

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
New Hampshire Republican State Committee

ADDRESS (number and street) 10 Water Street  
 Check if different than previously reported. (ACC)  
Concord NH 03301-4844

2. **FEC IDENTIFICATION NUMBER** C00136457  
3. IS THIS REPORT  NEW (N) OR  AMENDED (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 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12G)  
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 06 01 2008 through 06 30 2008

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 Robert Scott

Signature of Treasurer Electronically Filed by Robert Scott Date 03 27 2009

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)

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
New Hampshire Republican State Committee

Report Covering the Period: From: 

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date				
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr></table>	Y	Y	Y	Y		36101.71
Y	Y	Y	Y			
(b) Cash on Hand at Beginning of Reporting Period .....	94690.15					
(c) Total Receipts (from Line 19) .....	30480.00	228894.63				
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	125170.15	264996.34				
7. Total Disbursements (from Line 31) .....	17906.57	157732.76				
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	107263.58	107263.58				
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	.00					
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	.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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
New Hampshire Republican State Committee

Report Covering the Period: From: 

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	8

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	11850.00	64172.21
(i) Itemized (use Schedule A) .....	3630.00	48602.69
(ii) Unitemized .....	15480.00	112774.90
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	0.00	41953.06
(c) Other Political Committees (such as PACs) .....	15480.00	154727.96
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....		
12. Transfers From Affiliated/Other Party Committees .....	15000.00	74166.67
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	30480.00	228894.63
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	30480.00	228894.63

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	7167.23	107020.93
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	7167.23	107020.93
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	10739.34	50711.83
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	10739.34	50711.83
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	17906.57	157732.76
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	17906.57	157732.76

**DETAILED SUMMARY PAGE**  
of Disbursements

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 .....	15480.00	154727.96
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	15480.00	154727.96
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	7167.23	107020.93
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	7167.23	107020.93

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 16  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)  
New Hampshire Republican State Committee

**A.**

Full Name (Last, First, Middle Initial)  
David Currier

Mailing Address PO Box 926

City Henniker State NH Zip Code 03242-0926

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 04 / 2008

Transaction ID: SA11AI-47205-62810-c

Amount of Each Receipt this Period 1000.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Stephen Duprey

Mailing Address 123 School Street

City Concord State NH Zip Code 03301-2908

FEC ID number of contributing federal political committee. **C**

Name of Employer FoxFire Management Occupation Owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 06 / 04 / 2008

Transaction ID: SA11AI10631762811c

Amount of Each Receipt this Period 8750.00

Victory

**C.**

Full Name (Last, First, Middle Initial)  
Craig Cain

Mailing Address 80 Lyme Road Apt. 449

City Hanover State NH Zip Code 03755-1236

FEC ID number of contributing federal political committee. **C**

Name of Employer n/a Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 16 / 2008

Transaction ID: SA11AI-35547-62818-c

Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 10000.00

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

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 7 / 16  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
New Hampshire Republican State Committee

**A.** Full Name (Last, First, Middle Initial)  
William DeLong  
 Mailing Address 242 Alton Mountain Road  
 City Alton Bay State NH Zip Code 03810-4314  
 Date of Receipt 06 / 18 / 2008  
**Transaction ID:** SA11AI-53335-62904-c  
 Amount of Each Receipt this Period 500.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer n/a Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

**B.** Full Name (Last, First, Middle Initial)  
William Smith  
 Mailing Address PO Box 808  
 City New Castle State NH Zip Code 03854-0808  
 Date of Receipt 06 / 22 / 2008  
**Transaction ID:** SA11AI-54349-62910-c  
 Amount of Each Receipt this Period 1000.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer none Occupation retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

**C.** Full Name (Last, First, Middle Initial)  
Karl Norwood  
 Mailing Address 89 Chestnut Hill Road  
 City Amherst State NH Zip Code 03031-1505  
 Date of Receipt 06 / 30 / 2008  
**Transaction ID:** SA11AI-33924-62925-c  
 Amount of Each Receipt this Period 250.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer The Norwood Group Occupation Owner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1750.00  
**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 8 / 16	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
New Hampshire Republican State Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Fred Ward		Date of Receipt																					
	Mailing Address 386 Route 123 S		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	6		3	0		2	0	0	8
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	6		3	0		2	0	0	8														
	City	State	Zip Code		<b>Transaction ID:</b> SA11AI-51907-62921-c																			
	Stoddard	NH	03464-4388																					
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>		Amount of Each Receipt this Period																				
Name of Employer Self		Occupation meteorologist		<input type="text" value="100.00"/>																				
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼																						
		<input type="text" value="350.00"/>																						

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="100.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="11850.00"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 9 / 16
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
New Hampshire Republican State Committee

A.

