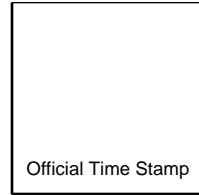


State of New Mexico
 Office of the Secretary of State
 Ethics Administration
 325 Don Gaspar Suite 300
 Santa Fe, New Mexico 87503
 (800) 477-3632/(505) 827-3600

SECRETARY OF STATE



Campaign Reporting Act Report of Expenditures and Contributions

Candidate

FORM A

2019

Candidate's Name Gomez, Angela

Date Submitted: 9/30/2019 2:17:05 PM Date Run: _____ Date Due: 10/15/2019 11:59:00 PM

| | |
|---|---|
| 1. FILING DEADLINES (Check the box that indicates the report being filled) | 2. Filing Officer |
| <input type="checkbox"/> 4/8/2019 Before 5PM <input checked="" type="checkbox"/> 10/15/2019 Before 5PM | <input checked="" type="checkbox"/> Secretary Of State _____ County Clerk _____ Guadalupe _____ County Name |

| | | |
|-----------|--|--|
| 3. | Full name of Candidate Gomez, Angela | 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 # |
| 4. | Full name of Campaign Committee | Phone # (575) 512-6065 |
| | Mailing Address | City, State, Zip Code Fax # |
| 5. | Full Name of Treasurer Gomez, Angela | Phone # (575) 512-6065 |
| | Mailing Address 317 Del Rio Ave | City, State, Zip Code Santa Rosa, NM 88435 Fax # |
| | 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 | |

| | | |
|-----------|--|-------------------------------|
| 6. | FINANCIAL SUMMARY | |
| 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) | \$0.00 |
| c. | Total Expenditures this Reporting Period (Form C + Form C1) | \$0.00 |
| d. | Closing Balance this Reporting Period (6a + 6b - 6c) | \$0.00 |
| 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 |
| 7. | Special Event Work sheet Attached | Yes X No |

Candidate's Name Gomez, Angela

Date Submitted: 9/30/2019 2:17:05 PM Date Run: Date Due: 10/15/2019 11:59:00 PM

| | | |
|----|----------------------------|--------|
| 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: 9/30/2019 2:17:05 PM Date Run: Date Due: 10/15/2019 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 |
|-------|---------------------------------|---|--------|
| TOTAL | | | |

FORM B 2
IN-KIND CONTRIBUTIONS

Candidate's Name Gomez, Angela

Date Submitted: 9/30/2019 2:17:05 PM Date Run: Date Due: 10/15/2019 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 |
|--------------|---------------------------------|---|-------|
| TOTAL | | | |

FORM B 3
LOAN CONTRIBUTIONS

Candidate's Name Gomez, Angela

Date Submitted: 9/30/2019 2:17:05 PM Date Run: Date Due: 10/15/2019 11:59:00 PM

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

FORM B 4
LOANS FORGIVEN

Candidate's Name Gomez, Angela

Date Submitted: 9/30/2019 2:17:05 PM Date Run: Date Due: 10/15/2019 11:59:00 PM

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

FORM C
EXPENDITURES

Candidate's Name Gomez, Angela

Date Submitted: 9/30/2019 2:17:05 PM Date Run: Date Due: 10/15/2019 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: 9/30/2019 2:17:05 PM Date Run: Date Due: 10/15/2019 11:59:00 PM

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

