

#### OFFICE OF THE SECRETARY OF STATE

Bureau of Elections, Ethics Administration 325 Don Gaspar, Suite 300, Santa Fe, New Mexico 87501 Phone: (505) 827-3600 Toll-Free: (800) 477-3632 Fax: (505) 827-8403

#### **First Primary Report**

#### FORM A

		Dr. Jon Hill			
		4/8/2024			
1.	Full name of Candidate Dr. Jon Hill		Office Sought or Held State Representative - Dona Ar	na - DISTRICT 5	3
	Mailing Address 4199 La Purisima Drive		City, State & Zip Code Las Cruces, NM 88011-8433		
	Phone # (575) 800-4641		Fax #		
2.	Full name of Campaign Committee drJonHill4NM		Phone # (831) 737-2374		
	Mailing Address 4199 La Purisima Dr		City, State & Zip Code Las Cruces, NM 88011-8433	Fax #	
3.	Full name of Treasurer Ms. Judy A Hill		Phone # (541) 643-9493		
	Mailing Address 4199 La Purisima Dr		City, State & Zip Code Las Cruces, NM 88011-8433	Fax #	
Name & Street Address of Financial Institution Where bank account is maintained (Bank Account Located in New Me				ted in New Mexico)	

Nusenda Federal Credit Union. 1715 E University Ave, Las Cruces, NM 88001, Las Cruces, NM 88001

4.	FINANCIAL SUMMARY	Opening Balance
a.	OPENING BALANCE for reporting period ("0" If first report, or CLOSING BALANCE FROM LAST REPORT)	\$0.00
b.	Total Monetary Contributions this Reporting Period (Form B1 + Form B3)	\$6,462.00
c.	Total Expenditures this Reporting Period (Form C+ Form C1)	\$1,964.35
d.	Total Amount Raised from one or more Special Events Special Event Worksheet(s) attached Yes X No	\$0.00
e.	Closing Balance this Reporting Period (4a + 4b + 4d - 4c)	\$4,497.65
f.	Total Loans To the Committee this Reporting Period (Form A1)	\$5,287.00
g.	Total Unpaid Campaign Debt (Form A1)	\$5,005.00
h.	Total In-Kind Contributions this Reporting Period (Form B2)	\$0.00

# **Report of Expenditures and Contributions**

#### Form A 1

Candidate's Name		Dr. Jon Hill			
Date Submitted:		4/8/2024 Date Due: 4/8/2			4/8/2024
				<u> </u>	
1.	1. TOTAL DEBT CARRIED FORWARD				\$0.00
2. TOTAL LOAN CONTRIBUTIONS					\$5,287.00
3.	TOTAL DEBT PAID				\$0.00
4.	TOTAL LOANS FORGIVEN			\$282.00	
5. TOTAL UNPAID DEBT					\$5,005.00

# **Report of Expenditures and Contributions**

# FORM B 1 MONETARY CONTRIBUTIONS

Candidate's Name

Dr. Jon Hill

Date Submitted:

4/8/2024

Date Due: 4/8/2024

DATE	NAME and ADDRESS of CONTRIBUTOR	OCCUPATION	AMOUNT
3/25/2024	lra Zarov 2433 NE Klickitat Street Portland, OR 97212 individual donation via Act Blue	Lawyer	\$100.00
3/27/2024	Judy Hill 4199 La Purisima Drive Las Cruces, NM 88011 individual contribution through Act Blue	Elementary school teacher	\$500.00
3/28/2024	Alissa Keny-Guyer 1314 Lejano Court Santa Fe, NM 87501-8929 individual contributor through Act Blue	Retired	\$250.00
3/29/2024	Carlotte Lipson 3808 Mondale Loop Las Cruces, NM 88005 Individual contributor through Act Blue	Retired	\$25.00
3/30/2024	David Steele 4358 Nambe Arc Las Cruces, NM 88011 individual contribution through Act Blue	Retired	\$150.00
3/30/2024	Joseph Chudy 25401 Markham Lane Salinas, CA 93908-9434 individual contribution through Act Blue	Retired	\$50.00
3/31/2024	Susan Moen 4715 N.E. Everett Street Portland, OR 97219-2919 individual contribution through Act Blue	Retired	\$100.00
		TOTAL	\$1,175.00

