

STATE OF NEW HAMPSHIRE
Statement of Receipts and Expenditures
6-Month Report
for CANDIDATES
After 2020 General Election

Name of Candidate:			
	(print name)		
Address:	(street)		
_		(town/city/state/zip)	
Party:	Office:		
	County:	District No	
Name of Fiscal Agent:			
6 - MONTI	H REPORT OF RECEIPTS AND EXPEN	DITURE AFTER 2020 GENERA	AL ELECTION
Date of Report:	May 3, 2021	November 3, 2021	
	May 3, 2022	November 3, 2022 [
SUMMARY OF REC	EIPTS AND EXPENDITURES	THIS PERIOD	TO DATE
RECEIPTS			
A. Total amount of rec	ceipts over \$50	\$	\$
B. Total amount of rec	eipts unitemized (\$50 or less)	\$	\$
C. Number of Contribution	utors		
D. Number of unitemiz	zed receipts (\$50 or less)		
E. Subtotal of non-more	netary (in-kind) receipts	\$	\$
F. Subtotal of monetar	y receipts ($A + B - E$)	\$	\$
G. Total Surplus/Defic	cit from previous campaign	\$	\$
TOTAL I	RECEIPTS (E + F + G)	\$	\$

EXPENDITURES		
H. Total amount of expenditures (excluding Ind. Exp. of \$1,000 or more)	\$	\$
I. Total amount of Independent Expenditures \$1,000 or more	\$	\$
J. Number of Independent Expenditures \$1,000 or more		
TOTAL EXPENDITURES (H + I)	\$	\$
PENDING EXPENDITURES - Promise of Payment	\$	\$
BALANCE (Total Receipts minus Total Expenditures)		\$
RSA 664:6, 7. Any candidate or political committee which has any outstanding debt,	obligation or surplus follow	ving the election shall
file reports at least once every 6 months thereafter until the obligation or indebtedness	is entirely satisified or surp	plus deleted, at which

time a final report shall be filed.

Signature of Candidate

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 RECEI	PTS					Reporting	g period ending		20	
Full Name of Contributor (Alphabetical Order)	Post Office Address	Amount of Contribution	Date Received	Aggregate* Contributions to Date		following for	ion or aggregate c or the contributor: e Name of Employ		over \$200 list the f Principal Place of Business	
Total of receipts unitemi	ized (\$50 or under) in th	is report \$								
ITEMIZED EXPENDI						***Indica	te to which elect	ion expenditur	e applies	
ITEMIZED EXPENDI		-	Amount of Expense	Date Expended	***Pre-Pri	*** Indica mary/Primar		<i>ion expenditur</i> Nature of E:		
	TURES	-			***Pre-Pri			_		
	TURES	-				mary/Primar	y/General	_		
	TURES	-				mary/Primar	y/General	_		
	TURES	-				mary/Primar	y/General	_		
	TURES	-				mary/Primary	y/General	_		
	TURES	-				mary/Primary	y/General	_		
	TURES	-				mary/Primary	y/General	_		

*List occupation, job title, name of employer and city or town of principal place of business if total exceeds \$200 for primary or general election. RSA 664:6, I.