STATE OF NEW HAMPSHIRE

Statement of Receipts and Expenditures
for POLITICAL COMMITTEES
(RSA 664)
September 20, 2011 – Special Election

I, _____ Chairperson, and I, _____
(print name) (print name)
Treasurer of the _____

Committee, located at _____
(mailing address) (town/city) (state) (zip code)

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

SUMMARY OF RECEIPTS AND EXPENDITURES FOR SPECIAL ELECTION

Date of Report: August 31 ☐ September 14 ☐ September 28 ☐

1) Amount brought forward from Special Primary Election (Required only *on first report* filed for Special Election)	1)	$_____ (Indicate Surplus or Deficit)
Receipts:		
2) Total of all *special election receipts* in this report	2)	$_____
3) Total of all *receipts* previously reported for special election	3)	$_____
4) Total of all *special election receipts* to date (Add lines 1,2 and 3)	4)	$_____
Expenditures:		
5) Total *special election expenditures* in this report	5)	$_____
6) Total of *special election expenditures* previously reported	6)	$_____
7) Total of *expenditures* to date for special election	7)	$_____
8) Balance if **SURPLUS**	8)	$+_____
9) Balance if **DEFICIT**	9)	$-_____

_____ _____
Signature of Committee Chairman Signature of Treasurer

Secretary of State's Office, State House, Room 204, Concord, New Hampshire 03301
Phone: 603-271-3242 -- Fax: 603-271-6316 -- http://www.sos.nh.gov
email: elections@sos.state.nh.us

Page_____ of _____Pages Candidate or Committee Name:_____

GENERAL ELECTION ITEMIZED RECEIPTS Reporting period ending _____ 2011

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

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

GENERAL ELECTION ITEMIZED EXPENDITURES ****Indicate to which election expenditure applies***

Paid to Whom	Post Office Address	Amount of Expense	Date Expended	***Primary	/General	Nature of Expenditure
				☐	☐	
				☐	☐	
				☐	☐	
				☐	☐	
				☐	☐	
				☐	☐	
				☐	☐	

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