NM Zip Code 87102

Amount of Each Disbursement this Period

1045.09
---------

Purpose of Disbursement  
PRINTING SERVICES

006  
Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

**C.**

Full Name (Last, First, Middle Initial)  
GREETINGS, ETC! INC.

**Transaction ID:** D154527

Date of Disbursement

Mailing Address 2505 COMMERCIAL NE

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	4		2	0	0	7

City Albuquerque State NM Zip Code 87102

Amount of Each Disbursement this Period

276.11
--------

Purpose of Disbursement  
PRINTING SERVICES

004  
Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

1378.32
---------

**TOTAL** This Period (last page this line number only) ..... ►

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**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

**A.**

Full Name (Last, First, Middle Initial)  
GREETINGS, ETC! INC.

**Transaction ID:** D154545

Date of Disbursement

<sup>M</sup> 1	<sup>M</sup> 1	/	<sup>D</sup> 1	<sup>D</sup> 0	/	<sup>Y</sup> 2	<sup>Y</sup> 0	<sup>Y</sup> 0	<sup>Y</sup> 7
----------------	----------------	---	----------------	----------------	---	----------------	----------------	----------------	----------------

Mailing Address 2505 COMMERCIAL NE

Amount of Each Disbursement this Period

1649.18
---------

City Albuquerque State NM Zip Code 87102

Purpose of Disbursement  
PRINTING, MAIL SERVICE AND POSTAGE

006  
Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

**B.**

Full Name (Last, First, Middle Initial)  
GREETINGS, ETC! INC.

**Transaction ID:** D154546

Date of Disbursement

<sup>M</sup> 1	<sup>M</sup> 1	/	<sup>D</sup> 1	<sup>D</sup> 0	/	<sup>Y</sup> 2	<sup>Y</sup> 0	<sup>Y</sup> 0	<sup>Y</sup> 7
----------------	----------------	---	----------------	----------------	---	----------------	----------------	----------------	----------------

Mailing Address 2505 COMMERCIAL NE

Amount of Each Disbursement this Period

1130.25
---------

City Albuquerque State NM Zip Code 87102

Purpose of Disbursement  
PRINTING SERVICES

003  
Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

**C.**

Full Name (Last, First, Middle Initial)  
GREETINGS, ETC! INC.

**Transaction ID:** D154547

Date of Disbursement

<sup>M</sup> 1	<sup>M</sup> 1	/	<sup>D</sup> 1	<sup>D</sup> 0	/	<sup>Y</sup> 2	<sup>Y</sup> 0	<sup>Y</sup> 0	<sup>Y</sup> 7
----------------	----------------	---	----------------	----------------	---	----------------	----------------	----------------	----------------

Mailing Address 2505 COMMERCIAL NE

Amount of Each Disbursement this Period

354.72
--------

City Albuquerque State NM Zip Code 87102

Purpose of Disbursement  
PRINTING SERVICES

003  
Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

3134.15

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

A.

Full Name (Last, First, Middle Initial)  
GREETINGS, ETC! INC.

Transaction ID: D154548

Date of Disbursement

Mailing Address 2505 COMMERCIAL NE

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	0		2	0	0	7

City Albuquerque State NM Zip Code 87102

Amount of Each Disbursement this Period

Purpose of Disbursement  
PRINTING SERVICES, SHIPPING

006  
Category/  
Type

1247.23
---------

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
GREETINGS, ETC! INC.

Transaction ID: D154549

Date of Disbursement

Mailing Address 2505 COMMERCIAL NE

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	0		2	0	0	7

City Albuquerque State NM Zip Code 87102

Amount of Each Disbursement this Period

Purpose of Disbursement  
LAYOUT/COPY

006  
Category/  
Type

57.10
-------

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
GREETINGS, ETC! INC.

Transaction ID: D154550

Date of Disbursement

Mailing Address 2505 COMMERCIAL NE

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	0		2	0	0	7

City Albuquerque State NM Zip Code 87102

Amount of Each Disbursement this Period

Purpose of Disbursement  
LAYOUT/COPY

006  
Category/  
Type

80.16
-------

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

1384.49

**TOTAL** This Period (last page this line number only) ..... ►



**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

A.

Full Name (Last, First, Middle Initial)  
GREETINGS, ETC! INC.

Transaction ID: D154551

Date of Disbursement

Mailing Address 2505 COMMERCIAL NE

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	0		2	0	0	7

City Albuquerque State NM Zip Code 87102

Amount of Each Disbursement this Period

566.65
--------

Purpose of Disbursement  
PRINTING, MAIL, POSTAGE

006  
Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
GREETINGS, ETC! INC.

Transaction ID: D154574

Date of Disbursement

Mailing Address 2505 COMMERCIAL NE

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	1		2	0	0	7

City Albuquerque State NM Zip Code 87102

Amount of Each Disbursement this Period

2074.88
---------

Purpose of Disbursement  
PRINTING

004  
Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
GREETINGS, ETC! INC.

Transaction ID: D154576

Date of Disbursement

Mailing Address 2505 COMMERCIAL NE

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	4		2	0	0	7

City Albuquerque State NM Zip Code 87102

Amount of Each Disbursement this Period

1719.62
---------

Purpose of Disbursement  
PRINTING

006  
Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

4361.15

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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17     18     19a     19b  
 20a     20b     20c     21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

**A.**

Full Name (Last, First, Middle Initial)  
GREETINGS, ETC! INC.

**Transaction ID:** D154564

Date of Disbursement

/   /

Mailing Address 2505 COMMERCIAL NE

Amount of Each Disbursement this Period

City Albuquerque State NM Zip Code 87102

Purpose of Disbursement  
PRINTING

Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

**B.**

Full Name (Last, First, Middle Initial)  
HAUSSAMEN PUBLICATIONS, INC.

**Transaction ID:** D154530

Date of Disbursement

/   /

Mailing Address 4993 ROCK COURT

Amount of Each Disbursement this Period

City Las Cruces State NM Zip Code 88012

Purpose of Disbursement  
ADS PLACED FOR SENATE RACE

Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

**C.**

Full Name (Last, First, Middle Initial)  
HEATHER TOWNSEND

**Transaction ID:** D154630

Date of Disbursement

/   /

Mailing Address 3317 CARDENAS NE

Amount of Each Disbursement this Period

City ALBUQUERQUE State NM Zip Code 87110

Purpose of Disbursement  
CONSULTANT/NATIVE AMERICAN ISSUES

Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

**A.**

Full Name (Last, First, Middle Initial)  
**INTEGRATED RESOURCES**

Mailing Address 6801 CISCO NW

City State Zip Code  
Albuquerque NM 87120

Purpose of Disbursement  
SUPPLIES FOR PHONE & COMPUTER WIRING

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

**Transaction ID: D154569**

Date of Disbursement

11 / 23 / 2007

Amount of Each Disbursement this Period

1086.97

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**B.**

Full Name (Last, First, Middle Initial)  
**INTEGRATED RESOURCES**

Mailing Address 6801 CISCO NW

City State Zip Code  
Albuquerque NM 87120

Purpose of Disbursement  
SUPPLIES-WIRING FOR PHONE & COMPUTER

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

**Transaction ID: D154528**

Date of Disbursement

10 / 30 / 2007

Amount of Each Disbursement this Period

1130.16

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**C.**

Full Name (Last, First, Middle Initial)  
**INTELESERVICES**

Mailing Address 5730 Hoover Blvd

City State Zip Code  
Tampa FL 33634-5339

Purpose of Disbursement  
ROBO CALLS

Candidate Name

007  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

**Transaction ID: D154627**

Date of Disbursement

12 / 12 / 2007

Amount of Each Disbursement this Period

10966.18

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) ▶

13183.31

**TOTAL** This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

A.

