

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

RECEIVED FEC MAIL OPERATIONS CENTER

Office Use Only 8-19

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

12FE4M5

NEW HAMPSHIRE BANKERS ASSOCIATION BANKERS

ADDRESS (number and street) 122 North Main Street

PO Box 2586

Check if different than previously reported. (ACC)

Clarendon NH 03302-2586

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C 00109678

3. IS THIS REPORT NEW OR AMENDED

4. TYPE OF REPORT (Choose One)

(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), Dec 20 (M12), Jan 31 (YE)

(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)

(c) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Runoff (12R), Convention (12C), Special (12S)

(d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S)

5. Covering Period 1.0 / 0.1 / 2.0.6 through 1.1 / 2.7 / 2.0.6

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 Gerald H. Little

Signature of Treasurer [Handwritten Signature]

Date 1.1 / 2.8 / 2.0.6

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

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**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

New Hampshire Bankers Association BankPAC

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="2.0.0.6"/>		<input type="text" value="1.1.5.5.2.3.7"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="5.9.4.8.2.4"/>	
(c) Total Receipts (from Line 19).....	<input type="text" value="0"/>	<input type="text" value="4.1.0.5.0.0"/>
(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="5.9.4.8.2.4"/>	<input type="text" value="1.5.6.5.7.3.7"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="2.8.4.3.4"/>	<input type="text" value="9.9.9.3.4.7"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="5.6.6.3.9.0"/>	<input type="text" value="5.6.6.3.9.0"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="0"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="0"/>	

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 Bankers Association BankPAC

Report Covering the Period: From: / / To: / /

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).....	0	0
(ii) Unitemized.....	0	4,105.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	0	4,105.00
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶	0	4,105.00
12. Transfers From Affiliated/Other Party Committees.....	0	0
13. All Loans Received.....	0	0
14. Loan Repayments Received.....	0	0
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0	0
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0	0
17. Other Federal Receipts (Dividends, Interest, etc.).....	0	0
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0	0
(b) Levin Funds (from Schedule H5).....	0	0
(c) Total Transfers (add 18(a) and 18(b))..	0	0
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	0	4,105.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	0	4,105.00

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DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0	0
(ii) Non-Federal Share.....	0	0
(b) Other Federal Operating Expenditures	2 8 4 3 4	5 6 3 4 7
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	2 8 4 3 4	5 6 3 4 7
22. Transfers to Affiliated/Other Party Committees.....	0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0	9 4 3 0 0 0
24. Independent Expenditures (use Schedule E)	0	0
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0	0
26. Loan Repayments Made.....	0	0
27. Loans Made.....	0	0
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0	0
(b) Political Party Committees	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0	0
29. Other Disbursements	0	0
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0	0
(ii) "Levin" Share.....	0	0
(b) Federal Election Activity Paid Entirely With Federal Funds	0	0
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)).....	0	0
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	2 8 4 3 4	9 9 9 3 4 7
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2 8 4 3 4	9 9 9 3 4 7

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DETAILED SUMMARY PAGE
of Disbursements

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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)	0	4,105.00
34. Total Contribution Refunds (from Line 28(d))	0	0
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0	4,105.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	2,843.4	5,634.7
37. Offsets to Operating Expenditures (from Line 15, page 3)	0	0
38. Net Operating Expenditures (subtract Line 37 from Line 36)	2,843.4	5,634.7

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**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

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)

New Hampshire Bankers Association BankPAC

Full Name (Last, First, Middle Initial)

A. Citizens Bank - NH

Mailing Address

875 Elm Street

City State Zip Code
Manchester NH 03101

Purpose of Disbursement

Checking Account Service Charge

Candidate Name

0.01

Category/
Type

Date of Disbursement

09 / 18 / 2006

Amount of Each Disbursement this Period

405.6

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Checking Account Fee

Full Name (Last, First, Middle Initial)

B. Citizens Bank- NH

Mailing Address

875 Elm Street

City State Zip Code
Manchester NH 03101

Purpose of Disbursement

Checking Account Service Charge

Candidate Name

0.01

Category/
Type

Date of Disbursement

11 / 06 / 2006

Amount of Each Disbursement this Period

407.8

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Checking Account Fee

Full Name (Last, First, Middle Initial)

C. Capitol Copy

Mailing Address

1 Eagle Square

City State Zip Code
Concord NH 03301

Purpose of Disbursement

Envelope Printing

Candidate Name

0.03

Category/
Type

Date of Disbursement

11 / 27 / 2006

Amount of Each Disbursement this Period

860.0

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Solicitation Envelopes

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

1,673.4

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

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**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 Bankers Association BankPAC

Full Name (Last, First, Middle Initial)

A. Concord Post Master

Mailing Address
12 Loudon Road

City State Zip Code
Concord NH 03301

Purpose of Disbursement
Stamp Purchase

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) **Solicitation postage**

Date of Disbursement
MM / DD / YYYY
1 / 1 / 2006

Amount of Each Disbursement this Period
1,170.00

Category/Type
003

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY

Amount of Each Disbursement this Period

Category/Type

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY

Amount of Each Disbursement this Period

Category/Type

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

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

1,170.00

2,843.40

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Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

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Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery <input type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
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<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

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 (3/2005)

12/7/06
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