

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

**Dianna J. Duran**

Campaign Reporting Act  
Report of Expenditures and Contributions

Official Time Stamp
---------------------

**Candidate**

**FORM A**

**2014**

Candidate's Name Jeff, Sandra

Date Submitted: 9/8/2014 1:04:56 PM Date Run: 9/8/2014 1:04:56 PM Date Due: 9/8/2014 5:00:00 PM

1. FILING DEADLINES (Check the box that indicates the report being filled)		2. Filing Officer
4/14/2014 Before 5PM	7/3/2014 Before 5PM	<input checked="" type="checkbox"/> Secretary Of State <input type="checkbox"/> County Clerk  <hr style="width: 80%; margin: 0 auto;"/> County Name
5/12/2014 Before 5PM	<input checked="" type="checkbox"/> 9/8/2014 Before 5PM	
5/29/2014 Before 5PM		

3.	Full name of Candidate <b>Jeff, Sandra</b>	Office Sought or Held State Representative - District 5
	Mailing Address PO Box 631	City, State & Zip Code Crownpoint, NM 87313
	Phone #	Fax #
4.	Full name of Campaign Committee	Phone # 505.231.6634
	Mailing Address	City, State, Zip Code Fax #
5.	Full Name of Treasurer <b>Jeff, Sandra</b>	Phone # 5055551212
	Mailing Address 4 Regal Ridge	City, State, Zip Code Crownpoint, NM 87313 Fax #
	Name & Street Address of Financial Institution Where bank account is maintained (Bank Account Located in New Mexico) Bank of the West. 4221 San Mateo, Albuquerque, NM 87110	

6.	<b>FINANCIAL SUMMARY</b>	
a.	OPENING BALANCE for reporting period ("0" If first report, or CLOSING BALANCE FROM LAST REPORT)	\$37,786.58
b.	Total Monetary Contribution this Reporting Period (Form B1 + Form B3)	\$500.00
c.	Total Expenditures this Reporting Period (Form C + Form C1)	\$1,237.10
d.	Closing Balance this Reporting Period (6a + 6b - 6c)	\$37,049.48
e.	Total Loans To the Committee this Reporting Period (Form A1)	\$0.00
f.	Total unpaid Campaign Debt (Form A1)	\$27,920.82
g.	Total In-Kind Contributions this Reporting Period (Form B 2)	\$0.00
7.	Special Event Work sheet Attached      Yes                      X No	

Candidate's Name Jeff, Sandra

Date Submitted: 9/8/2014 1:04:56 PM Date Run: 9/8/2014 1:04:56 PM Date Due: 9/8/2014 5:00:00 PM

1.	TOTAL DEBT CARRIED FORWARD	\$27,920.82
2.	TOTAL LOAN CONTRIBUTIONS	\$0.00
3.	TOTAL DEBT PAID	\$0.00
4.	TOTAL LOANS FORGIVEN	\$0.00
5.	TOTAL UNPAID DEBT	\$27,920.82

**FORM B 1**  
**MONETARY CONTRIBUTIONS**

Candidate's Name                      Jeff, Sandra

Date Submitted:            9/8/2014 1:04:56 PM    Date Run:                      9/8/2014 1:04:56 PM    Date Due:                      9/8/2014 5:00:00 PM

<b>DATE</b>	<b>NAME and ADDRESS of CONTRIBUTOR</b>	<b>OCCUPATION (of any contributor who makes a contribution of \$250 or more in an election)</b>	<b>AMOUNT</b>
7/2/2014	New Mexico Dental PAC - 6800 L Montgomery Blvd. NE, Albuquerque NM 87109	PAC	\$500.00
<b>TOTAL</b>			\$500.00

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

Candidate's Name                      Jeff, Sandra

Date Submitted:            9/8/2014 1:04:56 PM    Date Run:            9/8/2014 1:04:56 PM    Date Due:            9/8/2014 5:00:00 PM

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 B 3**  
**LOAN CONTRIBUTIONS**

Candidate's Name                      Jeff, Sandra

Date Submitted:      9/8/2014 1:04:56 PM    Date Run:              9/8/2014 1:04:56 PM    Date Due:              9/8/2014 5:00:00 PM

DATE	TRANSFER DATE	NAME and ADDRESS of CREDITOR	AMOUNT
<b>TOTAL</b>			

**FORM B 4**  
**LOANS FORGIVEN**

Candidate's Name Jeff, Sandra

Date Submitted: 9/8/2014 1:04:56 PM Date Run: 9/8/2014 1:04:56 PM Date Due: 9/8/2014 5:00:00 PM

DATE	NAME and ADDRESS of CREDITOR	AMOUNT
<b>TOTAL</b>		

**FORM C**  
**EXPENDITURES**

Candidate's Name                      Jeff, Sandra

Date Submitted:            9/8/2014 1:04:56 PM    Date Run:            9/8/2014 1:04:56 PM    Date Due:            9/8/2014 5:00:00 PM

DATE	NAME and ADDRESS of PAYEE	PURPOSE	PRC Exp	AMOUNT
7/23/2014	Sandra Jeff - PO Box 631, Crownpoint NM 87313	reimbursement for gas, food		\$306.88
7/10/2014	Sandra Jeff - PO Box 631, Crownpoint NM 87313	reimbursement food		\$547.33
7/3/2014	Sandra Jeff - PO Box 631, Crownpoint NM 87313	reimbursement for gas, food, donation		\$382.89
<b>TOTAL</b>				\$1,237.10

**FORM C 1**  
**LOAN REPAYMENTS**

Candidate's Name Jeff, Sandra

Date Submitted: 9/8/2014 1:04:56 PM Date Run: 9/8/2014 1:04:56 PM Date Due: 9/8/2014 5:00:00 PM

DATE	NAME of CREDITOR	AMOUNT
<b>TOTAL</b>		



