

**State of New Mexico
Office of the Secretary of State
Ethics Administration**

325 Don Gaspar, Suite 300
Santa Fe, New Mexico 87503
(800) 477 - 3632 or (505) 827 - 3600

2020 LOBBYIST REPORTING FORM

Report of Expenditures & Contributions

FORM A

IDENTIFYING INFORMATION & FINANCIAL SUMMARY

| | | | |
|---|---|--|-------------|
| REPORT DUE: | January 15 | within 48 hours during session | X October 7 |
| FILING AS A: | <input checked="" type="checkbox"/> Lobbyist | <input type="checkbox"/> Lobbyist Employer | |
| 1.a Name of Lobbyist: Katherine Crociata | | | |
| Telephone: _____ Fax: _____ | | | |
| b. Address: 853 Don Diego Ave. City: Santa Fe State: NM Zip: 87508 | | | |
| c. If filing as lobbyist employer, the Employer's name: _____ Address: _____ Telephone #: _____ | | | |
| 2. | FINANCIAL SUMMARY (Cumulative) | | |
| a. | Total Meal and Beverage expenses (incl. Form B) | \$0.00 | |
| b. | Total Other Entertainment Expenses (incl. Form B) | \$436.85 | |
| d. | Total other Expenses (Incl. Form B) | \$0.00 | |
| e. | Total Special Event Expenses (Incl. Form C) | \$0.00 | |
| f. | TOTAL EXPENDITURES (Incl. Forms B and C) | | \$436.85 |
| g. | TOTAL POLITICAL CONTRIBUTIONS (Form D) | | \$100.00 |

Report of Expenditures
FORM B
EXPENDITURES

Name of Lobbyist or Lobbyist Employer: **Katherine Crociata**

REPORT DUE: **January 15** within 48 hours during session **X October 7**

Itemize each expenditure of \$100 or more and specify the type of expenditure by entering a category number:
(a) meals & beverages; (b) other entertainment expenditures; or (c) other expenditures [2-11-6 A (1) NMSA 1978]

| Date | Name of Payee | Beneficiary | Type | Purpose for which made or incurred | Expenditure On Behalf Of | Amount |
|-----------|--------------------|---------------------|------|------------------------------------|--------------------------|----------|
| 8/13/2020 | Katherine Crociata | Various legislators | 2 | Discuss legislative items | | \$436.85 |

Subtotal Form B: \$436.85

Report of Expenditures
FORM C
SPECIAL EVENTS

Name of Lobbyist or Lobbyist Employer: **Katherine Crociata**

REPORT DUE: **January 15** within 48 hours during session **X October 7**

| Date | Type of Event & Location | Group(s) Invited | Total Expenses |
|------|--------------------------|------------------|----------------|
|------|--------------------------|------------------|----------------|

Total Special Events

Report of Expenditures
FORM D
POLITICAL CONTRIBUTIONS

2020

Name of Lobbyist or Lobbyist Employer: **Katherine Crociata**

REPORT DUE: **January 15** within 48 hours during session **X October 7**

| Date | Name of candidate, public official or ballot issue supported or opposed | Contribution On Behalf Of | Amount |
|-----------|---|---------------------------|----------|
| 7/17/2020 | Javier Martinez | Katherine Crociata | \$100.00 |

Total Political Contributions \$100.00