

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 Democratic Party

ADDRESS (number and street) 2 1/2 Beacon St.
 Check if different than previously reported. (ACC)
Concord NH 03301

2. **FEC IDENTIFICATION NUMBER** C00178038
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 08 01 2007 through 08 31 2007

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 Rick Trombly

Signature of Treasurer Electronically Filed by Rick Trombly Date 11 15 2007

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
New Hampshire Democratic Party

Report Covering the Period: From:

| | |
|---|---|
| M | M |
| 0 | 8 |

| | |
|---|---|
| D | D |
| 0 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 7 |

 To:

| | |
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| M | M |
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| | |
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| D | D |
| 3 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 7 |

| | 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><tr><td>2</td><td>0</td><td>0</td><td>7</td></tr></table> | Y | Y | Y | Y | 2 | 0 | 0 | 7 | | 29960.57 |
| Y | Y | Y | Y | | | | | | | |
| 2 | 0 | 0 | 7 | | | | | | | |
| (b) Cash on Hand at Beginning of Reporting Period | 303626.03 | | | | | | | | | |
| (c) Total Receipts (from Line 19) | 64538.31 | 787074.44 | | | | | | | | |
| (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | 368164.34 | 817035.01 | | | | | | | | |
| 7. Total Disbursements (from Line 31) | 97720.38 | 546591.05 | | | | | | | | |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | 270443.96 | 270443.96 | | | | | | | | |
| 9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | | | | | | | | | |
| 10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D) | 29657.85 | | | | | | | | | |

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 Democratic Party

Report Covering the Period: From:

| | |
|---|---|
| M | M |
| 0 | 8 |

| | |
|---|---|
| D | D |
| 0 | 1 |

| | | | |
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| Y | Y | Y | Y |
| 2 | 0 | 0 | 7 |

 To:

| | |
|---|---|
| M | M |
| 0 | 8 |

| | |
|---|---|
| D | D |
| 3 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 7 |

| 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 | 5780.00 | 98486.08 |
| (i) Itemized (use Schedule A) | 7785.00 | 99551.50 |
| (ii) Unitemized | 13565.00 | 198037.58 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii) | 2450.00 | 30856.49 |
| (b) Political Party Committees | 500.00 | 38175.00 |
| (c) Other Political Committees (such as PACs) | 16515.00 | 267069.07 |
| (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 | 35534.00 | 90021.85 |
| 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) | 324.33 | 2084.39 |
| 16. Refunds of Contributions Made to Federal candidates and Other Political Committees | 0.00 | 0.00 |
| 17. Other Federal Receipts (Dividends, Interest, etc.) | 164.98 | 338199.13 |
| 18. Transfers from Non-Federal and Levin Funds | | |
| (a) Non-Federal Account (from Schedule H3) | 12000.00 | 89700.00 |
| (b) Levin Funds (from Schedule H5) | 0.00 | 0.00 |
| (c) Total Transfer (add 18(a) and 18(b)). | 12000.00 | 89700.00 |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) | 64538.31 | 787074.44 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) | 52538.31 | 697374.44 |

DETAILED SUMMARY PAGE

of Disbursements

| II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 21. Operating Expenditures: | | |
| (a) Shared Federal/Non-Federal Activity (from Schedule H4) | | |
| (i) Federal Share..... | 7044.51 | 54100.18 |
| (ii) Non-Federal Share..... | 12523.54 | 96178.41 |
| (b) Other Federal Operating Expenditures..... | 42790.46 | 308746.85 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... | 62358.51 | 459025.44 |
| 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 | 215.00 |
| (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 | 215.00 |
| 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 | 35361.87 | 87350.61 |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)).... | 35361.87 | 87350.61 |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)).. | 97720.38 | 546591.05 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31)..... | 85196.84 | 450412.64 |

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 | 16515.00 | 267069.07 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 215.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 16515.00 | 266854.07 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))..... | 49834.97 | 362847.03 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3) | 324.33 | 2084.39 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 49510.64 | 360762.64 |

