

June 18, 2014

Year End Report 2013 Amended

Re: ID# COSIS 973

Advocates For New Hampshire Patients

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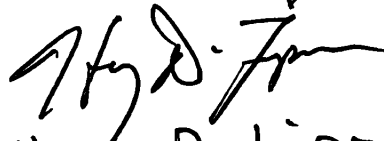
2014 JUN 19 AM 11:14

FEC MAIL CENTER

To Whom It May Concern:

Please find an amended/corrected
year-end report for 2013.

Sincerely,



Henry D. Lipman

Treasurer of

Advocates for NH Patients

603-455-1145

14031250069

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

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2014 JUN 19 AM 11:14

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1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5

ADVOCATES FOR NEW HAMPSHIRE PATIENTS

ADDRESS (number and street) 76 SARAH CIRCLE

Check if different than previously reported. (ACC)

LACONIA NH 03246

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C00515973

3. IS THIS REPORT NEW OR AMENDED (N) OR (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

- Feb 20 (M2)
- Mar 20 (M3)
- Apr 20 (M4)
- May 20 (M5)
- Jun 20 (M6)
- Jul 20 (M7)
- Aug 20 (M8)
- Sep 20 (M9)
- Oct 20 (M10)
- Nov 20 (M11) (Non-Election Year Only)
- Dec 20 (M12) (Non-Election Year Only)
- Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

- Primary (12P)
- General (12G)
- Runoff (12R)
- Convention (12C)
- Special (12S)

Election on [] in the State of []

(d) 30-Day POST-Election Report for the:

- General (30G)
- Runoff (30R)
- Special (30S)

Election on [] in the State of []

5. Covering Period 07/29/2013 through 12/31/2013

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Henry D. Lipman

Signature of Treasurer [Signature] Date 06/18/2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only

FEC FORM 3X Rev. 12/2004

14031250070

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

ADVOCATES FOR NEW HAMPSHIRE PATIENTS

Report Covering the Period: From:

To:

**COLUMN A
This Period**

**COLUMN B
Calendar Year-to-Date**

6. (a) Cash on Hand January 1, <input type="text" value="2013"/>	<input type="text" value="28,869.98"/>	<input type="text" value="28,869.98"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="28,869.98"/>	
(c) Total Receipts (from Line 19).....	<input type="text" value="0.00"/>	<input type="text" value="132.93"/> INKIND
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="28,869.98"/>	<input type="text" value="28,869.98"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="1,500.00"/>	<input type="text" value="1,632.93"/> 13293 INKIND
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="27,369.98"/>	<input type="text" value="27,369.98"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="0.00"/>	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

14031250071

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

ADVOCATES FOR NEW HAMPSHIRE PATIENTS

Report Covering the Period: From:

07 / 29 / 2013

To:

12 / 31 / 2013

I. Receipts

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....
In Kind

0.00

132.93

(ii) Unitemized.....

(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶

0.00

132.93

(b) Political Party Committees.....

(c) Other Political Committees (such as PACs).....

(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶

0.00

132.93

12. Transfers From Affiliated/Other Party Committees.....

13. All Loans Received.....

14. Loan Repayments Received.....

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

17. Other Federal Receipts (Dividends, Interest, etc.).....

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account (from Schedule H3).....

(b) Levin Funds (from Schedule H5).....

(c) Total Transfers (add 18(a) and 18(b))..

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶

0.00

132.93

20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

0.00

132.93

14031250072

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) <i>In Kind</i>	0.00	132.93
34. Total Contribution Refunds (from Line 28(d))		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	132.93
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))		
37. Offsets to Operating Expenditures (from Line 15, page 3)..... ▶		
38. Net Operating Expenditures (subtract Line 37 from Line 36)		

14031250074

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE OF

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
ADVOCATES FOR NEW HAMPSHIRE PATIENTS

A.

Full Name (Last, First, Middle Initial)
Senate Republican Majority PAC (NH)

Mailing Address
Concord, NH 03301

City State Zip Code

Purpose of Disbursement
Political donation

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement
10/30/2013

Amount of Each Disbursement this Period
500.00

Category/Type

B.

Full Name (Last, First, Middle Initial)
NH Senate Democratic Caucus

Mailing Address
Concord NH 03301

City State Zip Code

Purpose of Disbursement
Political donation

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement
12/06/2013

Amount of Each Disbursement this Period
500.00

Category/Type

C.

Full Name (Last, First, Middle Initial)
Denoncourt, Waldron & Sullivan PA

Mailing Address
67 Water St Suite 201

City State Zip Code
Laconia NH 03246-3300

Purpose of Disbursement
Preparation of 990 for Advocates for NH Pts

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement
12/06/2013

Amount of Each Disbursement this Period
500.00

Category/Type

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

14031250075

14031250076

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 Henry D. Lipnow
 Advocates for NH Patients
 76 Sarah Circle
 Lebanon, NH 03246

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 Federal Election Commission
 999 E Street NW
 Washington, DC
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 20463

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 Date Accepted (MM/DD/YY) 6/18/14 Scheduled Delivery Time 10:30 AM 3:00 PM Insurance Fee \$ COD Fee \$
 Time Accepted 12:30 PM 10:30 AM Delivery Fee \$ Return Receipt Fee \$ Live Animal Transportation Fee \$
 Weight lbs. 4.4 Sundry/Holiday Premium Fee \$ Total Postage & Fees \$ 23.70
 Flat Rate Flat Rate \$ Acceptance Employee Initials [Signature]

DELIVERY (POSTAL SERVICE USE ONLY)
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 Delivery Attempt (MM/DD/YY) Time Employee Signature

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Federal Election Commission
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 The FEC added this page to the end of this filing to indicate how it was received.

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<input type="checkbox"/> No Postmark	
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<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked


 PREPARER
 (8/2013)

6/19/14
 DATE PREPARED

14031250077