

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/(505) 827-3600

## SECRETARY OF STATE

### Report of Expenditures and Contributions

#### Political Committee

#### FORM A

### Oct, 2019

Political Committee's Name    2020 PAC

Date Submitted:    8/27/2019 7:53:34 AM    Date Run:    Date Due:    10/14/2019 11:59:00 PM

<b>1. FILING DEADLINES (Check the box that indicates the report being filled)</b>	
<input type="checkbox"/> 4/8/2019 Before 5PM <input checked="" type="checkbox"/> 10/14/2019 Before 5PM	

<b>3.</b>	Political Committee Complete Name 2020 PAC		
	Mailing Address 7012 Tampico Rd. NE	City, State & Zip Code Rio Rancho, NM 87144	
	Phone # (505) 331-9047	Fax #	
<b>4.</b>	Name of President/Chairperson, if any, or Contact Person	Phone #	Fax #
	Mailing Address	City, State, Zip Code	Fax #
<b>5.</b>	Full Name of Treasurer Paul, Walter	Phone # (505) 331-9047	
	Mailing Address 7292 Assisi Hills Rd. NE	City, State, Zip Code Rio Rancho, NM 87144	Fax #
	Name & Street Address of Financial Institution Where bank account is maintained (Bank Account Located in New Mexico) New Mexico Bank & Trust. 7830 Enchanted Hills Blvd. NE, Rio Rancho, NM 87144		

<b>6.</b>	<b>FINANCIAL SUMMARY</b>		
a.	OPENING BALANCE for reporting period <small>("0" If first report, or CLOSING BALANCE FROM LAST REPORT)</small>	\$0.00	
b.	Total Monetary Contribution this Reporting Period (Form B1 + Form B3)	\$0.00	
c.	Total Expenditures this Reporting Period (Form C + Form C1)	\$0.00	
d.	Closing Balance this Reporting Period (6a + 6b - 6c)	\$0.00	
e.	Total Loans To the Committee this Reporting Period (Form A1)	\$0.00	
f.	Total unpaid Campaign Debt (Form A1)	\$0.00	
g.	Total In-Kind Contributions this Reporting Period (Form B 2)	\$0.00	
<b>7.</b>	Special Event Work sheet Attached	Yes                      X No	

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1.	TOTAL DEBT CARRIED FORWARD	\$0.00
2.	TOTAL LOAN CONTRIBUTIONS	\$0.00
3.	TOTAL DEBT PAID	\$0.00
4.	TOTAL LOANS FORGIVEN	\$0.00
5.	TOTAL UNPAID DEBT	\$0.00



**FORM B 2**  
**IN-KIND CONTRIBUTIONS**

Political Committee's Name 2020 PAC

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DATE	NAME and ADDRESS of CONTRIBUTOR	OCCUPATION (of any contributor who makes a contribution of \$250 or more in an election)	VALUE
<b>TOTAL</b>			





**FORM C**  
**EXPENDITURES**

Political Committee's Name 2020 PAC

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DATE	NAME and ADDRESS of PAYEE	PURPOSE	PRC Exp	AMOUNT
TOTAL				



