



STATE OF NEW HAMPSHIRE
Statement of Receipts and Expenditures
for POLITICAL COMMITTEE
(RSA 664)

✓

I, Callie Fines Chairperson, and I, Tracey Hahn-Burkett

Treasurer of the EMILY's List

Committee, located at 1800 M Street NW, Suite 375N, Washington DC 20036

report that the Committee has receipts or expenditures exceeding \$500 for the primary election and do submit the following report of receipts and expenditures.

SUMMARY OF RECEIPTS AND EXPENDITURES FOR PRIMARY ELECTION

Date of Report: September 17, 2014 Filing Period: 09/02/2014 to 09/09/2014

Election: Primary Election, September 09, 2014

Receipts:

| | | |
|---|----------|---------------|
| 1) Total of all <i>receipts</i> in this report | 1) _____ | \$ 0.00 |
| 2) Total of all <i>receipts</i> in previous reports | 2) _____ | \$ 104,175.00 |
| 3) Total of all <i>primary election receipts</i> to date (Add lines 1 and 2) | 3) _____ | \$ 104,175.00 |

Expenditures:

| | | |
|--|----------|---------------|
| 4) Total of all <i>expenditures</i> in this report | 4) _____ | \$ 0.00 |
| 5) Total of all <i>expenditures</i> in previous reports | 5) _____ | \$ 104,050.00 |
| 6) Total of all <i>primary election expenditures</i> to date | 6) _____ | \$ 104,050.00 |
| 7) Balance if SURPLUS | 7) _____ | \$ 125.00 |
| 8) Balance if DEFICIT | 8) _____ | \$ 0.00 |

RECEIVED

SEP 12 2014

NEW HAMPSHIRE
DEPARTMENT OF STATE

Signature of Chairperson

Signature of Treasurer

PRIMARY ELECTION ITEMIZED RECEIPTS

| Full Name of Contributor | Post Office Address | Amount of contribution | Date Received | Aggregate contribution to Date | If contribution or aggregate contribution is over \$100 list: | |
|--------------------------|---------------------|---------------------------|------------------|--------------------------------------|--|-------------------|
| | | | | | Occupation | Place of Business |

Total of receipts unitemized (\$25.00 or under) in this report \$ 0.00

PRIMARY ELECTION ITEMIZED EXPENDITURES

| Paid to Whom | Post Office Address | Amount of Expense | Date of Expense | Primary/General | Nature of Expenditure |
|--------------|---------------------|----------------------|--------------------|-----------------|-----------------------|
|--------------|---------------------|----------------------|--------------------|-----------------|-----------------------|