

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



### Campaign Reporting Act Report of Expenditures and Contributions

**Candidate**

**FORM A**

**2018**

Candidate's Name Gomez, Angela

Date Submitted: 4/9/2018 1:59:00 PM Date Run: 4/9/2018 1:59:00 PM Date Due: 4/9/2018 11:59:00 PM

<b>1. FILING DEADLINES (Check the box that indicates the report being filled)</b>	<b>2. Filing Officer</b>
<input checked="" type="checkbox"/> 4/9/2018 Before 5PM	<input checked="" type="checkbox"/> Secretary Of State <input type="checkbox"/> County Clerk <input type="checkbox"/> <u>Guadalupe</u> <input type="checkbox"/> _____ County Name

<b>3.</b>	Full name of Candidate <b>Gomez, Angela</b>	Office Sought or Held County Assessor - Guadalupe
	Mailing Address 317 Del Rio Ave	City, State & Zip Code Santa Rosa, NM 88435
	Phone # (575) 512-6065	Fax #
<b>4.</b>	Full name of Campaign Committee	Phone # (575) 512-6065
	Mailing Address	City, State, Zip Code      Fax #
<b>5.</b>	Full Name of Treasurer <b>Gomez, Angela</b>	Phone # (575) 512-6065
	Mailing Address 317 Del Rio Ave	City, State, Zip Code      Fax # Santa Rosa, NM 88435
	Name & Street Address of Financial Institution Where bank account is maintained (Bank Account Located in New Mexico) Wells Fargo Bank. 490 Corona Ave, Santa Rosa, NM 88435	

<b>6.</b>	<b>FINANCIAL SUMMARY</b>	
a.	OPENING BALANCE for reporting period (*0* If first report, or CLOSING BALANCE FROM LAST REPORT)	\$0.00
b.	Total Monetary Contribution this Reporting Period (Form B1 + Form B3)	\$712.80
c.	Total Expenditures this Reporting Period (Form C + Form C1)	\$0.00
d.	Closing Balance this Reporting Period (6a + 6b - 6c)	\$712.80
e.	Total Loans To the Committee this Reporting Period (Form A1)	\$0.00
f.	Total unpaid Campaign Debt (Form A1)	\$0.00
g.	Total In-Kind Contributions this Reporting Period (Form B 2)	\$0.00
<b>7.</b>	Special Event Work sheet Attached      Yes      X No	

Candidate's Name Gomez, Angela

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

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

Candidate's Name Gomez, Angela

Date Submitted: 4/9/2018 1:59:00 PM Date Run: 4/9/2018 1:59:00 PM Date Due: 4/9/2018 11:59:00 PM

DATE	NAME and ADDRESS of CONTRIBUTOR	OCCUPATION (of any contributor who makes a contribution of \$250 or more in an election)	AMOUNT
3/23/2018	Angela Gomez - 317 DEL RIO AVE, Santa Rosa NM 88435	Chief Deputy assessor	\$712.80
<b>TOTAL</b>			<b>\$712.80</b>

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

Candidate's Name Gomez, Angela

Date Submitted: 4/9/2018 1:59:00 PM Date Run: 4/9/2018 1:59:00 PM Date Due: 4/9/2018 11:59:00 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 Gomez, Angela

Date Submitted: 4/9/2018 1:59:00 PM Date Run: 4/9/2018 1:59:00 PM Date Due: 4/9/2018 11:59:00 PM

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

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

Candidate's Name Gomez, Angela

Date Submitted: 4/9/2018 1:59:00 PM Date Run: 4/9/2018 1:59:00 PM Date Due: 4/9/2018 11:59:00 PM

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

**FORM C**  
**EXPENDITURES**

Candidate's Name Gomez, Angela

Date Submitted: 4/9/2018 1:59:00 PM Date Run: 4/9/2018 1:59:00 PM Date Due: 4/9/2018 11:59:00 PM

DATE	NAME and ADDRESS of PAYEE	PURPOSE	PRC Exp	AMOUNT
TOTAL				

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

Candidate's Name Gomez, Angela

Date Submitted: 4/9/2018 1:59:00 PM Date Run: 4/9/2018 1:59:00 PM Date Due: 4/9/2018 11:59:00 PM

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



