

**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:	<input checked="" type="checkbox"/> January 15	within 48 hours during session	October 9								
FILING AS A:	<input checked="" type="checkbox"/> Lobbyist	Lobbyist Employer									
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">Name of Lobbyist</td> <td style="width: 30%;">Telephone</td> <td colspan="2" style="width: 40%;">Fax</td> </tr> <tr> <td>1.a Beth Roxanne Beloff</td> <td>5054678143</td> <td colspan="2"></td> </tr> </table>				Name of Lobbyist	Telephone	Fax		1.a Beth Roxanne Beloff	5054678143		
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2.	FINANCIAL SUMMARY (Cumulative)										
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)		\$0.00								

Report of Expenditures
FORM B
EXPENDITURES

Name of Lobbyist or Lobbyist Employer: **Beth Roxanne Beloff**

REPORT DUE: X January 15 within 48 hours during session October 9

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: Beth Roxanne Beloff			
REPORT DUE:	<input checked="" type="checkbox"/> January 15	within 48 hours during session	October 9
Date	Type of Event & Location	Group(s) Invited	Total Expenses

Total Special Events

Report of Expenditures
FORM D
POLITICAL CONTRIBUTIONS

Name of Lobbyist or Lobbyist Employer: Beth Roxanne Beloff			
REPORT DUE:	<input checked="" type="checkbox"/> January 15	within 48 hours during session	October 9
Date	Name of candidate, public official or ballot issue supported or opposed	Contribution On Behalf Of	Amount

Total Political Contributions