Full Name (Last, First, Middle Initial)  
JOHN MIARIS

Transaction ID: D154629  
Date of Disbursement

Mailing Address 6217 CENTRAL NW

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	2		2	0	0	7

City ALBUQUERQUE State NM Zip Code 87105

Amount of Each Disbursement this Period

Purpose of Disbursement  
CATERING COSTS

007  
Category/  
Type

1068.90
---------

Candidate Name

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
JOHN MIARIS

Transaction ID: D154639  
Date of Disbursement

Mailing Address 6217 CENTRAL NW

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	8		2	0	0	7

City ALBUQUERQUE State NM Zip Code 87105

Amount of Each Disbursement this Period

Purpose of Disbursement  
CATERING COSTS

007  
Category/  
Type

300.00
--------

Candidate Name

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
JUDE NOWICKI, PHOTOGRAPHER

Transaction ID: D154556  
Date of Disbursement

Mailing Address 2132 CENTRAL AVE SE #104

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	4		2	0	0	7

City Albuquerque State NM Zip Code 87106

Amount of Each Disbursement this Period

Purpose of Disbursement  
PHOTOGRAPHS

006  
Category/  
Type

50.00
-------

Candidate Name

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ..... ▶

1418.90

TOTAL This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

**A.**

Full Name (Last, First, Middle Initial)  
LAKE RESEARCH PARTNERS

**Transaction ID:** D154521

Mailing Address 1726 M STREET NW, SUITE 500

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	4		2	0	0	7

City Washington State DC Zip Code 20036

Amount of Each Disbursement this Period

4500.00
---------

Purpose of Disbursement  
CAMPAIGN POLL

005  
Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

**B.**

Full Name (Last, First, Middle Initial)  
LAKE RESEARCH PARTNERS

**Transaction ID:** D154580

Mailing Address 1726 M STREET NW, SUITE 500

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	8		2	0	0	7

City Washington State DC Zip Code 20036

Amount of Each Disbursement this Period

26437.50
----------

Purpose of Disbursement  
STATEWIDE POLL

005  
Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

**C.**

Full Name (Last, First, Middle Initial)  
LAKE RESEARCH PARTNERS

**Transaction ID:** D154617

Mailing Address 1726 M STREET NW, SUITE 500

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	7		2	0	0	7

City Washington State DC Zip Code 20036

Amount of Each Disbursement this Period

1279.00
---------

Purpose of Disbursement  
POLL

005  
Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

**32216.50**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

**A.**

Full Name (Last, First, Middle Initial)  
LAKE RESEARCH PARTNERS

**Transaction ID:** D154615

Date of Disbursement

Mailing Address 1726 M STREET NW, SUITE 500

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	7		2	0	0	7

City Washington State DC Zip Code 20036

Amount of Each Disbursement this Period

8812.50
---------

Purpose of Disbursement  
POLL

005  
Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

**B.**

Full Name (Last, First, Middle Initial)  
MACK/CROUNSE GROUP, LLC

**Transaction ID:** D154625

Date of Disbursement

Mailing Address 4900 SEMINARY ROAD-SUITE 1020

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	2		2	0	0	7

City ALEXANDRIA, State VA Zip Code 22311

Amount of Each Disbursement this Period

2500.00
---------

Purpose of Disbursement  
CONSULTANT/DIRECT MAILING SPECIALISTS

001  
Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

**C.**

Full Name (Last, First, Middle Initial)  
MARK DEGROAT

**Transaction ID:** D154565

Date of Disbursement

Mailing Address 3002 QUINCY NE

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	9		2	0	0	7

City Albuquerque State NM Zip Code 87107

Amount of Each Disbursement this Period

2481.75
---------

Purpose of Disbursement  
OFFICE REPAIRS-DOORS, RAMPS, HANDRAILS

001  
Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

13794.25

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

**A.**

Full Name (Last, First, Middle Initial)  
MARTIN J. CHAVEZ

Transaction ID: D154633  
Date of Disbursement

Mailing Address 2004 Gabaldon Dr NW

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	2		2	0	0	7

City Albuquerque State NM Zip Code 87104-2811

Amount of Each Disbursement this Period

Purpose of Disbursement  
TRAVEL REIMBURSEMENT

002  
Category/  
Type

242.96
--------

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name  
MR. MARTIN J. CHAVEZ

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼  
State: NM District:

**B.**

Full Name (Last, First, Middle Initial)  
MARTIN J. CHAVEZ

Transaction ID: D154928  
Date of Disbursement

Mailing Address 2004 Gabaldon Dr NW

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	6		2	0	0	7

City Albuquerque State NM Zip Code 87104-2811

Amount of Each Disbursement this Period

Purpose of Disbursement  
TRAVEL REIMBURSEMENT

002  
Category/  
Type

1393.22
---------

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name  
MR. MARTIN J. CHAVEZ

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼  
State: NM District:

**C.**

Full Name (Last, First, Middle Initial)  
MATTHEW FARRAUTO

Transaction ID: D154559  
Date of Disbursement

Mailing Address 600 CENTRAL AVE SW, APT.3H

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	5		2	0	0	7

City Albuquerque State NM Zip Code 87102

Amount of Each Disbursement this Period

Purpose of Disbursement  
PREPARATION OF CAMPAIGN ANNOUNCEMENT

007  
Category/  
Type

500.00
--------

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼  
State: District:

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

2136.18

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

**A.**

Full Name (Last, First, Middle Initial)  
MCM ELEGANTE HOTEL

**Transaction ID:** D154529

Date of Disbursement

Mailing Address 2020 MENAUL BLVD NE

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	1		2	0	0	7

City Albuquerque State NM Zip Code 87107

Amount of Each Disbursement this Period

1200.00
---------

Purpose of Disbursement  
EVENT COSTS

007
-----

Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

**B.**

Full Name (Last, First, Middle Initial)  
MCMAHON SQUIER LAPP & ASSOCIATES

**Transaction ID:** D154566

Date of Disbursement

Mailing Address 300 N. LEE ST. STE 500

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	9		2	0	0	7

City ALEXANDRIA State VA Zip Code 22314

Amount of Each Disbursement this Period

5000.00
---------

Purpose of Disbursement  
CONSULTANT/RESEARCH

005
-----

Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

**C.**

Full Name (Last, First, Middle Initial)  
MONAHAN MARKETING

**Transaction ID:** D154532

Date of Disbursement

Mailing Address 1331 Park Ave SW

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	5		2	0	0	7

City Albuquerque State NM Zip Code 87102-2847

Amount of Each Disbursement this Period

480.93
--------

Purpose of Disbursement  
CONSULTANT/MEDIA

004
-----

Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

6680.93
---------

**TOTAL** This Period (last page this line number only) ..... ▶

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**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

**A.**

Full Name (Last, First, Middle Initial)  
NGP Software, Inc

**Transaction ID:** D154642

Mailing Address 1225 Eye Street #1225

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	6		2	0	0	7

City Washington State DC Zip Code 20005

Amount of Each Disbursement this Period

2100.00
---------

Purpose of Disbursement  
CONSULTANT/TECHNOLOGY

001  
Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

**B.**

Full Name (Last, First, Middle Initial)  
NGP SOFTWARE

**Transaction ID:** D154525

Mailing Address 1101 VERMONT AVE., NW

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	4		2	0	0	7

City Washington State DC Zip Code 20005

Amount of Each Disbursement this Period

1500.00
---------

Purpose of Disbursement  
CONSULTANT/TECHNOLOGY

001  
Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

**C.**

Full Name (Last, First, Middle Initial)  
NRG SERVICES, INC.

**Transaction ID:** D154635

Mailing Address 4425 Towner Ave NE

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	2		2	0	0	7

City Albuquerque State NM Zip Code 87110-3909

Amount of Each Disbursement this Period

882.79
--------

Purpose of Disbursement  
EVENT COSTS

007  
Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

4482.79
---------

**TOTAL** This Period (last page this line number only) ..... ►

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**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) OFFICE DEPOT Mailing Address 1405 RENAISSANCE BLVD NE City Albuquerque State NM Zip Code 87107 Purpose of Disbursement OFFICE SUPPLIES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D154624 Date of Disbursement 12 / 12 / 2007 Amount of Each Disbursement this Period 384.81 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B.</b>	Full Name (Last, First, Middle Initial) OFFICE DEPOT Mailing Address 1405 RENAISSANCE BLVD NE City Albuquerque State NM Zip Code 87107 Purpose of Disbursement OFFICE SUPPLIES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D154616 Date of Disbursement 12 / 10 / 2007 Amount of Each Disbursement this Period 360.12 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>C.</b>	Full Name (Last, First, Middle Initial) OFFICE DEPOT Mailing Address 1405 RENAISSANCE BLVD NE City Albuquerque State NM Zip Code 87107 Purpose of Disbursement OFFICE SUPPLIES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D154536 Date of Disbursement 11 / 15 / 2007 Amount of Each Disbursement this Period 295.19 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1040.12
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b> Full Name (Last, First, Middle Initial) <b>POSITIVE CONTACTS CONSULTING</b> Mailing Address 400 GOLD AVE SW STE 210 City Albuquerque State NM Zip Code 87102 Purpose of Disbursement RECORDED MESSAGE CALLS Candidate Name	Transaction ID: D154612 Date of Disbursement 12 / 06 / 2007 Amount of Each Disbursement this Period 1412.23 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

<b>B.</b> Full Name (Last, First, Middle Initial) <b>POSITIVE CONTACTS CONSULTING</b> Mailing Address 400 GOLD AVE SW STE 210 City Albuquerque State NM Zip Code 87102 Purpose of Disbursement RECORDED MESSAGE CALLS Candidate Name	Transaction ID: D154613 Date of Disbursement 12 / 06 / 2007 Amount of Each Disbursement this Period 80.99 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

<b>C.</b> Full Name (Last, First, Middle Initial) <b>PREMIER CONSULTANTS</b> Mailing Address P.O. BOX City Albuquerque State NM Zip Code 87198 Purpose of Disbursement CONSULTANT/FUNDRAISING Candidate Name	Transaction ID: D154558 Date of Disbursement 11 / 15 / 2007 Amount of Each Disbursement this Period 2000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3493.22</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

