

**FEC
FORM 3X**

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

RECEIVED
FEC MAIL
OPERATIONS CENTER
Feb 1
2005 FEB 2 A 10:14

Office Use Only

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

NEW HAMPSHIRE BANKERS ASSOCIATION BANKPAC

ADDRESS (number and street) **122 NORTH MAIN STREET**

Check if different than previously reported. (ACC) **PO BOX 2586**
CONCORD NH 03302-2586

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C00109678

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 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) 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 (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** / **01** / **2005** through **12** / **31** / **2005**

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 *Gerald H. Little*

Date **01** / **03** / **2006**

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
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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="2005"/>		<input type="text" value="1460723"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="1155237"/>	
(c) Total Receipts (from Line 19).....	<input type="text" value="580500"/>	<input type="text" value="590500"/>
(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="1735737"/>	<input type="text" value="2051223"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="886356"/>	<input type="text" value="895987"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="849381"/>	<input type="text" value="1155237"/>
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

26038970913

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

New Hampshire Bankers Association BankPAC

Report Covering the Period: From: MM / DD / YYYY MM / DD / YYYY YYYY To: MM / DD / YYYY MM / DD / YYYY YYYY

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).....	5,000.00	5,000.00
(ii) Unitemized.....	5,205.00	5,305.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	5,705.00	5,805.00
(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).....▶	5,705.00	5,805.00
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)).....▶	5,705.00	5,805.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	5,705.00	5,805.00

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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	3,375.6	4,338.7
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	3,375.6	4,338.7
22. Transfers to Affiliated/Other Party Committees.....	0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	8,526.0	8,526.0
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))..	8,863.56	8,959.87
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	8,863.56	8,959.87

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DETAILED SUMMARY PAGE
of Disbursements

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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)	5 7 0 5 0 0	5 8 0 5 0 0
34. Total Contribution Refunds (from Line 28(d))	0	0
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5 7 0 5 0 0	5 8 0 5 0 0
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	3 3 7 5 6	4 3 3 8 7
37. Offsets to Operating Expenditures (from Line 15, page 3)	0	0
38. Net Operating Expenditures (subtract Line 37 from Line 36)	3 3 7 5 6	4 3 3 8 7

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)			PAGE 1 OF 1	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16	<input type="checkbox"/> 17

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

A. Full Name (Last, First, Middle Initial)
Linda Normandin

Mailing Address
71 Walker Street

City **Laconia** State **NH** Zip Code **03246**

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

Name of Employer **Laconia Savings Bank** Occupation **President**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5 0 0 0 0

Date of Receipt
1 1 / 1 6 / 2 0 0 5

Amount of Each Receipt this Period
5 0 0 0 0

B. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

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

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)						PAGE 1 OF 3
	<input checked="" type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b	

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NAME OF COMMITTEE (In Full)
New Hampshire Bankers Association BankPAC

Full Name (Last, First, Middle Initial)
A. Citizens Bank New Hampshire

Date of Disbursement
07 / 18 / 2005

Mailing Address
875 Elm Street
City: Manchester State: NH Zip Code: 03101

Purpose of Disbursement
Checking Account Service Charge

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) **Checking Account Fee**

State: District:

Amount of Each Disbursement this Period
1.742

Full Name (Last, First, Middle Initial)
B. Citizens Bank New Hampshire

Date of Disbursement
08 / 16 / 2005

Mailing Address
875 Elm Street
City: Manchester State: NH Zip Code: 03101

Purpose of Disbursement
Checking Account Service Charge

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) **Checking Account Fee**

State: District:

Amount of Each Disbursement this Period
1.743

Full Name (Last, First, Middle Initial)
C. Citizens Bank New Hampshire

Date of Disbursement
09 / 16 / 2005

Mailing Address
875 Elm Street
City: Manchester State: NH Zip Code: 03101

Purpose of Disbursement
Checking Account Service Charge

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) **Checking Account Fee**

State: District:

Amount of Each Disbursement this Period
2.050

SUBTOTAL of Disbursements This Page (optional).....▶ 553.4

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. U.S. Postal Service

Mailing Address

Loudon Road

City State Zip Code
Concord NH 03301

Purpose of Disbursement
Purchase of Stamps

0.03
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) **Purchase of Stamps**

State: District:

Date of Disbursement

1.0 / 2.8 / 2.0.0.5

Amount of Each Disbursement this Period

1.4800

Full Name (Last, First, Middle Initial)

B. Citizens Bank New Hampshire

Mailing Address

875 Elm Street

City State Zip Code
Manchester NH 03101

Purpose of Disbursement
Checking Account Service Fee

0.01
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) **Checking Account Fee**

State: District:

Date of Disbursement

10 / 1.7 / 2.0.0.5

Amount of Each Disbursement this Period

2.556

Full Name (Last, First, Middle Initial)

C. Capitol Copy, Inc.

Mailing Address

1 Eagle Square, Main Street

City State Zip Code
Concord NH 03301

Purpose of Disbursement
Envelope Printing

0.03
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) **Printing**

State: District:

Date of Disbursement

11 / 30 / 2005

Amount of Each Disbursement this Period

8310

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

2.55666

1.4800

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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)						PAGE 3 OF 3
	<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 28	
	<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

A. Full Name (Last, First, Middle Initial)
Citizens Bank New Hampshire

Mailing Address
875 Elm Street

City: Manchester State: NH Zip Code: 03101

Purpose of Disbursement: Checking Account Service Charge

Candidate Name: _____

Office Sought: House Senate President
State: _____ District: _____

Disbursement For: Primary General Other (specify) **Checking Account Fee**

Date of Disbursement: 1/16/2005

Amount of Each Disbursement this Period: 2556

Category/Type: 001

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

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

Amount of Each Disbursement this Period

Category/Type

SUBTOTAL of Disbursements This Page (optional) 2,556

TOTAL This Period (last page this line number only) 3,375

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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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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. American Bankers Association BankPAC

Mailing Address
1120 Connecticut Avenue, NW

City State Zip Code
Washington DC 20036

Purpose of Disbursement

Annual Contribution
Candidate Name

0 1 1
Category/
Type

Date of Disbursement

MM / DD / YYYY
0 8 / 0 4 / 2 0 0 5

Amount of Each Disbursement this Period

7 5 2 6 0 0

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Annual Contribution

Full Name (Last, First, Middle Initial)

B. Bass Victory Committee

Mailing Address
PO Box 3451

City State Zip Code
Concord NH 03301

Purpose of Disbursement

Campaign Contribution
Candidate Name

0 1 1
Category/
Type

Date of Disbursement

MM / DD / YYYY
1 2 / 2 3 / 2 0 0 5

Amount of Each Disbursement this Period

1 0 0 0 0 0

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: NH District: 2nd

Full Name (Last, First, Middle Initial)

C.
Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

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

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

8 5 2 6 0 0

8 5 2 6 0 0

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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.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input checked="" type="checkbox"/> USPS Registered/Certified	Postmarked (R/C) <i>1/23/06</i>
<input type="checkbox"/> USPS Priority Mail	Postmarked
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
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

lel
 PREPARER
 (3/2005)

2/1/06
 DATE PREPARED

26038970922