



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

I, LAWRENCE DRAKE JR. Chairperson, and I, PAMELA JORGENSEN
(print name) (print name)
 Treasurer of the ROCKINGHAM COUNTY DEMOCRATIC COMMITTEE
 Committee, located at PO Box 180, PORTSMOUTH, NH 03802
(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

Receipts:

1) Total of all <i>receipts</i> in this report	1) \$ <u>0</u>
2) Total of all <i>receipts</i> in previous reports	2) \$ <u>23,988.74</u>
3) Total of all <i>primary election receipts</i> to date (Add lines 1 and 2)	3) \$ <u>23,988.74</u>

Expenditures:

4) Total <i>expenditures</i> in this report	4) \$ <u>0</u>
5) Total of <i>expenditures</i> in previous reports	5) \$ <u>15056.10</u>
6) Total of all <i>primary election expenditures</i> to date (Add lines 4 and 5)	6) \$ <u>15056.10</u>
7) Balance if SURPLUS	7) \$+ <u>8932.64</u>
8) Balance if DEFICIT	8) \$- _____

Lawrence Drake Jr.
 Signature of Chairman

Pamela Jorgensen
 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

Secretary of State's Office, State House, Room 204, Concord, New Hampshire 03301
 Phone: 603-271-3242 -- Fax: 603-271-6316 -- <http://sos.nh.gov>

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 DEPARTMENT OF STATE

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
<u>N/A</u>					

Total of receipts unitemized (\$25 or under) in this report \$ 0

*** Indicate to which election expenditure applies

ITEMIZED EXPENDITURES

Paid to Whom	Post Office Address	Amount of Expense	Date of Expense	***Primary/General	Nature of Expenditure
<u>N/A</u>				<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