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STATE OF NEW HAMPSHIRE

Statement of Receipts and Expenditures for CANDIDATES (RSA 664)

September 9, 2008 - Primary Election

NEW HAMPSHIRE DEPARTMENT OF STATE

I, JOHN S. (JACK) BARNES, 116 1/2 108 HARRIMAN HILL RD, P.O. Box 362 (print name) (street) RAYMOND, candidate for the office of STATE SENATE (town/city zip code)

County of ROCKINGHAM District No. 17 for the REPUBLICAN party,

report that I have expenditures exceeding \$500 for the primary election and do submit, with my fiscal agent the following report of receipts and expenditures.

SUMMARY OF RECEIPTS AND EXPENDITURES FOR PRIMARY ELECTION

Date of Report: August 20 [x] September 3 [] September 17 []

Receipts:

- 1) Total of all receipts in this report 1) \$ 3,100.-
2) Total of all receipts in previous reports 2) \$ 7,275.-
3) Total of all primary election receipts to date 3) \$ -
(Add lines 1 and 2)

Expenditures:

- 4) Total expenditures in this report 4) \$ -
5) Total of expenditures in previous reports 5) \$ -
6) Total of all primary election expenditures to date 6) \$ -
7) Balance if SURPLUS 7) \$+ 10,375.-
8) Balance if DEFICIT 8) \$- -

Signature of Candidate (John S. Barnes)

Signature of Fiscal Agent (Frances L. Barnes)

Barnes

PRIMARY ELECTION 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
AGC OF N.H.	BOW, N.H. 03304	\$ 500. -	8-1-08	500. -	PAC BOW, N.H.
MCGUIRE, CAROL & DAN	ELSDON, N.H.	\$ 100. -	6-25-08	\$ 100. -	
N.H. REALTORS	CONCORD, N.H.	\$ 500. -	8-1-08	500. -	PAC CONCORD, N.H.
SELECT MGMT.	CONCORD, N.H.	\$ 500. -	8-1-08	\$ 500. -	PAC CONCORD, N.H.
SENATE PAC	CONCORD, N.H.	1,000. -	11-9-07	1,000. -	PAC CONCORD, N.H.
STATE ST DISCOUNT	PORTSMOUTH, NH	\$ 500. -	8-3-08	\$ 500. -	RETAIL PORTSMOUTH, N.H.

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

*** Indicate to which election expenditure applies

PRIMARY ELECTION ITEMIZED EXPENDITURES

Paid to Whom	Post Office Address	Amount of Expense	Date of Expense	***Primary/General	Nature of Expenditure	
_____	_____	_____	_____	<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"/>	<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