**A.**

Full Name (Last, First, Middle Initial)  
PREMIER CONSULTANTS

**Transaction ID:** D154589

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	5		2	0	0	7

Mailing Address P.O. BOX

Amount of Each Disbursement this Period

2000.00
---------

City Albuquerque State NM Zip Code 87198

Purpose of Disbursement  
CONSULTANT/FUNDRAISING

003  
Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

**B.**

Full Name (Last, First, Middle Initial)  
PREMIER CONSULTANTS

**Transaction ID:** D154590

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	1		2	0	0	7

Mailing Address P.O. BOX

Amount of Each Disbursement this Period

4242.50
---------

City Albuquerque State NM Zip Code 87198

Purpose of Disbursement  
CONSULTANT/FUNDRAISING

003  
Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

**C.**

Full Name (Last, First, Middle Initial)  
PSAV PRESENTATION SERVICES

**Transaction ID:** D154643

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	6		2	0	0	7

Mailing Address 401 2nd St NW

Amount of Each Disbursement this Period

521.34
--------

City Albuquerque State NM Zip Code 87102-2203

Purpose of Disbursement  
EVENT COSTS

007  
Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

6763.84

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

**A.**

Full Name (Last, First, Middle Initial)  
QWEST

Mailing Address P.O. BOX 29039

City Phoenix State AZ Zip Code 85038

Purpose of Disbursement  
PHONE & INTERNET SERVICES

Candidate Name

001  
Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D154680

Date of Disbursement

12 / 28 / 2007

Amount of Each Disbursement this Period

840.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**B.**

Full Name (Last, First, Middle Initial)  
QWEST

Mailing Address P.O. BOX 29039

City Phoenix State AZ Zip Code 85038

Purpose of Disbursement  
PHONE & INTERNET SERVICE

Candidate Name

001  
Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D154588

Date of Disbursement

11 / 28 / 2007

Amount of Each Disbursement this Period

909.86

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**C.**

Full Name (Last, First, Middle Initial)  
QWEST

Mailing Address P.O. BOX 29039

City Phoenix State AZ Zip Code 85038

Purpose of Disbursement  
TELEPHONE LINE INSTALLATION

Candidate Name

001  
Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D154542

Date of Disbursement

11 / 10 / 2007

Amount of Each Disbursement this Period

548.12

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) ▶

2297.98

**TOTAL** This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

**A.**

Full Name (Last, First, Middle Initial)  
R.F. INGERSOLL

Mailing Address 1124 HUPMOBILE NE

City Albuquerque State NM Zip Code 87123

Purpose of Disbursement  
CAMPAIGN HEADQUARTERS-REPAIRS

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D154571

Date of Disbursement

11 / 29 / 2007

Amount of Each Disbursement this Period

1518.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**B.**

Full Name (Last, First, Middle Initial)  
RESOLUTION GRAPHICS

Mailing Address 4380 ALEXANDER BLVD. SUITE A

City Albuquerque State NM Zip Code 87107

Purpose of Disbursement  
GRAPHICS DESIGN

Candidate Name

006  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D154543

Date of Disbursement

11 / 10 / 2007

Amount of Each Disbursement this Period

752.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**C.**

Full Name (Last, First, Middle Initial)  
RESOLUTION GRAPHICS

Mailing Address 4380 ALEXANDER BLVD. SUITE A

City Albuquerque State NM Zip Code 87107

Purpose of Disbursement  
GRAPHICS DESIGN

Candidate Name

006  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D155092

Date of Disbursement

12 / 31 / 2007

Amount of Each Disbursement this Period

1164.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

3434.00

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

A.	Full Name (Last, First, Middle Initial) RICHLAN CERAMICS & CARPET, INC.	Transaction ID: D154601
	Mailing Address 2429 MONROE ST. NE	Date of Disbursement 12 / 05 / 2007
	City Albuquerque State NM Zip Code 87110	Amount of Each Disbursement this Period 4267.52
	Purpose of Disbursement CARPET & INSTALL AT CAMPAIGN HEADQUARTER	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name 001 Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) ROBERT PETTY	Transaction ID: D155094
	Mailing Address 6109 Summer Ray Rd NW	Date of Disbursement 12 / 31 / 2007
	City Albuquerque State NM Zip Code 87120-6110	Amount of Each Disbursement this Period 400.00
	Purpose of Disbursement MOVE OUT OF CAMPAIGN HEADQUARTERS	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name 001 Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) RYAN, PHILLIPS, UTRECHT & MACKINNON*	Transaction ID: D154638
	Mailing Address 1133 CONNECTICUT AVENEUE NW-SUITE	Date of Disbursement 12 / 13 / 2007
	City Washington State DC Zip Code 20036	Amount of Each Disbursement this Period 5037.40
	Purpose of Disbursement LEGAL FEES	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name 001 Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>9704.92</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

**A.** Full Name (Last, First, Middle Initial)  
RYAN, PHILLIPS, UTRECHT & MACKINNON\*

Mailing Address 1133 CONNECTICUT AVENEUE NW-SUITE

City Washington State DC Zip Code 20036

Purpose of Disbursement  
LEGAL FEES

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D154587

Date of Disbursement

11 / 28 / 2007

Amount of Each Disbursement this Period

3750.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**B.** Full Name (Last, First, Middle Initial)  
SAMS CLUB

Mailing Address 300 Eubank Blvd NE

City Albuquerque State NM Zip Code 87123-2755

Purpose of Disbursement  
CATERING COSTS

Candidate Name

007  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D154622

Date of Disbursement

12 / 12 / 2007

Amount of Each Disbursement this Period

61.74

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**C.** Full Name (Last, First, Middle Initial)  
SCALO NORTHERN ITALIAN GRILL

Mailing Address 3500 Central Ave SE

City Albuquerque State NM Zip Code 87106-1446

Purpose of Disbursement  
CATERING FOR FUNDRAISER

Candidate Name

003  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D154641

Date of Disbursement

12 / 26 / 2007

Amount of Each Disbursement this Period

2756.98

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

6568.72

**TOTAL** This Period (last page this line number only) ..... ►



**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

A.	Full Name (Last, First, Middle Initial) <b>SCOTT FORRESTER</b>	<b>Transaction ID: D155585</b>
	Mailing Address 7519 Willow Run Dr NE	Date of Disbursement 12 / 31 / 2007
	City Albuquerque State NM Zip Code 87113-0400	Amount of Each Disbursement this Period 1200.00
	Purpose of Disbursement CONSULTANT/OFFICE MANAGEMENT	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Category/Type 001
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) <b>SCOTT FORRESTER</b>	<b>Transaction ID: D154632</b>
	Mailing Address 7519 Willow Run Dr NE	Date of Disbursement 12 / 12 / 2007
	City Albuquerque State NM Zip Code 87113-0400	Amount of Each Disbursement this Period 214.86
	Purpose of Disbursement TRAVEL REIMBURSEMENT	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Category/Type 002
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) <b>STATE OF NEW MEXICO-SECRETARY OF STATE</b>	<b>Transaction ID: D154562</b>
	Mailing Address STATE CAPITOL NORTH ANNEX, SUITE 3	Date of Disbursement 11 / 19 / 2007
	City Santa Fe State NM Zip Code 87503	Amount of Each Disbursement this Period 15.00
	Purpose of Disbursement PHOTOCOPIES	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Category/Type 006
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>1429.86</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

**A.**

Full Name (Last, First, Middle Initial)  
TAS SECURITY SYSTEMS, INC.

**Transaction ID:** D154583

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	8		2	0	0	7

Mailing Address 2712 Carlisle Blvd NE

Amount of Each Disbursement this Period

212.68
--------

City Albuquerque State NM Zip Code 87110-2804

Purpose of Disbursement  
ALARM EQUIP.& INSTALL AT HEADQUARTERS

001  
Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

**B.**

Full Name (Last, First, Middle Initial)  
TAS SECURITY SYSTEMS, INC.

**Transaction ID:** D154584

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	8		2	0	0	7

Mailing Address 2712 Carlisle Blvd NE

Amount of Each Disbursement this Period

230.21
--------

City Albuquerque State NM Zip Code 87110-2804

Purpose of Disbursement  
ALARM MONITORING SERVICE

001  
Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

**C.**

Full Name (Last, First, Middle Initial)  
THOMAS J. HORAN, LTD

**Transaction ID:** D154614

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	6		2	0	0	7

Mailing Address 510 Laguna Blvd SW

Amount of Each Disbursement this Period

683.10
--------

City Albuquerque State NM Zip Code 87104-1117

Purpose of Disbursement  
TRAVEL REIMBURSEMENT

002  
Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

1125.99
---------

**TOTAL** This Period (last page this line number only) ..... ►

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**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

A.

Full Name (Last, First, Middle Initial)  
UNION SAVINGS BANK

Transaction ID: D155940  
Date of Disbursement

Mailing Address 1500 Mercantile Ave NE

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	5		2	0	0	7

City Albuquerque State NM Zip Code 87107-7000

Amount of Each Disbursement this Period

80.69
-------

Purpose of Disbursement  
CHECKS ORDERED

001  
Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
UNION SAVINGS BANK

Transaction ID: D155941  
Date of Disbursement

Mailing Address 1500 Mercantile Ave NE

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	6		2	0	0	7

City Albuquerque State NM Zip Code 87107-7000

Amount of Each Disbursement this Period

12.89
-------

Purpose of Disbursement  
ENDORSEMENT STAMP ORDER

001  
Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
UNION SAVINGS BANK

Transaction ID: D155942  
Date of Disbursement

Mailing Address 1500 Mercantile Ave NE

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	1		2	0	0	7

City Albuquerque State NM Zip Code 87107-7000

Amount of Each Disbursement this Period

10.00
-------

Purpose of Disbursement  
RETURN ITEM FEES

001  
Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

103.58
--------

**TOTAL** This Period (last page this line number only) ..... ▶

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**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

A.

