

LOBBYING ADVERTISING CAMPAIGN Registration Form

New Mexico Secretary of State's Office

325 Don Gaspar, Suite 300

Santa Fe, New Mexico 87501

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An organization of two or more persons, including an individual who makes any representation as being an organization, that within one calendar year expends funds in excess of two thousand five hundred dollars (\$2,500) not otherwise reported under the Lobbyist Regulation Act to conduct an advertising campaign for the purpose of lobbying shall register with the secretary of state within forty-eight hours after expending two thousand five hundred dollars (\$2,500), see § 2-11-6(I).

To register, please complete and file this Registration Form with the Secretary of State's Office. The law requires the following information be disclosed: the name of the organization and the names, addresses and occupations of any of its principals, organizers or officers and the name of any lobbyist or lobbyist's employer who is a member of the organization. Thereafter, within 15 days after a legislative session, the organization is required to file a report of expenditures and contributions with the Secretary of State including the contributions, pledges to contribute, expenditures and commitments to expend for the advertising campaign. To file the above mentioned report please complete the Lobbyist Advertising Campaign Reporting Form and timely submit it to our office.

Registration Year _____

Please type or print legibly.

1. Complete Name of Organization or Individual Conducting Advertising Campaign	Telephone #
2. Business Address (street address, city, state & zip)	Email Address:
3. Mailing Address (if different than business address)	
4. Full Name of Person Completing this Registration Form	
4a. Your Telephone Number & Email Address	

5. List and Identify all Principals (P) and Organizers (O) of the Organization:		
Full Name	Address	Occupation

REGISTRATION FORM FOR LOBBYING ADVERTISING

6. List and Identify all Officers of the Organization:		
Name and Title	Address	Occupation

7. List all Lobbyists or Lobbyist's Employer Who are Members of the Organization, if none, write "none."	
Full Name of Each Lobbyist	Complete Name of Each Lobbyist Employer

I hereby swear or affirm under penalty of law that all the information on this form is true, correct and complete to the best of my knowledge.

Signature of Principal, Organizer or Officer

Date