

**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

**2021 LOBBYIST REPORTING FORM**

Report of Expenditures & Contributions

**FORM A**

**IDENTIFYING INFORMATION & FINANCIAL SUMMARY**

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

**FILING AS A:**                      **X Lobbyist**    **Lobbyist Employer**

|   |           |       |       |
|---|-----------|-------|-------|
| Name of Lobbyist  | Telephone | Fax   |       |
| 1.a Katherine Crociata  |           |       |       |
| .   |           |       |       |
| Address   | City      | State | Zip   |
| b. 853 Don Diego Ave.   | Santa Fe  | NM    | 87508 |
| If filing as lobbyist employer, the Employer's name      Address      Telephone # |           |       |       |
| C.  |           |       |       |

|           |   |  |        |        |
|-----------|---|--|--------|--------|
| <b>2.</b> | <b>FINANCIAL SUMMARY (Cumulative)</b>             |  |        |        |
| a.        | Total Meal and Beverage expenses (incl. Form B)   |  | \$0.00 |        |
| b.        | Total Other Entertainment Expenses (incl. Form B) |  | \$0.00 |        |
| 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)          |  |        | \$0.00 |
| g.        | TOTAL POLITICAL CONTRIBUTIONS (Form D)            |  |        | \$0.00 |

Report of Expenditures  
FORM B  
EXPENDITURES

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

REPORT  January 15 within 48 hours during session  
DUE: \_\_\_\_\_

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 |
|------|---------------|-------------|------|------------------------------------|--------------------------|--------|
|------|---------------|-------------|------|------------------------------------|--------------------------|--------|

Subtotal Form B:

Report of Expenditures  
FORM C  
SPECIAL EVENTS

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

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

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

Total Special Events

Report of Expenditures  
FORM D  
POLITICAL CONTRIBUTIONS

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

REPORT DUE:  January 15 within 48 hours during session

| Date | Name of candidate, public official or ballot issue supported or opposed | Contribution On Behalf Of | Amount |
|------|---|---------------------------|--------|
|------|---|---------------------------|--------|

Total Political Contributions