Full Name (Last, First, Middle Initial)  
UNITED STATES POST OFFICE

Transaction ID: D154570

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	3		2	0	0	7

Mailing Address ACADEMY STATION

Amount of Each Disbursement this Period

410.00
--------

City State Zip Code  
Albuquerque NM 87109

Purpose of Disbursement  
POSTAGE STAMPS

001  
Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
UNIVERSITY OF NEW MEXICO

Transaction ID: D154644

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	6		2	0	0	7

Mailing Address 1 UNIVERSITY OF NEW MEXICO

Amount of Each Disbursement this Period

55.00
-------

City State Zip Code  
Albuquerque NM 87131

Purpose of Disbursement  
FACILITY RENTAL

007  
Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
VICTORY GROUP, LLC

Transaction ID: D154636

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	3		2	0	0	7

Mailing Address 1850 OLD PECOS TRAIL SUITE H

Amount of Each Disbursement this Period

2758.08
---------

City State Zip Code  
Santa Fe NM 87505

Purpose of Disbursement  
CONSULTANT/PUBLIC RELATIONS

001  
Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ..... ▶

3223.08

TOTAL This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

A.	Full Name (Last, First, Middle Initial) VICTORY GROUP, LLC	Transaction ID: D154553 Date of Disbursement 11 / 11 / 2007
	Mailing Address 1850 OLD PECOS TRAIL SUITE H	Amount of Each Disbursement this Period 1944.20
	City Santa Fe State NM Zip Code 87505	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement CONSULTANT/PUBLIC RELATIONS Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type

B.	Full Name (Last, First, Middle Initial) VOTER CONTACT SERVICES	Transaction ID: D154540 Date of Disbursement 11 / 09 / 2007
	Mailing Address P.O. BOX 390817	Amount of Each Disbursement this Period 1147.10
	City Mountain View State CA Zip Code 94039	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement DEM. VOTER LISTS Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		006 Category/Type

C.	Full Name (Last, First, Middle Initial) VOTER CONTACT SERVICES	Transaction ID: D154620 Date of Disbursement 12 / 10 / 2007
	Mailing Address P.O. BOX 390817	Amount of Each Disbursement this Period 629.55
	City Mountain View State CA Zip Code 94039	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement DEMOCRATIC VOTER E MAIL LIST-FINAL PYMT Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		006 Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	3720.85
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

**A.**

Full Name (Last, First, Middle Initial)  
WILSON & COMPANY

Mailing Address 4900 Lang Ave NE

City Albuquerque State NM Zip Code 87109-9700

Purpose of Disbursement  
EVENT RENTAL

Candidate Name

003  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D154637

Date of Disbursement

12 / 13 / 2007

Amount of Each Disbursement this Period

100.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**B.**

Full Name (Last, First, Middle Initial)  
MARK FLEISHER

Mailing Address 9451 THORNTON AVE NE

City Albuquerque State NM Zip Code 87109

Purpose of Disbursement  
REIMBURSEMENT-SUPPLIES

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D154533

Date of Disbursement

11 / 06 / 2007

Amount of Each Disbursement this Period

1436.44

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**C.**

Full Name (Last, First, Middle Initial)  
BEST WESTERN

Mailing Address 901 Avenida De Mesilla

City Las Cruces State NM Zip Code 88005-6579

Purpose of Disbursement  
CATERING COSTS

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D158360

Date of Disbursement

10 / 25 / 2007

Amount of Each Disbursement this Period

274.35

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

1536.44

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

**A.**

Full Name (Last, First, Middle Initial)  
CIRCUIT CITY

Mailing Address 4400 Cutler Ave NE

City Albuquerque State NM Zip Code 87110-3935

Purpose of Disbursement  
SUPPLIES-ELECTRONIC

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D158358

Date of Disbursement

10 / 24 / 2007

Amount of Each Disbursement this Period

53.41

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

**B.**

Full Name (Last, First, Middle Initial)  
CIRCUIT CITY

Mailing Address 4400 Cutler Ave NE

City Albuquerque State NM Zip Code 87110-3935

Purpose of Disbursement  
SUPPLIES-ELECTRONIC

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D158355

Date of Disbursement

10 / 19 / 2007

Amount of Each Disbursement this Period

74.80

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

**C.**

Full Name (Last, First, Middle Initial)  
CITY OF ALBUQUERQUE

Mailing Address P.O. BOX 1293

City Albuquerque State NM Zip Code 87102

Purpose of Disbursement  
OFFICE REMODELING PERMIT FEES

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D158363

Date of Disbursement

10 / 26 / 2007

Amount of Each Disbursement this Period

158.47

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

**A.**

Full Name (Last, First, Middle Initial)  
CITY OF ALBUQUERQUE

Mailing Address P.O. BOX 1293

City Albuquerque State NM Zip Code 87102

Purpose of Disbursement  
ALARM INSPECTION FEE

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D158364

Date of Disbursement

10 / 29 / 2007

Amount of Each Disbursement this Period

50.90

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

**B.**

Full Name (Last, First, Middle Initial)  
CITY OF ALBUQUERQUE

Mailing Address P.O. BOX 1293

City Albuquerque State NM Zip Code 87102

Purpose of Disbursement  
ALARM PERMIT FEE

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D158367

Date of Disbursement

10 / 29 / 2007

Amount of Each Disbursement this Period

50.90

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

**C.**

Full Name (Last, First, Middle Initial)  
DEALERS ELECTRIC

Mailing Address 4220A 2nd St NW

City Albuquerque State NM Zip Code 87107-2245

Purpose of Disbursement  
SUPPLIES-ELECTRICAL

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D158366

Date of Disbursement

10 / 29 / 2007

Amount of Each Disbursement this Period

254.90

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

TOTAL This Period (last page this line number only) ▶



**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

**A.**

Full Name (Last, First, Middle Initial)  
EXPRESS EXXON

Mailing Address 1105 N California St

City Socorro State NM Zip Code 87801-4265

Purpose of Disbursement  
TRAVEL

Candidate Name

002  
Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

Transaction ID: D158359

Date of Disbursement

10 / 25 / 2007

Amount of Each Disbursement this Period

59.63

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

**B.**

Full Name (Last, First, Middle Initial)  
HOME DEPOT

Mailing Address 1220 RENAISSANCE BLVD NE

City ALBUQUERQUE State NM Zip Code 87107

Purpose of Disbursement  
SUPPLIES-OFFICE

Candidate Name

001  
Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

Transaction ID: D158357

Date of Disbursement

10 / 24 / 2007

Amount of Each Disbursement this Period

7.46

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

**C.**

Full Name (Last, First, Middle Initial)  
LOWE'S HOME CENTERS, INC.

Mailing Address 6200 Paseo Del Norte NE

City Albuquerque State NM Zip Code 87113-1712

Purpose of Disbursement  
SUPPLIES -OFFICE KEYS

Candidate Name

001  
Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

Transaction ID: D158353

Date of Disbursement

10 / 16 / 2007

Amount of Each Disbursement this Period

21.99

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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17     18     19a     19b  
 20a     20b     20c     21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

**A.** Full Name (Last, First, Middle Initial)  
**LOWE'S HOME CENTERS, INC.**

Mailing Address 6200 Paseo Del Norte NE

City Albuquerque State NM Zip Code 87113-1712

Purpose of Disbursement  
SIGNAGE SUPPLIES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

Transaction ID: D158350  
Date of Disbursement  
10 / 09 / 2007

Amount of Each Disbursement this Period  
17.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  
**[MEMO ITEM]**

Category/Type: 001

**B.** Full Name (Last, First, Middle Initial)  
**OFFICE DEPOT**

Mailing Address 7901 San Pedro Dr NE

City Albuquerque State NM Zip Code 87109-4673

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

Transaction ID: D158356  
Date of Disbursement  
10 / 20 / 2007

Amount of Each Disbursement this Period  
104.24

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  
**[MEMO ITEM]**

Category/Type: 001

**C.** Full Name (Last, First, Middle Initial)  
**OFFICE MAX**

Mailing Address 8100 Wyoming Blvd NE Ste B

City Albuquerque State NM Zip Code 87113-1947

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

Transaction ID: D158351  
Date of Disbursement  
10 / 09 / 2007

Amount of Each Disbursement this Period  
35.26

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  
**[MEMO ITEM]**

Category/Type: 001

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶ 0.00

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

A.	Full Name (Last, First, Middle Initial) Staples	Transaction ID: D158365 Date of Disbursement 10 / 29 / 2007
	Mailing Address 6001 Menaul Blvd NE	Amount of Each Disbursement this Period 150.41
	City Albuquerque State NM Zip Code 87110-3317	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
	Purpose of Disbursement OFFICE SUPPLIES Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type

B.	Full Name (Last, First, Middle Initial) UNITED STATES POST OFFICE	Transaction ID: D158352 Date of Disbursement 10 / 09 / 2007
	Mailing Address ACADEMY STATION	Amount of Each Disbursement this Period 105.00
	City Albuquerque State NM Zip Code 87109	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
	Purpose of Disbursement POSTAGE STAMPS Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type

C.	Full Name (Last, First, Middle Initial) WALMART	Transaction ID: D158354 Date of Disbursement 10 / 18 / 2007
	Mailing Address 2550 Coors Blvd NW	Amount of Each Disbursement this Period 17.72
	City Albuquerque State NM Zip Code 87120-2123	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
	Purpose of Disbursement SUPPLIES-OFFICE Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

**A.**

Full Name (Last, First, Middle Initial)  
MARK FLEISHER

Transaction ID: D154579  
Date of Disbursement

Mailing Address 9451 THORNTON AVE NE

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	8		2	0	0	7

City State Zip Code  
Albuquerque NM 87109

Amount of Each Disbursement this Period

925.00
--------

Purpose of Disbursement  
PHONE SYSTEM

001
-----

Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

**B.**

Full Name (Last, First, Middle Initial)  
EBAY-PAYPAL

Transaction ID: D158401  
Date of Disbursement

Mailing Address 2211 N 1st St

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	0		2	0	0	7

City State Zip Code  
San Jose CA 95131-2021

Amount of Each Disbursement this Period

925.00
--------

Purpose of Disbursement  
PHONE SYSTEM (PANASONIC)

001
-----

Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

[MEMO ITEM]

**C.**

Full Name (Last, First, Middle Initial)  
AR3 LLC DBA ATLAS RESOURCES, INC.

