



State of New Mexico  
Office of the Secretary of State  
Ethics Administration  
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**CANDIDATE**  
**"STATEMENT OF NO ACTIVITY"**

This form is to be used **ONLY** by those **CANDIDATES WHO HAVE NOT RECEIVED** any contributions and **HAVE NOT MADE** any expenditures since the candidate's last report was filed with the office of the Secretary of State.

**2018 Fourth General**

(Please check Statement date)

Sep.2018 \_\_\_\_\_ Oct.2018 \_\_\_\_\_ Nov.2018 \_\_\_\_\_ Dec.2018 **X** \_\_\_\_\_  
(cutoff Date 9/3/18) (cutoff Date 10/1/18) (cutoff Date 11/1/18) (cutoff Date 12/1/18)

I, Tripp, Don candidate for office of State Representative - District 49  
- ALL

in the County of ALL (if applicable) hereby declare that I did not receive any contributions and have not made any expenditures since my last report was filed.

Dated: December 06, 2018