

**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

2014 LOBBYIST REPORTING FORM

Report of Expenditures & Contributions

FORM A

IDENTIFYING INFORMATION & FINANCIAL SUMMARY

REPORT DUE:	January 15	<input checked="" type="checkbox"/> within 48 hours during session	May 1								
FILING AS A:	<input checked="" type="checkbox"/> Lobbyist		<input type="checkbox"/> Lobbyist Employer								
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 35%;">Name of Lobbyist</td> <td style="width: 25%;">Telephone</td> <td colspan="2" style="width: 35%;">Fax</td> </tr> <tr> <td>1.a Joseph Dennis Menapace</td> <td>505-867-5052</td> <td colspan="2"></td> </tr> </table>				Name of Lobbyist	Telephone	Fax		1.a Joseph Dennis Menapace	505-867-5052		
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c.											
2.	FINANCIAL SUMMARY (Cumulative)										
a.	Total Meal and Beverage expenses (incl. Form B)	\$0.00									
b.	Total Other Entertainment Expenses (incl. Form B)	\$0.00									
c.	Total Gift Expenses (Incl. Form B)	\$1,790.88									
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)		\$1,790.88								
g.	TOTAL POLITICAL CONTRIBUTIONS (Form D)		\$0.00								

I hereby swear to affirm under penalty of law that this statement is true, correct and complete to the best of my knowledge

(Signature of Lobbyist/Lobbyist Employer)

Report of Expenditures
FORM B
EXPENDITURES

Name of Lobbyist or Lobbyist Employer: Joseph Dennis Menapace
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REPORT DUE:	January 15	<input checked="" type="checkbox"/> within 48 hours during session	May 1
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Itemize each expenditure of more than \$75 and specify the type of expenditure by entering a category number: (1) meals & beverages; (2) other entertainment expenditures; (3) gifts; or (4) other expenditures. [2-11-6C NMSA 1978]

Date	Name of Payee	Beneficiary	Type	Purpose for which made or incurred	Amount
2/6/2014	NM Dental Association	All Legislators	3	Oral Health	\$1,790.88

Subtotal Form B: \$1,790.88

Report of Expenditures
FORM C
SPECIAL EVENTS

Name of Lobbyist or Lobbyist Employer: Joseph Dennis Menapace			
REPORT DUE:	January 15	X within 48 hours during session	May 1
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: Joseph Dennis Menapace			
REPORT DUE:	January 15	X within 48 hours during session	May 1
Date	Name of candidate, public official or ballot issue supported or opposed		Amount

Total Political Contributions

Report of Expenditures
FORM E
BUNDLING DISCLOSURE

NOTE: if you or any of your employers delivered, directly or indirectly, separate political contributions from other contributors of five hundred dollars (\$500.00) or more, in the aggregate, for an election to a candidate, campaign, committee, or anyone authorized by a candidate to receive funds on his/her behalf, the law requires disclosure of the names, addresses and occupations of the contributors.

Name of Lobbyist or Lobbyist Employer:	Joseph Dennis Menapace		
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