Transaction ID: D154728  
Date of Disbursement

Mailing Address 2009 EUBANK NE

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	7		2	0	0	7

City State Zip Code  
Albuquerque NM 87112

Amount of Each Disbursement this Period

19642.89
----------

Purpose of Disbursement  
PAYROLL

001
-----

Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

20567.89
----------

**TOTAL** This Period (last page this line number only) ..... ▶

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**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

A.	Full Name (Last, First, Middle Initial) Mark Fleisher	Transaction ID: D155961 Date of Disbursement 12 / 27 / 2007
	Mailing Address 9451 Thornton Ave. NE	Amount of Each Disbursement this Period 6000.00
	City Albuquerque State NM Zip Code 87109	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
	Purpose of Disbursement PAYROLL Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type

B.	Full Name (Last, First, Middle Initial) MICHAEL D. JANOVER	Transaction ID: D155963 Date of Disbursement 12 / 27 / 2007
	Mailing Address 802 Gold Ave SW	Amount of Each Disbursement this Period 2500.00
	City Albuquerque State NM Zip Code 87102-3058	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
	Purpose of Disbursement PAYROLL Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type

C.	Full Name (Last, First, Middle Initial) ADRIANNE RUTLEDGE	Transaction ID: D155964 Date of Disbursement 12 / 27 / 2007
	Mailing Address 8100 Barstow St NE	Amount of Each Disbursement this Period 2000.00
	City Albuquerque State NM Zip Code 87122-2801	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
	Purpose of Disbursement PAYROLL Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

A.	Full Name (Last, First, Middle Initial) SCOTT FORRESTER	Transaction ID: D155962 Date of Disbursement 12 / 27 / 2007
	Mailing Address 7519 Willow Run Dr NE	
	City Albuquerque State NM Zip Code 87113-0400	Amount of Each Disbursement this Period 3000.00
	Purpose of Disbursement PAYROLL Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="checkbox"/> Category/Type 001 <b>[MEMO ITEM]</b>
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Vivian Weidner	Transaction ID: D155965 Date of Disbursement 12 / 27 / 2007
	Mailing Address 642 Fairway Loop SE	
	City Albuquerque State NM Zip Code 87124	Amount of Each Disbursement this Period 2500.00
	Purpose of Disbursement PAYROLL Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="checkbox"/> Category/Type 001 <b>[MEMO ITEM]</b>
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) JACOB M WINOWICH	Transaction ID: D155966 Date of Disbursement 12 / 27 / 2007
	Mailing Address 7408 Terry Ct NE	
	City Albuquerque State NM Zip Code 87110-2720	Amount of Each Disbursement this Period 1750.00
	Purpose of Disbursement PAYROLL Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="checkbox"/> Category/Type 001 <b>[MEMO ITEM]</b>
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

**A.** Full Name (Last, First, Middle Initial)  
AR3 LLC DBA ATLAS RESOURCES, INC.

Mailing Address 2009 EUBANK NE

City Albuquerque State NM Zip Code 87112

Purpose of Disbursement  
PAYROLL

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D154729

Date of Disbursement

12 / 13 / 2007

Amount of Each Disbursement this Period

38374.14

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**B.** Full Name (Last, First, Middle Initial)  
Mark Fleisher

Mailing Address 9451 Thornton Ave. NE

City Albuquerque State NM Zip Code 87109

Purpose of Disbursement  
PAYROLL

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D155955

Date of Disbursement

12 / 13 / 2007

Amount of Each Disbursement this Period

18000.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

**C.** Full Name (Last, First, Middle Initial)  
MICHAEL D. JANOVER

Mailing Address 802 Gold Ave SW

City Albuquerque State NM Zip Code 87102-3058

Purpose of Disbursement  
PAYROLL

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D155957

Date of Disbursement

12 / 13 / 2007

Amount of Each Disbursement this Period

3000.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) ▶

38374.14

**TOTAL** This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

**A.**

Full Name (Last, First, Middle Initial)  
ADRIANNE RUTLEDGE

Mailing Address 8100 Barstow St NE

City Albuquerque State NM Zip Code 87122-2801

Purpose of Disbursement  
PAYROLL

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D155958

Date of Disbursement

12 / 13 / 2007

Amount of Each Disbursement this Period

2500.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

**B.**

Full Name (Last, First, Middle Initial)  
SCOTT FORRESTER

Mailing Address 7519 Willow Run Dr NE

City Albuquerque State NM Zip Code 87113-0400

Purpose of Disbursement  
PAYROLL

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D155956

Date of Disbursement

12 / 13 / 2007

Amount of Each Disbursement this Period

6750.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

**C.**

Full Name (Last, First, Middle Initial)  
Vivian Weidner

Mailing Address 642 Fairway Loop SE

City Albuquerque State NM Zip Code 87124

Purpose of Disbursement  
PAYROLL

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D155959

Date of Disbursement

12 / 13 / 2007

Amount of Each Disbursement this Period

2500.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

0.00

**TOTAL** This Period (last page this line number only) ..... ►



**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

A.

Full Name (Last, First, Middle Initial)  
JACOB M WINOWICH

Mailing Address 7408 Terry Ct NE

City Albuquerque State NM Zip Code 87110-2720

Purpose of Disbursement

PAYROLL

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D155960

Date of Disbursement

12 / 13 / 2007

Amount of Each Disbursement this Period

2000.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

AR3 LLC DBA ATLAS RESOURCES, INC.

Mailing Address 2009 EUBANK NE

City Albuquerque State NM Zip Code 87112

Purpose of Disbursement

PAYROLL

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D154730

Date of Disbursement

12 / 02 / 2007

Amount of Each Disbursement this Period

9416.75

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)

Mark Fleisher

Mailing Address 9451 Thornton Ave. NE

City Albuquerque State NM Zip Code 87109

Purpose of Disbursement

PAYROLL

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D155061

Date of Disbursement

12 / 02 / 2007

Amount of Each Disbursement this Period

3000.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

9416.75

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

**A.**

Full Name (Last, First, Middle Initial)  
MICHAEL D. JANOVER

Mailing Address 802 Gold Ave SW

City Albuquerque State NM Zip Code 87102-3058

Purpose of Disbursement  
PAYROLL

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D155063

Date of Disbursement

12 / 02 / 2007

Amount of Each Disbursement this Period

1250.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

**B.**

Full Name (Last, First, Middle Initial)  
ADRIANNE RUTLEDGE

Mailing Address 8100 Barstow St NE

City Albuquerque State NM Zip Code 87122-2801

Purpose of Disbursement  
PAYROLL

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D155064

Date of Disbursement

12 / 02 / 2007

Amount of Each Disbursement this Period

1000.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

**C.**

Full Name (Last, First, Middle Initial)  
SCOTT FORRESTER

Mailing Address 7519 Willow Run Dr NE

City Albuquerque State NM Zip Code 87113-0400

Purpose of Disbursement  
PAYROLL

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D155062

Date of Disbursement

12 / 02 / 2007

Amount of Each Disbursement this Period

1750.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

**A.** Full Name (Last, First, Middle Initial)  
JACOB M WINOWICH

Mailing Address 7408 Terry Ct NE

City Albuquerque State NM Zip Code 87110-2720

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

**Transaction ID:** D155065  
**Date of Disbursement:** 12 / 02 / 2007

Amount of Each Disbursement this Period: 733.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
AR3 LLC DBA ATLAS RESOURCES, INC.

Mailing Address 2009 EUBANK NE

City Albuquerque State NM Zip Code 87112

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

**Transaction ID:** D154731  
**Date of Disbursement:** 11 / 17 / 2007

Amount of Each Disbursement this Period: 13841.66

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**C.** Full Name (Last, First, Middle Initial)  
Mark Fleisher

Mailing Address 9451Thornton Ave. NE

City Albuquerque State NM Zip Code 87109

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

**Transaction ID:** D155951  
**Date of Disbursement:** 11 / 17 / 2007

Amount of Each Disbursement this Period: 6000.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional) ..... ► 13841.66

