



State of New Mexico  
Office of the Secretary of State  
Ethics Administration  
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## **POLITICAL ACTION COMMITTEE "STATEMENT OF NO ACTIVITY"**

This form is to be used **ONLY** by those **CANDIDATES WHO HAVE NOT RECEIVED** any contributions and **HAVE NOT MADE** any expenditures since the candidate's last report was filed with the office of the Secretary of State.

### **2014 Second Primary**

(Please check Statement date)

**Apr.2014**

(cutoff Date 4/7/14) \_\_\_\_\_

**May.2014 X**

(cutoff Date 5/5/14) \_\_\_\_\_

I, \_\_\_\_\_, candidate for office of \_\_\_\_\_  
in the County of \_\_\_\_\_ (if applicable) hereby declare that I did not receive any  
contributions and have not made any expenditures since my last report was filed.

Dated: \_\_\_\_\_, \_\_\_\_\_ 1

By \_\_\_\_\_  
(Signature of Candidate or Treasurer )

\_\_\_\_\_  
(Printed Name)