

**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

**2017 LOBBYIST REPORTING FORM**

Report of Expenditures & Contributions

**FORM A**

**IDENTIFYING INFORMATION & FINANCIAL SUMMARY**

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

**FILING AS A:**  Lobbyist  Lobbyist Employer

1.a	Name of Lobbyist	Telephone	Fax
b.	Address	City	State Zip
c.	If filing as lobbyist employer, the Employer's name Presbyterian Health Plan	Address P.O. Box 27489 Albuquerque NM 87125	Telephone # 505.823.0700

<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)		\$5,100.00
h.	TOTAL BUNDLING CONTRIBUTIONS (Form E)		\$0.00



Report of Expenditures  
FORM B  
EXPENDITURES

Name of Lobbyist or Lobbyist Employer: **Presbyterian Health Plan**

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

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: **Presbyterian Health Plan**

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

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: **Presbyterian Health Plan**

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

Date	Name of candidate, public official or ballot issue supported or opposed	Contribution On Behalf Of	Amount
12/22/2016	Brian Egolf for Representative	Self	\$1,000.00
12/15/2016	Peter Wirth for Senate	Self	\$1,000.00
12/22/2016	Greg Baca for Senate	Self	\$500.00
12/14/2016	Damon Ely for Representative	Self	\$500.00
12/15/2016	Debbie Rodella for Representative	Self	\$700.00
12/14/2016	Jim Trujillo for Representative	Self	\$700.00
12/14/2016	Patty Lundstrom for Representative	Self	\$700.00

Total Political Contributions \$5,100.00

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:	Presbyterian Health Plan
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REPORT DUE:	X January 15	within 48 hours during session
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Total Bundling Disclosures