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

**A.**

Full Name (Last, First, Middle Initial)  
MICHAEL D. JANOVER

Mailing Address 802 Gold Ave SW

City Albuquerque State NM Zip Code 87102-3058

Purpose of Disbursement  
PAYROLL

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D155953

Date of Disbursement

11 / 17 / 2007

Amount of Each Disbursement this Period

1818.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

**B.**

Full Name (Last, First, Middle Initial)  
ADRIANNE RUTLEDGE

Mailing Address 8100 Barstow St NE

City Albuquerque State NM Zip Code 87122-2801

Purpose of Disbursement  
PAYROLL

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D155954

Date of Disbursement

11 / 17 / 2007

Amount of Each Disbursement this Period

1000.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

**C.**

Full Name (Last, First, Middle Initial)  
SCOTT FORRESTER

Mailing Address 7519 Willow Run Dr NE

City Albuquerque State NM Zip Code 87113-0400

Purpose of Disbursement  
PAYROLL

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D155952

Date of Disbursement

11 / 17 / 2007

Amount of Each Disbursement this Period

3500.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

0.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

**A.**

Full Name (Last, First, Middle Initial)  
USAA SAVINGS BANK

Mailing Address P.O. BOX 14050

City Las Vegas State NV Zip Code 89114

Purpose of Disbursement  
CREDIT CARD PAYMENT

Candidate Name

001  
Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D154732

Date of Disbursement

12 / 12 / 2007

Amount of Each Disbursement this Period

773.96

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**B.**

Full Name (Last, First, Middle Initial)  
BEST BUY

Mailing Address 55 Hotel Cir NE

City Albuquerque State NM Zip Code 87123-1202

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

001  
Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D155984

Date of Disbursement

12 / 12 / 2007

Amount of Each Disbursement this Period

484.21

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

**C.**

Full Name (Last, First, Middle Initial)  
QWEST

Mailing Address P.O. BOX 29039

City Phoenix State AZ Zip Code 85038

Purpose of Disbursement  
PHONE & INTERNET SERVICE

Candidate Name

001  
Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D155985

Date of Disbursement

12 / 12 / 2007

Amount of Each Disbursement this Period

289.75

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) ▶

773.96

**TOTAL** This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

**A.** Full Name (Last, First, Middle Initial)  
USAA SAVINGS BANK

Mailing Address P.O. BOX 14050

City Las Vegas State NV Zip Code 89114

Purpose of Disbursement CREDIT CARD PAYMENT

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

**Transaction ID:** D154733  
**Date of Disbursement:** 11 / 28 / 2007

Amount of Each Disbursement this Period: 866.12

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Category/Type: 001

**B.** Full Name (Last, First, Middle Initial)  
BEST BUY

Mailing Address 55 Hotel Cir NE

City Albuquerque State NM Zip Code 87123-1202

Purpose of Disbursement ELECTRONIC SUPPLIES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

**Transaction ID:** D155981  
**Date of Disbursement:** 11 / 28 / 2007

Amount of Each Disbursement this Period: 464.21

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Category/Type: 001

[MEMO ITEM]

**C.** Full Name (Last, First, Middle Initial)  
LA QUINTA

Mailing Address 790 Avenida De Mesilla

City Las Cruces State NM Zip Code 88005-6572

Purpose of Disbursement ACCOMMODATIONS FOR TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

**Transaction ID:** D155982  
**Date of Disbursement:** 11 / 28 / 2007

Amount of Each Disbursement this Period: 132.16

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Category/Type: 002

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶ 866.12

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

**A.**

Full Name (Last, First, Middle Initial)  
QWEST

Mailing Address P.O. BOX 29039

City Phoenix State AZ Zip Code 85038

Purpose of Disbursement  
PHONE SERVICE

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D155983

Date of Disbursement

11 / 28 / 2007

Amount of Each Disbursement this Period

269.75

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

**B.**

Full Name (Last, First, Middle Initial)  
USAA SAVINGS BANK

Mailing Address P.O. BOX 14050

City Las Vegas State NV Zip Code 89114

Purpose of Disbursement  
CREDIT CARD PAYMENT

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D154734

Date of Disbursement

11 / 24 / 2007

Amount of Each Disbursement this Period

1787.68

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**C.**

Full Name (Last, First, Middle Initial)  
BIEN MUR TRAVEL CENTER

Mailing Address 100 Bien Mur Dr NE

City Albuquerque State NM Zip Code 87113-2154

Purpose of Disbursement  
FUEL FOR VEHICLE

Candidate Name

002  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D155978

Date of Disbursement

11 / 24 / 2007

Amount of Each Disbursement this Period

29.24

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

1787.68

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

**A.**

Full Name (Last, First, Middle Initial)  
CHILI'S GRILL

Mailing Address 6909 Menaul Blvd NE

City Albuquerque State NM Zip Code 87110-3697

Purpose of Disbursement  
CATERING COSTS

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D155976

Date of Disbursement

11 / 24 / 2007

Amount of Each Disbursement this Period

29.33

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

**B.**

Full Name (Last, First, Middle Initial)  
CHILI'S GRILL

Mailing Address 6909 Menaul Blvd NE

City Albuquerque State NM Zip Code 87110-3697

Purpose of Disbursement  
CATERING COSTS

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D155977

Date of Disbursement

11 / 24 / 2007

Amount of Each Disbursement this Period

33.86

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

**C.**

Full Name (Last, First, Middle Initial)  
DISCO DISPLAY HOUSE

Mailing Address 3123 CENTRAL AVE NE

City Albuquerque State NM Zip Code 87106

Purpose of Disbursement  
EVENT RENTALS

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D155974

Date of Disbursement

11 / 24 / 2007

Amount of Each Disbursement this Period

53.44

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶



**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

**A.**

Full Name (Last, First, Middle Initial)  
HYATT REGENCY

Mailing Address 300 Tijeras Ave NW

City Albuquerque State NM Zip Code 87102-3267

Purpose of Disbursement  
CATERING COSTS

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D155980

Date of Disbursement

11 / 24 / 2007

Amount of Each Disbursement this Period

29.05

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

**B.**

Full Name (Last, First, Middle Initial)  
JINJA BAR AND BISTRO

Mailing Address 8900 Holly Ave NE

City Albuquerque State NM Zip Code 87122-2979

Purpose of Disbursement  
CATERING COSTS

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D155979

Date of Disbursement

11 / 24 / 2007

Amount of Each Disbursement this Period

75.36

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

**C.**

Full Name (Last, First, Middle Initial)  
OFFICE DEPOT

Mailing Address 1405 RENAISSANCE BLVD NE

City Albuquerque State NM Zip Code 87107

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D155970

Date of Disbursement

11 / 24 / 2007

Amount of Each Disbursement this Period

104.24

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

**A.** Full Name (Last, First, Middle Initial)  
**OFFICE DEPOT**

Mailing Address 1405 RENAISSANCE BLVD NE

City Albuquerque State NM Zip Code 87107

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

**Transaction ID:** D155971  
**Date of Disbursement:** 11 / 24 / 2007

Amount of Each Disbursement this Period: 106.86

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**[MEMO ITEM]**

Category/Type: 001

**B.** Full Name (Last, First, Middle Initial)  
**QWEST**

Mailing Address P.O. BOX 29039

City Phoenix State AZ Zip Code 85038

Purpose of Disbursement TRUNK LINE EXTENSIONS

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

**Transaction ID:** D155972  
**Date of Disbursement:** 11 / 24 / 2007

Amount of Each Disbursement this Period: 535.80

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**[MEMO ITEM]**

Category/Type: 001

**C.** Full Name (Last, First, Middle Initial)  
**QWEST**

Mailing Address P.O. BOX 29039

City Phoenix State AZ Zip Code 85038

Purpose of Disbursement TELEPHONE SERVICE LINES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

**Transaction ID:** D155973  
**Date of Disbursement:** 11 / 24 / 2007

Amount of Each Disbursement this Period: 700.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**[MEMO ITEM]**

Category/Type: 001

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶ 0.00

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

**A.** Full Name (Last, First, Middle Initial)  
Sheraton Uptown

Mailing Address 2600 Louisiana Blvd NE

City Albuquerque State NM Zip Code 87110-3604

Purpose of Disbursement CATERING COSTS

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

**Transaction ID:** D155975  
**Date of Disbursement:** 11 / 24 / 2007

Amount of Each Disbursement this Period: 90.50

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**[MEMO ITEM]**

Category/Type: 001

**B.** Full Name (Last, First, Middle Initial)  
BANK OF AMERICA

Mailing Address P.O. BOX 17220

City Baltimore State MD Zip Code 21297

Purpose of Disbursement CREDIT CARD PAYMENT

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

**Transaction ID:** D154735  
**Date of Disbursement:** 12 / 31 / 2007

Amount of Each Disbursement this Period: 936.80

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Category/Type: 001

**C.** Full Name (Last, First, Middle Initial)  
CHILI'S GRILL

Mailing Address 6909 Menaul Blvd NE

City Albuquerque State NM Zip Code 87110-3697

Purpose of Disbursement CATERING COSTS

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

**Transaction ID:** D155987  
**Date of Disbursement:** 12 / 31 / 2007

Amount of Each Disbursement this Period: 149.88

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**[MEMO ITEM]**

Category/Type: 001

**SUBTOTAL** of Disbursements This Page (optional) ..... ► 936.80

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

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<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

**A.**

Full Name (Last, First, Middle Initial)  
EXPEDIA TRAVEL

Mailing Address 3150 139th Ave SE

City Bellevue State WA Zip Code 98005-4046

Purpose of Disbursement  
TRAVEL ARRANGEMENTS

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D155990

Date of Disbursement

12 / 31 / 2007

Amount of Each Disbursement this Period

115.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

**B.**

Full Name (Last, First, Middle Initial)  
Sheraton Uptown

Mailing Address 2600 Louisiana Blvd NE

City Albuquerque State NM Zip Code 87110-3604

Purpose of Disbursement  
TRAVEL

Candidate Name

002  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D155989

Date of Disbursement

12 / 31 / 2007

Amount of Each Disbursement this Period

359.70

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

**C.**

Full Name (Last, First, Middle Initial)  
Staples

Mailing Address 6001 Menaul Blvd NE

City Albuquerque State NM Zip Code 87110-3317

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D155986

Date of Disbursement

12 / 31 / 2007

Amount of Each Disbursement this Period

148.22

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

A.	Full Name (Last, First, Middle Initial) UNITED STATES POST OFFICE	Transaction ID: D155988 Date of Disbursement 12 / 31 / 2007
	Mailing Address ACADEMY STATION	Amount of Each Disbursement this Period 164.00
	City Albuquerque	State NM
	Zip Code 87109	
	Purpose of Disbursement POSTAGE STAMPS	001 Category/ Type
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	<b>[MEMO ITEM]</b>