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

| | | |
|--|------------------------------|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 6 / 66 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 |
| <input type="checkbox"/> 12 | <input type="checkbox"/> 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 Democratic Party

| | | | |
|---|-------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) A. Susan W Almy | | Date of Receipt M M / D D / Y Y Y Y 08 / 10 / 2007 | |
| Mailing Address 266 Poverty Ln 4B | | Transaction ID: C4441993 | |
| City Lebanon | State NH | Amount of Each Receipt this Period 500.00 | |
| Zip Code 03766 | | Transaction ID: C4441993 | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 | |
| Name of Employer retired | Occupation retired | Amount of Each Receipt this Period 500.00 | |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1560.00 | Amount of Each Receipt this Period 500.00 | |

| | | | |
|---|------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) B. Sylvia Chaplain | | Date of Receipt M M / D D / Y Y Y Y 08 / 28 / 2007 | |
| Mailing Address 25 Wendover Way | | Transaction ID: C4468299 | |
| City Bedford | State NH | Amount of Each Receipt this Period 150.00 | |
| Zip Code 03110 | | Transaction ID: C4468299 | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 150.00 | |
| Name of Employer retired | Occupation retired | Amount of Each Receipt this Period 150.00 | |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 350.00 | Amount of Each Receipt this Period 150.00 | |

| | | | |
|---|------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) C. Robert W. Christy | | Date of Receipt M M / D D / Y Y Y Y 08 / 30 / 2007 | |
| Mailing Address 4 Pleasant St | | Transaction ID: C4470938 | |
| City Hanover | State NH | Amount of Each Receipt this Period 250.00 | |
| Zip Code 03755-2009 | | Transaction ID: C4470938 | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 | |
| Name of Employer Retired | Occupation Retired | Amount of Each Receipt this Period 250.00 | |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 250.00 | Amount of Each Receipt this Period 250.00 | |

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| SUBTOTAL of Receipts This Page (optional) ▶ | 900.00 |
| TOTAL This Period (last page this line number only) ▶ | 900.00 |

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 7 / 66 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input 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 Democratic Party

A. Full Name (Last, First, Middle Initial)
Lawrence C Drake, Jr

Mailing Address 579 Sagamore Ave
#20

City Portsmouth State NH Zip Code 03801

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

Name of Employer n/a Occupation retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 01 / 2007

Transaction ID: C4304290

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Cynthia D Foss

Mailing Address 17 Gregg St

City Wilton State NH Zip Code 03086

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

Name of Employer FAA Occupation Land Manager

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 01 / 2007

Transaction ID: C4304302

Amount of Each Receipt this Period
20.00

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

Mailing Address 7 McAllister Road

City Bedford State NH Zip Code 03110

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

Name of Employer Red Balloon LLC Occupation Consultant

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 10 / 2007

Transaction ID: C4442116

Amount of Each Receipt this Period
100.00

| | | |
|--|---|--------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 220.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 8 / 66 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input 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 Democratic Party

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) A. William J Gillett | | Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 7 / 2 0 0 7 |
| Mailing Address 1258 Union St. | | Transaction ID: C4439786 |
| City Manchester | State NH | Zip Code 03104 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer RiverStone Resources LLC | Occupation Management | |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 250.00 | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Avrom Goldfeder | | Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 7 / 2 0 0 7 |
| Mailing Address 6030 N. Bernard | | Transaction ID: C4466373 |
| City Chicago | State IL | Zip Code 60659 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer Pharmore Drugs | Occupation President | |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1000.00 | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Lumina Greenway | | Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 1 / 2 0 0 7 |
| Mailing Address 580 Nelson Rd | | Transaction ID: C4304107 |
| City Nelson | State NH | Zip Code 03457 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 35.00 |
| Name of Employer n/a | Occupation retired | |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 282.50 | |

| | | |
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| SUBTOTAL of Receipts This Page (optional) | ▶ | 1285.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 9 / 66 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input 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 Democratic Party

| | | | |
|---|------------------------------------|---|---|
| A. Full Name (Last, First, Middle Initial) Phenton Travis Harker | | Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 2 / 2 0 0 7 | |
| Mailing Address 1353 Chestnut Street | | Transaction ID: C4490374 | |
| City Manchester | State NH | Zip Code 03104 | Amount of Each Receipt this Period 25.00 |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer Concord Hospital | Occupation Physician | | |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 225.00 | | |

| | | | |
|---|---------------------------------------|---|---|
| B. Full Name (Last, First, Middle Initial) Jane Hartley | | Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 7 / 2 0 0 7 | |
| Mailing Address 477 Madison Ave Suite 410 | | Transaction ID: C4466374 | |
| City New York | State NY | Zip Code 10022 | Amount of Each Receipt this Period 2500.00 |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer G-7 Group | Occupation Chief Executive Officer | | |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 2500.00 | | |

| | | | |
|---|------------------------------------|---|--|
| C. Full Name (Last, First, Middle Initial) Alice V King | | Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 3 0 / 2 0 0 7 | |
| Mailing Address PO Box 500 | | Transaction ID: C4470940 | |
| City Rumney | State NH | Zip Code 03266-0500 | Amount of Each Receipt this Period 250.00 |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer State of NH | Occupation Educator | | |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 250.00 | | |

