

**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

**2019 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**

<b>Name of Lobbyist</b>	<b>Telephone</b>	<b>Fax</b>	
1.a Chris L. Cronn	(512) 689-0497		
<b>Address</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
b. 1122 Colorado Street, Suite 2399	Austin	TX	78701
<b>If filing as lobbyist employer, the Employer's name</b>		<b>Address</b>	<b>Telephone #</b>
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	
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)		\$500.00

Report of Expenditures  
FORM B  
EXPENDITURES

Name of Lobbyist or Lobbyist Employer: **Chris L. Cronn**

REPORT  January 15 within 48 hours during session  
DUE:

Itemize each expenditure of \$100 or more and specify the type of expenditure by entering a category number:  
(a) meals & beverages; (b) other entertainment expenditures; or (c) other expenditures [2-11-6 A (1) NMSA 1978]

Date	Name of Payee	Beneficiary	Type	Purpose for which made or incurred	Expenditure On Behalf Of	Amount
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Subtotal Form B:

Report of Expenditures  
FORM C  
SPECIAL EVENTS

Name of Lobbyist or Lobbyist Employer: **Chris L. Cronn**

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: **Chris L. Cronn**

REPORT DUE:  January 15 within 48 hours during session

Date	Name of candidate, public official or ballot issue supported or opposed	Contribution On Behalf Of	Amount
10/10/2018	Rudy Martine	United HealthCare Services, Inc.	\$500.00

Total Political Contributions \$500.00