B.	Full Name (Last, First, Middle Initial) BANK OF AMERICA	Transaction ID: D154736 Date of Disbursement 11 / 28 / 2007
	Mailing Address P.O. BOX 17220	Amount of Each Disbursement this Period 2829.20
	City Baltimore	State MD
	Zip Code 21297	
	Purpose of Disbursement CREDIT CARD PAYMENT	001 Category/ Type
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) DESIGNER GRAPHICS	Transaction ID: D155967 Date of Disbursement 11 / 28 / 2007
	Mailing Address 12404 HWY 155 SOUTH	Amount of Each Disbursement this Period 2079.20
	City Tyler	State TX
	Zip Code 75703	
	Purpose of Disbursement GRAPHICS DESIGN	006 Category/ Type
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	<b>[MEMO ITEM]</b>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	2829.20
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

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<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

**A.**

Full Name (Last, First, Middle Initial)  
QWEST

Mailing Address P.O. BOX 29039

City Phoenix State AZ Zip Code 85038

Purpose of Disbursement  
DEPOSIT FOR NEW TELEPHONE LINES

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D155968

Date of Disbursement

11 / 28 / 2007

Amount of Each Disbursement this Period

750.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

**B.**

Full Name (Last, First, Middle Initial)  
VISA

Mailing Address PO Box 8530

City Albuquerque State NM Zip Code 87198-8530

Purpose of Disbursement  
CREDIT CARD PAYMENT

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D154923

Date of Disbursement

12 / 26 / 2007

Amount of Each Disbursement this Period

329.79

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**C.**

Full Name (Last, First, Middle Initial)  
EL PARAGUA

Mailing Address 603 Santa Cruz Rd

City Espanola State NM Zip Code 87532-2873

Purpose of Disbursement  
CATERING COSTS

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D155969

Date of Disbursement

12 / 26 / 2007

Amount of Each Disbursement this Period

329.79

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) ▶

329.79

**TOTAL** This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

**A.**

Full Name (Last, First, Middle Initial)  
**NEW MEXICANS FOR MARTY-PETTY CASH ACCOUNT**

Mailing Address PO Box 91990

City Albuquerque State NM Zip Code 87199-1990

Purpose of Disbursement  
PETTY CASH-IMPREST FUND

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D158370

Date of Disbursement

11 / 23 / 2007

Amount of Each Disbursement this Period

275.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**B.**

Full Name (Last, First, Middle Initial)  
**ART AND ADVERTISING**

Mailing Address 503 Monroe St SE

City Albuquerque State NM Zip Code 87108-3503

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D158375

Date of Disbursement

11 / 09 / 2007

Amount of Each Disbursement this Period

53.44

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

**C.**

Full Name (Last, First, Middle Initial)  
**BIG LOTS**

Mailing Address 5341 Menaul Blvd NE

City Albuquerque State NM Zip Code 87110-3113

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D158374

Date of Disbursement

11 / 17 / 2007

Amount of Each Disbursement this Period

36.98

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

275.00

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

**A.**

Full Name (Last, First, Middle Initial)  
CHILI'S GRILL

Mailing Address 6909 Menaul Blvd NE

City Albuquerque State NM Zip Code 87110-3697

Purpose of Disbursement  
CATERING COSTS

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D158373

Date of Disbursement

11 / 17 / 2007

Amount of Each Disbursement this Period

31.90

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

**B.**

Full Name (Last, First, Middle Initial)  
LANGELLS

Mailing Address 2900 Carlisle Blvd NE

City Albuquerque State NM Zip Code 87110-2808

Purpose of Disbursement  
SUPPLIES-SIGNAGE

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D158377

Date of Disbursement

11 / 07 / 2007

Amount of Each Disbursement this Period

32.91

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

**C.**

Full Name (Last, First, Middle Initial)  
LOWE'S HOME CENTERS, INC.

Mailing Address 6200 Paseo Del Norte NE

City Albuquerque State NM Zip Code 87113-1712

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D158376

Date of Disbursement

11 / 06 / 2007

Amount of Each Disbursement this Period

13.65

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶



**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

<b>A.</b>	Full Name (Last, First, Middle Initial) Staples Mailing Address 6001 Menaul Blvd NE City Albuquerque State NM Zip Code 87110-3317 Purpose of Disbursement OFFICE SUPPLIES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D158371 Date of Disbursement 11 / 16 / 2007 Amount of Each Disbursement this Period 97.85 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
<b>B.</b>	Full Name (Last, First, Middle Initial) VALERO CORNER STORE Mailing Address 2550 Central Ave SE City Albuquerque State NM Zip Code 87106-3609 Purpose of Disbursement OFFICE SUPPLIES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D158372 Date of Disbursement 11 / 17 / 2007 Amount of Each Disbursement this Period 8.27 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
<b>C.</b>	Full Name (Last, First, Middle Initial) NEW MEXICANS FOR MARTY-PETTY CASH ACCOUNT Mailing Address PO Box 91990 City Albuquerque State NM Zip Code 87199-1990 Purpose of Disbursement PETTY CASH -IMPREST FUND Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D158378 Date of Disbursement 11 / 28 / 2007 Amount of Each Disbursement this Period 398.38 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**398.38**

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

A.	Full Name (Last, First, Middle Initial) <b>BIG LOTS</b>	<b>Transaction ID: D158384</b>
	Mailing Address 5341 Menaul Blvd NE	Date of Disbursement MM / DD / YYYY 11 / 16 / 2007
	City Albuquerque State NM Zip Code 87110-3113	Amount of Each Disbursement this Period 98.16
	Purpose of Disbursement OFFICE SUPPLIES Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="checkbox"/> Category/Type 001
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b>

B.	Full Name (Last, First, Middle Initial) <b>DOLLAR TREE STORES</b>	<b>Transaction ID: D158411</b>
	Mailing Address 2266 Wyoming Blvd NE	Date of Disbursement MM / DD / YYYY 11 / 10 / 2007
	City Albuquerque State NM Zip Code 87112-2620	Amount of Each Disbursement this Period 29.99
	Purpose of Disbursement OFFICE SUPPLIES Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="checkbox"/> Category/Type 001
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b>

C.	Full Name (Last, First, Middle Initial) <b>FED EX KINKO'S</b>	<b>Transaction ID: D158382</b>
	Mailing Address 2400 Louisiana Blvd NE	Date of Disbursement MM / DD / YYYY 11 / 21 / 2007
	City Albuquerque State NM Zip Code 87110-4303	Amount of Each Disbursement this Period 11.23
	Purpose of Disbursement PHOTOCOPIES Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="checkbox"/> Category/Type 001
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>0.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

A.	Full Name (Last, First, Middle Initial) FED EX KINKO'S	Transaction ID: D158383 Date of Disbursement 11 / 20 / 2007
	Mailing Address 2400 Louisiana Blvd NE	Amount of Each Disbursement this Period 26.88
	City Albuquerque State NM Zip Code 87110-4303	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
	Purpose of Disbursement OVERNIGHT DELIVERY Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type

B.	Full Name (Last, First, Middle Initial) Staples	Transaction ID: D158386 Date of Disbursement 11 / 19 / 2007
	Mailing Address 6001 Menaul Blvd NE	Amount of Each Disbursement this Period 5.12
	City Albuquerque State NM Zip Code 87110-3317	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
	Purpose of Disbursement OFFICE SUPPLIES Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type

C.	Full Name (Last, First, Middle Initial) TECOLOTE CAFE	Transaction ID: D158380 Date of Disbursement 11 / 14 / 2007
	Mailing Address 1203 Cerrillos Rd	Amount of Each Disbursement this Period 32.00
	City Santa Fe State NM Zip Code 87505-0943	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
	Purpose of Disbursement CATERING COSTS Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

**A.**

Full Name (Last, First, Middle Initial)  
TRAVEL CENTERS

Mailing Address 2501 University Blvd NE

City Albuquerque State NM Zip Code 87107-1707

Purpose of Disbursement  
TRAVEL REIMBURSEMENT

Candidate Name

002  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D158385

Date of Disbursement

11 / 27 / 2007

Amount of Each Disbursement this Period

31.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

**B.**

Full Name (Last, First, Middle Initial)  
UNITED STATES POST OFFICE

Mailing Address ACADEMY STATION

City Albuquerque State NM Zip Code 87109

Purpose of Disbursement  
POSTAGE STAMPS

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D158381

Date of Disbursement

11 / 26 / 2007

Amount of Each Disbursement this Period

82.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

**C.**

Full Name (Last, First, Middle Initial)  
UNITED STATES POST OFFICE

Mailing Address ACADEMY STATION

City Albuquerque State NM Zip Code 87109

Purpose of Disbursement  
POSTAGE STAMPS

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D158379

Date of Disbursement

11 / 13 / 2007

Amount of Each Disbursement this Period

82.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

**A.**

Full Name (Last, First, Middle Initial)  
**NEW MEXICANS FOR MARTY-PETTY CASH ACCOUNT**