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| SUBTOTAL of Receipts This Page (optional) ▶ | 2775.00 |
| TOTAL This Period (last page this line number only) ▶ | |

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

| | | |
|--|---|--------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 10 / 66 |
| | <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 Democratic Party

| | | | |
|---|------------------------------------|--|---|
| Full Name (Last, First, Middle Initial) A. Howard M Morse | | Date of Receipt M M / D D / Y Y Y Y Y 08 / 01 / 2007 | |
| Mailing Address PO Box 277 | | Transaction ID: C4304303 | |
| City Amherst | State NH | Zip Code 03031 | Amount of Each Receipt this Period 50.00 |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer self | Occupation consultant | | |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 420.00 | | |

| | | | |
|---|------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) B. Elizabeth S. Pool | | Date of Receipt M M / D D / Y Y Y Y Y 08 / 07 / 2007 | |
| Mailing Address PO Box 276 | | Transaction ID: C4439788 | |
| City Dublin | State NH | Zip Code 03444-0276 | Amount of Each Receipt this Period 250.00 |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer Retired | Occupation Retired | | |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 250.00 | | |

| | | | |
|---|------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) C. Robert P Read | | Date of Receipt M M / D D / Y Y Y Y Y 08 / 01 / 2007 | |
| Mailing Address 132 Elwyn Ave | | Transaction ID: C4304292 | |
| City Portsmouth | State NH | Zip Code 03801 | Amount of Each Receipt this Period 100.00 |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer self | Occupation consultant | | |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 620.00 | | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 400.00 |
| TOTAL This Period (last page this line number only) ▶ | |

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

| | | |
|--|------------------------------|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 11 / 66 |
| | (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 Democratic Party

A. Full Name (Last, First, Middle Initial)
Thomas J Silvia

Mailing Address 3 High Meadow Ln

City State Zip Code
Amherst NH 03031

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

Name of Employer Fidelity Occupation Investments

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
MM / DD / YYYY
08 / 01 / 2007

Transaction ID: C4304288

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Katherine Wells Wheeler

Mailing Address 27 Mill Rd

City State Zip Code
Durham NH 03824

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

Name of Employer n/a Occupation retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
MM / DD / YYYY
08 / 01 / 2007

Transaction ID: C4304090

Amount of Each Receipt this Period
100.00

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional) | 200.00 |
| TOTAL This Period (last page this line number only) | 5780.00 |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | | | |
|--|---|------------------------------|-----------------------------|-----------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: | | PAGE 12 / 66 | |
| | (check only one) | | | |
| <input type="checkbox"/> 11a | <input checked="" 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 Democratic Party |
|---|

| | |
|---|--------------------------------------|
| A. Full Name (Last, First, Middle Initial) Democratic National Committee | |
| Mailing Address 430 S Capitol St SE | |
| City Washington | State DC |
| Zip Code 20003-4024 | |
| FEC ID number of contributing federal political committee. C | |
| Name of Employer | Occupation |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 35173.90 |

| |
|---|
| Date of Receipt MM / DD / YYYY 08 / 02 / 2007 |
| Transaction ID: C4490586 |
| Amount of Each Receipt this Period 2450.00 |
| * In-Kind: Voter File Access |

| | | |
|---|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 2450.00 |
| TOTAL This Period (last page this line number only) | ▶ | 2450.00 |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | |
|--|------------------------------|---|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 13 / 66 |
| | (check only one) | |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" 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 Democratic Party

A. Full Name (Last, First, Middle Initial)
National Stonewall Democrats

Mailing Address 1325 Massachusetts Ave N.W.
Ste 700

City State Zip Code
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00375527

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
0 8 / 1 7 / 2 0 0 7

Transaction ID: C4466369

Amount of Each Receipt this Period
500.00

| | | |
|--|---|--------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 500.00 |
| TOTAL This Period (last page this line number only) | ▶ | 500.00 |

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

| | | |
|--|------------------------------|--|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 14 / 66 |
| | (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"/> 16 |
| | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
New Hampshire Democratic Party

A. Full Name (Last, First, Middle Initial)
Democratic National Committee

Mailing Address 430 S Capitol St SE

City State Zip Code
Washington DC 20003-4024

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
35173.90

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 | / | 0 | 7 | / | 2 | 0 | 0 | 7 |

