

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



Candidate

FORM A

2015

Candidate's Name Jeff, Sandra

Date Submitted: 10/13/2015 12:37:18 PM Date Run: 10/13/2015 12:37:18 PM Date Due: 10/13/2015 5:00:00 PM

| | | | |
|--|--|--|-------|
| 1. FILING DEADLINES (Check the box that indicates the report being filled) | | 2. Filing Officer | |
| <input type="checkbox"/> 4/13/2015 Before 5PM | | <input checked="" type="checkbox"/> Secretary Of State County Clerk <hr style="width: 100%;"/> County Name | |
| <input checked="" type="checkbox"/> 10/13/2015 Before 5PM | | | |
| 3. Full name of Candidate | | Office Sought or Held | |
| Jeff, Sandra | | State Representative - District 5 | |
| Mailing Address | | City, State & Zip Code | |
| PO Box 631 | | 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 | | Phone # | |
| Jeff, Sandra | | 5055551212 | |
| Mailing Address | | City, State, Zip Code | Fax # |
| 4 Regal Ridge | | Crownpoint, NM 87313 | |
| 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. FINANCIAL SUMMARY | | |
| a. | OPENING BALANCE for reporting period <small>("0" If first report, or CLOSING BALANCE FROM LAST REPORT)</small> | \$32,979.97 |
| 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) | \$32,979.97 |
| 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 |

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| | | |
|----|----------------------------|-------------|
| 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: 10/13/2015 12:37:18 PM Date Run: 10/13/2015 12:37:18 PM Date Due: 10/13/2015 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) | AMOUNT |
|--------------|---------------------------------|---|--------|
| TOTAL | | | |

FORM B 2
IN-KIND CONTRIBUTIONS

Candidate's Name Jeff, Sandra

Date Submitted: 10/13/2015 12:37:18 PM Date Run: 10/13/2015 12:37:18 PM Date Due: 10/13/2015 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 |
|-------|---------------------------------|---|-------|
| TOTAL | | | |

FORM B 3
LOAN CONTRIBUTIONS

Candidate's Name Jeff, Sandra

Date Submitted: 10/13/2015 12:37:18 PM Date Run: 10/13/2015 12:37:18 PM Date Due: 10/13/2015 5:00:00 PM

| DATE | TRANSFER DATE | NAME and ADDRESS of CREDITOR | AMOUNT |
|--------------|---------------|------------------------------|--------|
| TOTAL | | | |

FORM B 4
LOANS FORGIVEN

Candidate's Name Jeff, Sandra

Date Submitted: 10/13/2015 12:37:18 PM Date Run: 10/13/2015 12:37:18 PM Date Due: 10/13/2015 5:00:00 PM

| DATE | NAME and ADDRESS of CREDITOR | AMOUNT |
|--------------|------------------------------|--------|
| TOTAL | | |

FORM C
EXPENDITURES

Candidate's Name Jeff, Sandra

Date Submitted: 10/13/2015 12:37:18 PM Date Run: 10/13/2015 12:37:18 PM Date Due: 10/13/2015 5:00:00 PM

| DATE | NAME and ADDRESS of PAYEE | PURPOSE | PRC Exp | AMOUNT |
|-------|---------------------------|---------|---------|--------|
| TOTAL | | | | |

FORM C 1
LOAN REPAYMENTS

Candidate's Name Jeff, Sandra

Date Submitted: 10/13/2015 12:37:18 PM Date Run: 10/13/2015 12:37:18 PM Date Due: 10/13/2015 5:00:00 PM

| DATE | NAME of CREDITOR | AMOUNT |
|--------------|------------------|--------|
| TOTAL | | |

