# LOBBYIST REGISTRATION STATEMENT

**Check applicable box:** [ ] New Registration  [ ] Amendment  [ ] Annual Renewal  [ ] Cancel Registration  

**Date:** March 30, 2019

## Permanent business address

Lobbyist or Lobbyist Organization Full Name: **Danielle Allegra Ducate**

**Permanent Telephone Number:** 505-241-4426  
**Email address:** danielle.ducate@spring.com

**Permanent Business Address:** 414 Silver Ave, SW  
**City:** Albuquerque  
**State:** NM  
**Zip Code:** 87102

## Business address while lobbying or conducting lobbyist campaigning

**Business Address:** same as above

## Lobbyist Organization Chairperson

**Chairperson Full Name:** N/A

## Lobbyist Organization Treasurer

**Treasurer Full Name:**

## Lobbyist Organization’s Bank and Checking Account Information

**Name of Bank:** N/A - No Bank Acct. for this

## All parties with Signature Authority for Lobbyist Organization’s Checking Account

**Full Name:** N/A
<table>
<thead>
<tr>
<th>Employer</th>
<th>Address</th>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>PNM</td>
<td>414 Silver Ave. SW</td>
<td>Albuquerque</td>
<td>NM</td>
<td>87102</td>
</tr>
</tbody>
</table>

For additional employers, use a second form and attach to original.
### OFFICIAL ACTION FORM

**Lobbyist’s Permanent business address**

**Lobbyist or Lobbyist Organization Full Name:** Danielle Allegra Duran  
**Permanent Telephone Number:** 505-241-4426  
**Permanent Business Address:** 414 Silver Ave SW  
**City:** Albuquerque  
**State:** NM  
**Zip Code:** 87102

**Official action the lobbyist or lobbyist organization supports or opposes**

R-15-177

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**Lobbyist Official Action Bank and Checking Account Information**

**Name of Bank:** NONE (N/A)  
**Address:**  
**City:**  
**State:**  
**Zip Code:**  
**Checking Account Number:**

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**All parties with Signature Authority for Lobbyist’s Official Action Checking Account**

**Full Name:**  
**Address:**  
**City:**  
**State:**  
**Zip Code:**  
**Full Name:**  
**Address:**  
**City:**  
**State:**  
**Zip Code:**

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I understand that I must file an Annual Registration Renewal every twelve months after the date of this registration, as long as I continue to perform lobbying activities, as defined in the Lobbyist and Lobbyist Organization Registration and Disclosure Ordinance. In the event any change occurs in the above information, including but not limited to, new official actions supported or opposed, I am required to notify the City Clerk of changes within one month of such occurrence.

I swear or affirm that the above information is true and correct to the best of my knowledge

**Signature**  
**Date**