Transaction ID: C4439642

Amount of Each Receipt this Period
534.00

B. Full Name (Last, First, Middle Initial)
Democratic Senatorial Campaign Committee

Mailing Address 430 S Capitol St Se

City State Zip Code
Washington DC 20003-4024

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
85000.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 | / | 1 | 3 | / | 2 | 0 | 0 | 7 |

Transaction ID: C4460047

Amount of Each Receipt this Period
35000.00

| | |
|--|-----------------|
| SUBTOTAL of Receipts This Page (optional) | 35534.00 |
| TOTAL This Period (last page this line number only) | 35534.00 |

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

| | | |
|--|------------------------------|--|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 15 / 66 |
| | (check only one) | |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input checked="" 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 Democratic Party

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) A. Airtran Airways | | Date of Receipt MM / DD / YYYY 08 / 24 / 2007 |
| Mailing Address 9955 Airtran Blvd | | Transaction ID: C4473064 |
| City Orlando | State FL | Zip Code 32827 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 369.60 |
| Name of Employer | Occupation | [MEMO ITEM] * Refund of Overpayment |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 369.60 | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. United States Treasury | | Date of Receipt MM / DD / YYYY 08 / 13 / 2007 |
| Mailing Address PO Box 149195 | | Transaction ID: C4459157 |
| City Austin | State TX | Zip Code 78714-9195 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 324.33 |
| Name of Employer | Occupation | Refund |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 324.33 | |

| | | |
|--|---|--------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 324.33 |
| TOTAL This Period (last page this line number only) | ▶ | 324.33 |

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

| | | |
|--|--|--------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 16 / 66 |
| | <input 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 checked="" type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
New Hampshire Democratic Party

| | | | |
|---|-------------|---|--|
| Full Name (Last, First, Middle Initial) A. Citizens Bank | | Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 3 1 / 2 0 0 7 | |
| Mailing Address 1 Capital Plz | | Transaction ID: C4474264 | |
| City Concord | State NH | Zip Code 03301-4900 | Amount of Each Receipt this Period 111.18 |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer | | Occupation | |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 657.63 | |
| | | Interest | |

| | | | |
|---|-------------|---|---|
| Full Name (Last, First, Middle Initial) B. Citizens Bank | | Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 3 1 / 2 0 0 7 | |
| Mailing Address 1 Capital Plz | | Transaction ID: C4492922 | |
| City Concord | State NH | Zip Code 03301-4900 | Amount of Each Receipt this Period 53.80 |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer | | Occupation | |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 657.63 | |
| | | Interest | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 164.98 |
| TOTAL This Period (last page this line number only) ▶ | 164.98 |

**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 Democratic Party

| | | | |
|--|--|--|-------------------|
| Full Name (Last, First, Middle Initial) A. Ms. Pia Carusone | | Transaction ID: D202793 Date of Disbursement 08 / 17 / 2007 | |
| Mailing Address 16 Hazel St. Apt. 2 | | Amount of Each Disbursement this Period 1466.92 | |
| City Manchester | State NH | Zip Code 03103 | Category/ Type |
| Purpose of Disbursement Payroll Expenses | | <input type="checkbox"/> | |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: District: | | | |

| | | | |
|--|--|--|-------------------|
| Full Name (Last, First, Middle Initial) B. Ms. Pia Carusone | | Transaction ID: D202794 Date of Disbursement 08 / 27 / 2007 | |
| Mailing Address 16 Hazel St. Apt. 2 | | Amount of Each Disbursement this Period 1778.15 | |
| City Manchester | State NH | Zip Code 03103 | Category/ Type |
| Purpose of Disbursement Payroll Expenses | | <input type="checkbox"/> | |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: District: | | | |

| | | | |
|--|--|--|-------------------|
| Full Name (Last, First, Middle Initial) C. Citizens Bank | | Transaction ID: D202740 Date of Disbursement 08 / 03 / 2007 | |
| Mailing Address 1 Capital Plz | | Amount of Each Disbursement this Period 1969.77 | |
| City Concord | State NH | Zip Code 03301-4900 | Category/ Type |
| Purpose of Disbursement Payroll Taxes | | <input type="checkbox"/> | |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: District: | | | |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 5214.84 |
| 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)