Mailing Address PO Box 91990

City Albuquerque State NM Zip Code 87199-1990

Purpose of Disbursement  
PETTY CASH-IMPREST FUND

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

**Transaction ID: D158387**

Date of Disbursement

12 / 06 / 2007

Amount of Each Disbursement this Period

386.90

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**B.**

Full Name (Last, First, Middle Initial)  
**MICHAELS ARTS AND CRAFTS STORE**

Mailing Address 4410 Wyoming Blvd NE

City Albuquerque State NM Zip Code 87111-3173

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

**Transaction ID: D158393**

Date of Disbursement

11 / 14 / 2007

Amount of Each Disbursement this Period

15.41

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**[MEMO ITEM]**

**C.**

Full Name (Last, First, Middle Initial)  
**Office Max**

Mailing Address 3301 Menaul Blvd NE

City Albuquerque State NM Zip Code 87107

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

**Transaction ID: D158412**

Date of Disbursement

11 / 29 / 2007

Amount of Each Disbursement this Period

88.70

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

386.90

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

PAGE 190 / 197

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

**A.**

Full Name (Last, First, Middle Initial)  
Office Max

Mailing Address 3301 Menaul Blvd NE

City Albuquerque State NM Zip Code 87107

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D158391

Date of Disbursement

11 / 30 / 2007

Amount of Each Disbursement this Period

88.70

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

**B.**

Full Name (Last, First, Middle Initial)  
RADIO SHACK

Mailing Address 6600 Menaul Blvd NE

City Albuquerque State NM Zip Code 87110-3428

Purpose of Disbursement  
COMPUTER SUPPLIES

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D158390

Date of Disbursement

11 / 29 / 2007

Amount of Each Disbursement this Period

37.40

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

**C.**

Full Name (Last, First, Middle Initial)  
ROBERTS OIL-PUMP AND SAVE

Mailing Address 2204 Menaul Blvd NE

City Albuquerque State NM Zip Code 87107-1726

Purpose of Disbursement  
TRAVEL REIMBURSEMENT

Candidate Name

002  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D158392

Date of Disbursement

11 / 30 / 2007

Amount of Each Disbursement this Period

55.31

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

A.	Full Name (Last, First, Middle Initial) Staples	Transaction ID: D158389 Date of Disbursement 11 / 29 / 2007
	Mailing Address 6001 Menaul Blvd NE	Amount of Each Disbursement this Period 64.09
	City Albuquerque State NM Zip Code 87110-3317	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
	Purpose of Disbursement OFFICE SUPPLIES Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type

B.	Full Name (Last, First, Middle Initial) XPEDX	Transaction ID: D158388 Date of Disbursement 11 / 02 / 2007
	Mailing Address 2812 Candelaria Rd NE	Amount of Each Disbursement this Period 37.29
	City Albuquerque State NM Zip Code 87107-1902	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
	Purpose of Disbursement OFFICE SUPPLIES Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type

C.	Full Name (Last, First, Middle Initial) NEW MEXICANS FOR MARTY-PETTY CASH ACCOUNT	Transaction ID: D158394 Date of Disbursement 11 / 21 / 2007
	Mailing Address PO Box 91990	Amount of Each Disbursement this Period 500.00
	City Albuquerque State NM Zip Code 87199-1990	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement PETTY CASH-IMPREST FUND Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

A.

Full Name (Last, First, Middle Initial)  
Staples

Transaction ID: D158395

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	1		2	0	0	7

Mailing Address 6001 Menaul Blvd NE

Amount of Each Disbursement this Period

51.06
-------

City Albuquerque State NM Zip Code 87110-3317

Purpose of Disbursement  
OFFICE SUPPLIES

001  
Category/  
Type

Candidate Name

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
Staples

Transaction ID: D158396

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	5		2	0	0	7

Mailing Address 6001 Menaul Blvd NE

Amount of Each Disbursement this Period

96.15
-------

City Albuquerque State NM Zip Code 87110-3317

Purpose of Disbursement  
OFFICE SUPPLIES

001  
Category/  
Type

Candidate Name

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
Staples

Transaction ID: D158397

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	3		2	0	0	7

Mailing Address 6001 Menaul Blvd NE

Amount of Each Disbursement this Period

84.84
-------

City Albuquerque State NM Zip Code 87110-3317

Purpose of Disbursement  
OFFICE SUPPLIES

001  
Category/  
Type

Candidate Name

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ..... ▶

0.00
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TOTAL This Period (last page this line number only) ..... ▶

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**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

A.	Full Name (Last, First, Middle Initial) Staples	Transaction ID: D158398
	Mailing Address 6001 Menaul Blvd NE	Date of Disbursement 12 / 03 / 2007
	City Albuquerque State NM Zip Code 87110-3317	Amount of Each Disbursement this Period 48.93
	Purpose of Disbursement OFFICE SUPPLIES	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM]
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Staples	Transaction ID: D158399
	Mailing Address 6001 Menaul Blvd NE	Date of Disbursement 12 / 03 / 2007
	City Albuquerque State NM Zip Code 87110-3317	Amount of Each Disbursement this Period 96.16
	Purpose of Disbursement OFFICE SUPPLIES	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM]
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Staples	Transaction ID: D158400
	Mailing Address 6001 Menaul Blvd NE	Date of Disbursement 12 / 03 / 2007
	City Albuquerque State NM Zip Code 87110-3317	Amount of Each Disbursement this Period 64.10
	Purpose of Disbursement OFFICE SUPPLIES	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM]
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

A.

Full Name (Last, First, Middle Initial)  
XPEDX

Transaction ID: D158413  
Date of Disbursement

Mailing Address 2812 Candelaria Rd NE

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	3	0	/	2	0	0	7

City State Zip Code  
Albuquerque NM 87107-1902

Amount of Each Disbursement this Period

58.76
-------

Purpose of Disbursement  
OFFICE SUPPLIES

001
-----

Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

**[MEMO ITEM]**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ..... ►

0.00
------

TOTAL This Period (last page this line number only) ..... ►

272242.09
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**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

A.	Full Name (Last, First, Middle Initial) ANATV	Transaction ID: D154921 Date of Disbursement 11 / 11 / 2007
	Mailing Address 3317 CARDENAS NE	Amount of Each Disbursement this Period 200.00
	City Albuquerque State NM Zip Code 87110	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement REFUND OF CONTRIBUTION Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) GLORIA C. CHAVEZ	Transaction ID: D154621 Date of Disbursement 12 / 12 / 2007
	Mailing Address 7416 ASTER RD SW	Amount of Each Disbursement this Period 100.00
	City Albuquerque State NM Zip Code 87121	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement REQUESTED REFUND OF CONTRIBUTION Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Jay Hart	Transaction ID: D154640 Date of Disbursement 12 / 19 / 2007
	Mailing Address 9621 San Francisco Rd NE	Amount of Each Disbursement this Period 500.00
	City Albuquerque State NM Zip Code 87122-3438	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement REFUND OF CONTRIBUTION Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>800.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 196 / 197

<input type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input checked="" type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

A.

Full Name (Last, First, Middle Initial)

Douglas Vaughn

Mailing Address 11708 ZINFANDEL AVE NE

City State Zip Code  
Albuquerque NM 87109-3345

Purpose of Disbursement  
REFUND OF CONTRIB. GIVEN FOR GENERAL ELE

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

Transaction ID: D154931

Date of Disbursement

/   /

Amount of Each Disbursement this Period

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) .....

700.00

TOTAL This Period (last page this line number only) .....

1500.00

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
New Mexicans for Marty

**A.**

Full Name (Last, First, Middle Initial)  
PEOPLE FOR BEN LUJAN

Mailing Address 5 Entrada Celedon Y Nestora

City Santa Fe State NM Zip Code 87506-9740

Purpose of Disbursement  
CONGRESS CANDIDATE CONTRIBUTION

Candidate Name  
Mr. Ben Lujan

Office Sought:  House  
 Senate  
 President  
State: NM District: 03

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

011  
Category/  
Type

Transaction ID: D154926  
Date of Disbursement

12 / 31 / 2007

Amount of Each Disbursement this Period

2000.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**B.**

Full Name (Last, First, Middle Initial)  
FRIENDS OF JOE BACA

Mailing Address 201 North E Street Suite 102

City San Bernardino State CA Zip Code 92401

Purpose of Disbursement  
CONTRIBUTION OF US CONGRESS

Candidate Name  
Mr Joe Baca

Office Sought:  House  
 Senate  
 President  
State: CA District: 43

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

011  
Category/  
Type

Transaction ID: D155093  
Date of Disbursement

12 / 31 / 2007

Amount of Each Disbursement this Period

2000.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**C.**

Full Name (Last, First, Middle Initial)  
UDALL FOR US ALL

Mailing Address PO Box 208

City Santa Fe State NM Zip Code 87504-0208

Purpose of Disbursement  
CONTRIBUTION - U.S. SENATE-UDALL

Candidate Name  
Mr. Tom Udall

Office Sought:  House  
 Senate  
 President  
State: NM District:

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

011  
Category/  
Type

Transaction ID: D154645  
Date of Disbursement

12 / 27 / 2007

Amount of Each Disbursement this Period

2000.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) ▶

6000.00

**TOTAL** This Period (last page this line number only) ▶

6000.00