



STATE OF NEW HAMPSHIRE
Statement of Receipts and Expenditures
for CANDIDATES
July 18, 2017 - Special Primary Election
State Representative - Grafton Dist. 9

Name of Candidate: VINCENT PAUL MIGLIORE
(print name)

Address: 198 WHITTEMORE POINT RD. SOUTH
(street) (town/city/state/zip)

Party: REPUBLICAN Office: State Representative - Grafton Dist. 9

Name of Fiscal Agent: VINCENT PAUL MIGLIORE

RECEIVED

JUL 26 2017

NEW HAMPSHIRE
DEPARTMENT OF STATE

REPORT OF RECEIPTS AND EXPENDITURE FOR SPECIAL PRIMARY ELECTION

Date of Report: June 28 July 12 July 26

SUMMARY OF RECEIPTS AND EXPENDITURES	THIS PERIOD	TO DATE
RECEIPTS		
A. Total amount of receipts over \$25	\$ \emptyset	\$ 716.95
B. Total amount of receipts unitemized (\$25 or less)	\$ -	\$ -
C. Number of Contributors	\emptyset	1
D. Number of receipts unitemized (\$25 or less)	-	
E. Subtotal of non-monetary (in-kind) receipts	\$ \emptyset	\$
F. Subtotal of monetary receipts (A + B - E)	\$ \emptyset	\$ 716.95
G. Total Surplus/Deficit from previous campaign	\$ \emptyset	\$
TOTAL RECEIPTS (E + F + G)	\$ \emptyset	\$ 716.95

EXPENDITURES		
H. Total amount of expenditures (excluding Ind. Exp. \$500 or more)	\$ \emptyset	\$ 716.95
I. Total amount of Independent Expenditures \$500 or more	\$ \emptyset	\$ \emptyset
J. Number of Independent Expenditures \$500 or more	\emptyset	\emptyset
TOTAL EXPENDITURES (H + I)	\$ \emptyset	\$ 716.95
PENDING EXPENDITURES - Promise of Payment	\$ \emptyset	\$ \emptyset

Signature of Candidate

Signature of Fiscal Agent

Candidate or Committee Name: Vincent Paul Misioro

Reporting period ending 7-26 2017

ITEMIZED RECEIPTS

Full Name of Contributor (Alphabetical Order)	Post Office Address	Amount of Contribution	Date Received	Aggregate* Contributions to Date	If contribution or aggregate contribution is over \$100 list: Occupation and Place of Business
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N/A

Total of receipts unitemized (\$25 or under) in this report \$ _____

ITEMIZED EXPENDITURES

*** Indicate to which election expenditure applies

Paid to Whom	Post Office Address	Amount of Expense	Date Expended	***Primary/General	Nature of Expenditure
<u>N/A</u>				<input type="checkbox"/>	
				<input type="checkbox"/>	
				<input type="checkbox"/>	
				<input type="checkbox"/>	
				<input type="checkbox"/>	
				<input type="checkbox"/>	
				<input type="checkbox"/>	
				<input type="checkbox"/>	
				<input type="checkbox"/>	

*List occupation and place of business if total exceeds \$100 for primary or general election. RSA 664:6, I.