Full Name (Last, First, Middle Initial)  
Republican National Committee

Mailing Address 310 1st Street SE

City State Zip Code  
Washington DC 20003-1885

FEC ID number of contributing federal political committee. **C** C00003418

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
32500.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 17 / 2008

Transaction ID: SA12-77515-62831-c

Amount of Each Receipt this Period  
15000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	15000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	15000.00

# 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)

<input checked="" 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

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NAME OF COMMITTEE (In Full)  
New Hampshire Republican State Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Conway Office Products Mailing Address PO Box 6060 City Nashua State NH Zip Code 03063-6060 Purpose of Disbursement Copier supplies & paper Candidate Name	Transaction ID: SB21B-103397-62877-e Date of Disbursement MM / DD / YYYY 06 / 06 / 2008
	Amount of Each Disbursement this Period 1496.42
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Retire Debt -
Category/Type 001	

<b>B.</b> Full Name (Last, First, Middle Initial) U.S. Postmaster Mailing Address King's Plaza 12 Loudon Road City Concord State NH Zip Code 03301 Purpose of Disbursement BRC Postage Candidate Name	Transaction ID: SB21B-9721-62875-e Date of Disbursement MM / DD / YYYY 06 / 06 / 2008
	Amount of Each Disbursement this Period 150.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Retire Debt -
Category/Type 001	

<b>C.</b> Full Name (Last, First, Middle Initial) One Communications Mailing Address PO Box 9614 City Manchester State NH Zip Code 03108-9614 Purpose of Disbursement Telephone bill Candidate Name	Transaction ID: SB21B-114743-62879-e Date of Disbursement MM / DD / YYYY 06 / 06 / 2008
	Amount of Each Disbursement this Period 377.14
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Retire Debt -
Category/Type 001	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2023.56
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# 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)

<input checked="" 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

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NAME OF COMMITTEE (In Full)  
New Hampshire Republican State Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Thomas DeRosa</p> <p>Mailing Address 455 Union Street Apt. 307</p> <p>City Manchester State NH Zip Code 03103-5250</p> <p>Purpose of Disbursement Reimbursement - Town committee meeting reminder cards</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Retire Debt -</p>	<p><b>Transaction ID:</b> SB21B-114353-62878-e</p> <p>Date of Disbursement 06 / 06 / 2008</p> <p>Amount of Each Disbursement this Period 375.96</p> <p>001 Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Rick McPartlin</p> <p>Mailing Address 4 Charles Street</p> <p>City Concord State NH Zip Code 03301-4148</p> <p>Purpose of Disbursement Bookkeeping</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Retire Debt -</p>	<p><b>Transaction ID:</b> SB21B-103398-62880-e</p> <p>Date of Disbursement 06 / 06 / 2008</p> <p>Amount of Each Disbursement this Period 200.00</p> <p>001 Category/ Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Atherton Building, Llc</p> <p>Mailing Address 10 Water Street</p> <p>City Concord State NH Zip Code 03301-4844</p> <p>Purpose of Disbursement Administrative/Salary/Overhead: Rent</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Retire Debt -</p>	<p><b>Transaction ID:</b> SB21B-114681-62881-e</p> <p>Date of Disbursement 06 / 13 / 2008</p> <p>Amount of Each Disbursement this Period 1300.00</p> <p>001 Category/ Type</p>

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

1875.96

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

**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 12 / 16

<input checked="" 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

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NAME OF COMMITTEE (In Full)  
New Hampshire Republican State Committee

A.	Full Name (Last, First, Middle Initial) Direct Mail Systems, Inc.	Transaction ID: SB21B-14268-62984-e Date of Disbursement
	Mailing Address 12450 Automobile Boulevard	<input type="text" value="06"/> / <input type="text" value="20"/> / <input type="text" value="2008"/>
	City Clearwater State FL Zip Code 33762-4427	Amount of Each Disbursement this Period
	Purpose of Disbursement Fundraising: Fundraising Mail Expenses Candidate Name	<input type="text" value="1895.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="003"/> Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Retire Debt -	

