

**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

**2011 LOBBYIST REPORTING FORM**

Report of Expenditures & Contributions

**FORM A**

**IDENTIFYING INFORMATION & FINANCIAL SUMMARY**

<b>REPORT DUE:</b>	<b>X</b>	<b>May 2</b>	<b>within 48 hours during session</b>	<b>X</b>	<b>May 2</b>
<b>FILING AS A:</b>	<b>X</b>	<b>Lobbyist</b>	<b>Lobbyist Employer</b>		
Name of Lobbyist	Telephone		Fax		
1.a Teresa I. Leger de Fernandez	505.982.3622				
Address	City	State	Zip		
b. 1239 Paseo De Peralta	Santa Fe	NM	87501		
If filing as lobbyist employer, the Employer's name	Address		Telephone #		
C.					
2.	<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

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)

**NOTARY INFORMATION**

State of \_\_\_\_\_

County of \_\_\_\_\_

Subscribed and sworn to me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by \_\_\_\_\_

**(SEAL)**

\_\_\_\_\_  
(Signature of Notarial Officer)

My commission expires: \_\_\_\_\_

Report of Expenditures  
FORM B  
EXPENDITURES

Name of Lobbyist or Lobbyist Employer:	Teresa I. Leger de Fernandez
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REPORT DUE:	X	May 2	within 48 hours during session	X	May 2
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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: **Teresa I. Leger de Fernandez**

REPORT DUE: **X May 2** within 48 hours during session **X May 2**

Date	Type of Event & Location	Group(s) Invited	Total Expenses
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Total Special Events

Report of Expenditures  
FORM D  
POLITICAL CONTRIBUTIONS

Name of Lobbyist or Lobbyist Employer: <b>Teresa I. Leger de Fernandez</b>				
<b>REPORT DUE:</b>	<b>X</b>	<b>May 2</b>	<b>within 48 hours during session</b>	<b>X May 2</b>
<b>Date</b>	<b>Name of candidate, public official or ballot issue supported or opposed</b>			<b>Amount</b>

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:	Teresa I. Leger de Fernandez
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REPORT DUE:	X	May 2	within 48 hours during session	X	May 2
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