

STATE OF NEW HAMPSHIRE Statement of Receipts and Expenditures for POLITICAL COMMITTEES Candidate Committees and Political Advocacy Organizations November 8, 2022 - State General Election

Name of Committee			
	(print name)		
Address:			
	(street)	(town/city/state/zip)	
Name of Chairperson:			
	(print name)		
Name of Treasurer:			
	(print name)		
REI	PORT OF RECEIPTS AND EXPENDITURE F	FOR GENERAL ELE	CTION
Date of Report:	October 19, 2022 November 2, 202	22 🗌 November	16, 2022
SUMMARY OF REC	CEIPTS AND EXPENDITURES	THIS PERIOD	TO DATE
RECEIPTS			
A. Total amount of red	ceipts over \$50	\$	\$
B. Total amount of rec	ceipts unitemized (\$50 or less)	\$	\$
C. Number of Contrib	utors		
D. Number of receipts	unitemized (\$50 or less)		
E. Subtotal of non-mo	netary (in-kind) receipts	\$	\$
F. Subtotal of monetar	ry receipts (A + B - E)	\$	\$
G. Total Surplus/Defic for this election cycle)	cit from previous campaign (insert on the first report filed		\$
TOTAL	RECEIPTS (E + F + G)	\$	\$
EXPENDITURES			
H. Total amount of exp	penditures (excluding Ind. Exp. \$1,000 or more)	\$	\$
I. Total amount of Inde	ependent Expenditures \$1,000 or more		
J. Number of Independ	ent Expenditures \$1,000 or more		
TOTAL	EXPENDITURES (H + I)	\$	\$
PENDING EXPEND	TURES - Promise of Payment	\$	\$
BALANCE (Total R	eceipts minus Total Expenditures)	>	\$
	If your bala	nce is \$0.00 - Is this yo	our final report?

Signature of Committee Chairman

Signature of Treasurer

Secretary of State's Office, 107 North Main Street, State House, Room 204, Concord, NH 03301 Phone: 603-271-3242 -- Fax: 603-271-6316 -- http://sos.nh.gov

Page of	Pages	Canc	lidate or Comn	nittee Name:_						
ITEMIZED RECEIF	PTS					Reporting	g period ending	5	20	_
Full Name of Contributor (Alphabetical Order)	Post Office Address	Amount of Contribution	Date Received	Aggregate* Contributions to Date		following fo	ion or aggregate or the contributor: e Name of Emplo			
Total of receipts unitemi	ized (\$25 or under) in th	is report \$								
Total of receipts unitemi		is report \$				***Indica	te to which elect	tion expenditu	re applies	
-		-	Amount of Expense	Date Expended	***Pre-Pri	*** Indica mary/Primary		_	<i>re applies</i> Expenditure	
ITEMIZED EXPENDI	TURES	-			***Pre-Pri			_		
ITEMIZED EXPENDI	TURES	-				mary/Primary	y/General	_		
ITEMIZED EXPENDI	TURES	-				mary/Primary	y/General	_		
ITEMIZED EXPENDI	TURES	-				mary/Primary	y/General	_		
ITEMIZED EXPENDI	TURES	-				mary/Primary	y/General	_		
ITEMIZED EXPENDI	TURES	-				mary/Primary	y/General	_		
ITEMIZED EXPENDI	TURES	-				mary/Primary	y/General	_		

*List occupation, job title, name of employer and city or town of principal place of business if total exceeds \$100 for primary or general election. RSA 664:6, I.