B.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: SB21B-88694-62998-e Date of Disbursement
	Mailing Address PO Box 53852	<input type="text" value="06"/> / <input type="text" value="21"/> / <input type="text" value="2008"/>
	City Phoenix State AZ Zip Code 85072-3852	Amount of Each Disbursement this Period
	Purpose of Disbursement Travel, office supplies & postage Candidate Name	<input type="text" value="872.96"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Retire Debt -	

C.	Full Name (Last, First, Middle Initial) Dolphin Capital Corp.	Transaction ID: SB21B-114850-62985-e Date of Disbursement
	Mailing Address PO Box 605	<input type="text" value="06"/> / <input type="text" value="21"/> / <input type="text" value="2008"/>
	City Moberly State MO Zip Code 65270-0605	Amount of Each Disbursement this Period
	Purpose of Disbursement Fax lease Candidate Name	<input type="text" value="36.17"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Retire Debt -	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="2804.13"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**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)

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<input checked="" 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

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NAME OF COMMITTEE (In Full)  
New Hampshire Republican State Committee

<b>A.</b> Full Name (Last, First, Middle Initial) GE Capital <hr/> Mailing Address PO Box 642333 <hr/> City Pittsburgh State PA Zip Code 15264-2333 <hr/> Purpose of Disbursement Copier lease Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Retire Debt -	<b>Transaction ID:</b> SB21B-114652-62986-e <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 1 / 2 0 0 8
	Amount of Each Disbursement this Period 241.39 Category/Type: 001
<b>B.</b> Full Name (Last, First, Middle Initial) Verizon Wireless Manchester <hr/> Mailing Address 1500 S Willow Street <hr/> City Manchester State NH Zip Code 03103-3220 <hr/> Purpose of Disbursement Telephone Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Retire Debt -	<b>Transaction ID:</b> SB21B-114332-62987-e <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 1 / 2 0 0 8
	Amount of Each Disbursement this Period 148.19 Category/Type: 001

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

389.58

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

7093.23

# 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)

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<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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New Hampshire Republican State Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Thomas DeRosa <hr/> Mailing Address 455 Union Street Apt. 307 <hr/> City Manchester State NH Zip Code 03103-5250 <hr/> Purpose of Disbursement FEA 100% Federal: Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Retire Debt -	Transaction ID: SB30b-114353-62981-e Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 3 / 2 0 0 8
	Amount of Each Disbursement this Period 1167.41
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Retire Debt -
<b>B.</b> Full Name (Last, First, Middle Initial) Peter Flynn <hr/> Mailing Address 22 N Spring Street Apt. 2 <hr/> City Concord State NH Zip Code 03301-3919 <hr/> Purpose of Disbursement FEA 100% Federal: Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Retire Debt -	Transaction ID: SB30b-103393-62979-e Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 3 / 2 0 0 8
	Amount of Each Disbursement this Period 1143.14
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Retire Debt -
<b>C.</b> Full Name (Last, First, Middle Initial) Michael Hamilton <hr/> Mailing Address 79 Prospect Street # 2 <hr/> City Manchester State NH Zip Code 03104-3617 <hr/> Purpose of Disbursement FEA 100% Federal: Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Retire Debt -	Transaction ID: SB30b-115080-62980-e Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 3 / 2 0 0 8
	Amount of Each Disbursement this Period 1347.98
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Retire Debt -

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

3658.53

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

**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)

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<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 checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
New Hampshire Republican State Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Allison Welch <hr/> Mailing Address 605 Silver Street Apt. 1R <hr/> City Manchester State NH Zip Code 03103-4440 <hr/> Purpose of Disbursement FEA 100% Federal: Earned bonus Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Retire Debt -	Transaction ID: SB30b-103388-62982-e Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2008
	Amount of Each Disbursement this Period 1651.27
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Retire Debt -
<b>B.</b> Full Name (Last, First, Middle Initial) Paychex <hr/> Mailing Address 43 Constitution Drive <hr/> City Bedford State NH Zip Code 03110-6083 <hr/> Purpose of Disbursement FEA 100% Federal: Payroll taxes Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Retire Debt -	Transaction ID: SB30b-114931-62983-e Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2008
	Amount of Each Disbursement this Period 1771.01
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Retire Debt -
<b>C.</b> Full Name (Last, First, Middle Initial) Thomas DeRosa <hr/> Mailing Address 455 Union Street Apt. 307 <hr/> City Manchester State NH Zip Code 03103-5250 <hr/> Purpose of Disbursement FEA 100% Federal: Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Retire Debt -	Transaction ID: SB30b-114353-62988-e Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2008
	Amount of Each Disbursement this Period 1167.41
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Retire Debt -

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4589.69
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

