



STATE OF NEW HAMPSHIRE
Statement of Receipts and Expenditures
for POLITICAL COMMITTEES
(RSA 664)
September 9, 2014 - Primary Election

I, John P. Stabile Chairperson, and I, Thomas L. Rea
(print name) (print name)

Treasurer of the New Hampshire Job Creation Alliance

Committee, located at P.O. Box 4143 Portsmouth, NH 03801
(mailing address) (town/city) (state) (zip code)

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: *June 18 August 20 September 3 September 17
revised

Receipts:

- | | |
|---|------------------------|
| 1) Total of all <i>receipts</i> in this report | 1) \$ <u>200</u> |
| 2) Total of all <i>receipts</i> in previous reports | 2) \$ <u>37,840.45</u> |
| 3) Total of all <i>primary election receipts</i> to date
(Add lines 1 and 2) | 3) \$ <u>38,040.45</u> |

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Expenditures:

- | | |
|---|--------------------|
| 4) Total <i>expenditures</i> in this report | 4) \$ <u>0.00</u> |
| 5) Total of <i>expenditures</i> in previous reports | 5) \$ <u>1,280</u> |
| 6) Total of all <i>primary election expenditures</i> to date
(Add lines 4 and 5) | 6) \$ <u>1,280</u> |

NEW HAMPSHIRE
DEPARTMENT OF STATE

7) Balance if **SURPLUS** 7) \$+ 38,040.45

8) Balance if **DEFICIT** 8) \$-

Signature of Chairman

Signature of Treasurer

*This report not required by Political Committee of a Political Party or by a Political Committee of a Candidate. RSA 664:6

Page 2 of 2 Pages Candidate or Committee Name New Hampshire Job Creation Alliance Reporting Period ending September 9, 2014

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
Peter Robert	19 Watts Road, Hampton Falls, NH	\$200	9/12/14	\$200	

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

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"/>	

*** Indicate to which election expenditure applies

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