

**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

**2015 LOBBYIST REPORTING FORM**

Report of Expenditures & Contributions

**FORM A**

**IDENTIFYING INFORMATION & FINANCIAL SUMMARY**

<b>REPORT DUE:</b>	<input checked="" type="checkbox"/> <b>January 15</b>	<b>within 48 hours during session</b>	<b>May 1</b>								
<b>FILING AS A:</b>	<input checked="" type="checkbox"/> <b>Lobbyist</b>	<input type="checkbox"/> <b>Lobbyist Employer</b>									
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">Name of Lobbyist</td> <td style="width: 30%;">Telephone</td> <td colspan="2" style="width: 40%;">Fax</td> </tr> <tr> <td>1.a Max Baca</td> <td>505.454.3272</td> <td colspan="2"></td> </tr> </table>				Name of Lobbyist	Telephone	Fax		1.a Max Baca	505.454.3272		
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<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;">Address</td> <td style="width: 25%;">City</td> <td style="width: 25%;">State</td> <td style="width: 25%;">Zip</td> </tr> <tr> <td>b. P.O. Box 9000</td> <td>Las Vegas</td> <td>NM</td> <td>87701</td> </tr> </table>				Address	City	State	Zip	b. P.O. Box 9000	Las Vegas	NM	87701
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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									
c.	Total Gift 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: <b>Max Baca</b>
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REPORT DUE:	X January 15	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
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Subtotal Form B:

Report of Expenditures  
FORM C  
SPECIAL EVENTS

Name of Lobbyist or Lobbyist Employer: <b>Max Baca</b>			
<b>REPORT DUE:</b>	<b>X January 15</b>	<b>within 48 hours during session</b>	<b>May 1</b>
<b>Date</b>	<b>Type of Event &amp; Location</b>	<b>Group(s) Invited</b>	<b>Total Expenses</b>

Total Special Events

Report of Expenditures  
FORM D  
POLITICAL CONTRIBUTIONS

Name of Lobbyist or Lobbyist Employer: <b>Max Baca</b>		
REPORT DUE:	<input checked="" type="checkbox"/> January 15	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:	Max Baca
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