# **Report of Expenditures and Contributions**

### FORM B 2 IN-KIND CONTRIBUTIONS

Candidate's Name Date Submitted: Dr. Jon Hill 4/8/2024

Date Due: 4/8/2024

DATE	NAME and ADDRESS of CONTRIBUTOR	OCCUPATION	AMOUNT
		TOTAL	

#### **Report of Expenditures and Contributions**

### FORM B 3 LOAN CONTRIBUTIONS

 Candidate's Name
 Dr. Jon Hill

 Date Submitted:
 4/8/2024

Date Due: 4/8/2024

DATE	TRANSFER DATE	NAME and ADDRESS of CREDITOR	AMOUNT
12/28/2023		Jon Hill 4199 La Purisima Dr Las Cruces, NM 88011-8433	\$5,005.00
1/1/2024		Jon Hill 4199 La Purisima Dr Las Cruces, NM 88011-8433	\$282.00
		TOTAL	\$5,287.00

# **Report of Expenditures and Contributions**

### FORM B 4 LOANS FORGIVEN

Candidate's Name

Dr. Jon Hill

Date Submitted:

4/8/2024

Date Due: 4/8/2024

DATE	NAME and ADDRESS of CREDITOR	AMOUNT
3/31/2024	Jon Hill 4199 La Purisima Dr Las Cruces, NM 88011-8433	\$282.00
	TOTAL	\$282.00

# **Report of Expenditures and Contributions**

# FORM C EXPENDITURES

Candidate's Name	Dr. Jon Hill		
Date Submitted:	4/8/2024	Date Due: 4/8/2024	

DATE	NAME and ADDRESS of PAYEE	PURPOSE	Туре	AMOUNT
1/10/2024	Highland Clark Checks 15955 La Cantara Parkway San Antonio, TX 78256 purchase of checks for account	Office expenses	Expenditure	\$21.45
1/10/2024	Nusenda Credit Union 1715 E University Las Cruces, NM 88001 Membership fee required to establish account	Professional services (legal, accounting)	Expenditure	\$5.00
1/25/2024	Daley Professional Web Service 211 Cardinal Drive Montgomery, NY 12549 direct deposit for campaign technology	Campaign consultants	Expenditure	\$963.00
2/24/2024	WalMart 3331 Rinconada Las Cruces, NM 88001 direct deposit	Campaign paraphernalia/mi sc	Expenditure	\$16.60
2/28/2024	WearlT 3880 Foothills Road, Suite A Las Cruces, NM 88011 Direct deposit	Campaign consultants	Expenditure	\$83.30

3/14/2024	NMCO 2001 E. Lohman Avenue, #114 Las Cruces, NM 88001 direct deposit	Campaign paraphernalia/mi sc	Expenditure	\$375.00
3/25/2024	Democratic Party of New Mexico 4013 Silver Avenue S.E. Albuquerque, NM 87108 check from campaign account	Information technology costs (internet, e-mail)	Expenditure	\$500.00
			TOTAL	\$1,964.35

# **Report of Expenditures and Contributions**

# FORM C 1 LOAN REPAYMENTS

Candidate's Name	Dr. Jon Hill				
Date Submitted:	4/8/2024	Date Due: 4/8/2024			

DATE	NAME of CREDITOR	AMOUNT
	τοται	

# **Report of Expenditures and Contributions**

#### SPECIAL EVENT WORKSHEET

Candidate's Name Date Submitted:		Dr. Jon Hill		
		4/8/2024	Date Du	e: 4/8/2024
1.	Brief description of event			
2.	Names of Individuals or entities that sponsored the event			
3.	a. Date of event	b. Admissio	n price ( or less)	c. Number in attendance
4.	Actual location and street address			
5.	Admission Fees Received			
6.	Unidentifiable / Anonymous Contributions : (Aggregate amount received during event)			
7.	Total unidentifiable contributions (add lines 5 and 6)			
8.	Expenditures (made in relation to Special Event)			
9.	Difference (Subtract line 8 from line 7) (If figure on line 9 is more than , complete lines 10 and 11)			
10.	After expenses allowance			
11.	Excess on unidentifiable cash contributions that must be donated (Subtract line 10 from line 9)			