



**STATE OF NEW HAMPSHIRE**  
**Statement of Receipts and Expenditures**  
**for CANDIDATES**  
**(RSA 664)**  
**November 4, 2008 - General Election**

I, \_\_\_\_\_ of \_\_\_\_\_  
(print name) (street)  
 \_\_\_\_\_, candidate for the office of \_\_\_\_\_  
(town/city zip code)

County of \_\_\_\_\_ District No. \_\_\_\_\_ for the \_\_\_\_\_ party,

report that I have expenditures exceeding \$500 for the general election and do submit, with my fiscal agent the following report of receipts and expenditures.

**SUMMARY OF RECEIPTS AND EXPENDITURES FOR GENERAL ELECTION**

Date of Report:                      October 15                          October 29                          November 12   

1) Amount brought forward from Primary Election                      1) \$ \_\_\_\_\_  
(Required only on first report filed for General Election)                      (Indicate Surplus or Deficit)

**Receipts:**

2) Total of all *general election receipts* in this report                      2) \$ \_\_\_\_\_

3) Total of all *receipts* previously reported for general election                      3) \$ \_\_\_\_\_

4) Total of all *general election receipts* to date                      4) \$ \_\_\_\_\_  
(Add lines 1,2 and 3)

**Expenditures:**

5) Total *general election expenditures* in this report                      5) \$ \_\_\_\_\_

6) Total of *general election expenditures* previously reported                      6) \$ \_\_\_\_\_

7) Total of *expenditures* to date for general election                      7) \$ \_\_\_\_\_

8) Balance if **SURPLUS**                      8) \$+ \_\_\_\_\_

9) Balance if **DEFICIT**                      9) \$- \_\_\_\_\_

\_\_\_\_\_  
 Signature of Candidate

\_\_\_\_\_  
 Signature of Fiscal Agent

**GENERAL ELECTION ITEMIZED RECEIPTS**

Reporting Period ending \_\_\_\_\_ 2008

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 \$ \_\_\_\_\_

\*\*\* Indicate to which election expenditure applies

**GENERAL ELECTION 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"/> <input type="checkbox"/>	
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				<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