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 Democratic Party

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Citizens Bank | | Transaction ID: D202742 Date of Disbursement 08 / 17 / 2007 |
| Mailing Address 1 Capital Plz | | Amount of Each Disbursement this Period 2118.45 |
| City Concord | State NH | |
| Zip Code 03301-4900 | | |
| Purpose of Disbursement Payroll Taxes | | |
| Candidate Name | | Category/ Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Citizens Bank | | Transaction ID: D202744 Date of Disbursement 08 / 17 / 2007 |
| Mailing Address 1 Capital Plz | | Amount of Each Disbursement this Period 29.00 |
| City Concord | State NH | |
| Zip Code 03301-4900 | | |
| Purpose of Disbursement FUTA Taxes | | |
| Candidate Name | | Category/ Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. Citizens Bank | | Transaction ID: D202746 Date of Disbursement 08 / 31 / 2007 |
| Mailing Address 1 Capital Plz | | Amount of Each Disbursement this Period 2654.74 |
| City Concord | State NH | |
| Zip Code 03301-4900 | | |
| Purpose of Disbursement Payroll Taxes | | |
| Candidate Name | | Category/ Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 4802.19 |
| 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 19 / 66

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 Democratic Party

| | | | |
|--|-------------|--|--|
| Full Name (Last, First, Middle Initial) A. Citizens Bank | | Transaction ID: D203155 Date of Disbursement 08 / 31 / 2007 | |
| Mailing Address 1 Capital Plz | | Amount of Each Disbursement this Period 5.95 | |
| City Concord | State NH | Zip Code 03301-4900 | |
| Purpose of Disbursement Bank Fees | | Category/ Type | |
| Candidate Name | | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| State: District: | | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | | |
|--|-------------|--|--|
| Full Name (Last, First, Middle Initial) B. Citizens Bank | | Transaction ID: D203156 Date of Disbursement 08 / 31 / 2007 | |
| Mailing Address 1 Capital Plz | | Amount of Each Disbursement this Period 25.00 | |
| City Concord | State NH | Zip Code 03301-4900 | |
| Purpose of Disbursement Bank Fees | | Category/ Type | |
| Candidate Name | | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| State: District: | | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | | |
|--|-------------|--|--|
| Full Name (Last, First, Middle Initial) C. Citizens Bank | | Transaction ID: D203157 Date of Disbursement 08 / 31 / 2007 | |
| Mailing Address 1 Capital Plz | | Amount of Each Disbursement this Period 28.62 | |
| City Concord | State NH | Zip Code 03301-4900 | |
| Purpose of Disbursement Bank Fees | | Category/ Type | |
| Candidate Name | | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| State: District: | | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | |
|--|-------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 59.57 |
| 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 20 / 66

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 Democratic Party

| | | | |
|--|--|---|--|
| Full Name (Last, First, Middle Initial) A. Citizens Bank | | Transaction ID: D203158 Date of Disbursement 08 / 31 / 2007 | |
| Mailing Address 1 Capital Plz | | Amount of Each Disbursement this Period 19.50 | |
| City Concord State NH Zip Code 03301-4900 | Purpose of Disbursement Bank Fees Candidate Name | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | | |
|--|--|---|--|
| Full Name (Last, First, Middle Initial) B. Citizens Bank | | Transaction ID: D203159 Date of Disbursement 08 / 31 / 2007 | |
| Mailing Address 1 Capital Plz | | Amount of Each Disbursement this Period 0.40 | |
| City Concord State NH Zip Code 03301-4900 | Purpose of Disbursement Bank Fees Candidate Name | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | | |
|--|--|---|--|
| Full Name (Last, First, Middle Initial) C. Citizens Bank | | Transaction ID: D203160 Date of Disbursement 08 / 31 / 2007 | |
| Mailing Address 1 Capital Plz | | Amount of Each Disbursement this Period 132.60 | |
| City Concord State NH Zip Code 03301-4900 | Purpose of Disbursement Bank Fees Candidate Name | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | |
|--|--------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 152.50 |
| 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)

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 Democratic Party

| | | | |
|--|--|---|--|
| Full Name (Last, First, Middle Initial) A. Citizens Bank | | Transaction ID: D203161 Date of Disbursement 08 / 31 / 2007 | |
| Mailing Address 1 Capital Plz | | Amount of Each Disbursement this Period 35.00 | |
| City Concord State NH Zip Code 03301-4900 | Purpose of Disbursement Bank Fees | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Candidate Name | |

| | | | |
|--|--|---|--|
| Full Name (Last, First, Middle Initial) B. Citizens Bank | | Transaction ID: D203162 Date of Disbursement 08 / 13 / 2007 | |
| Mailing Address 1 Capital Plz | | Amount of Each Disbursement this Period 13.00 | |
| City Concord State NH Zip Code 03301-4900 | Purpose of Disbursement Bank Fee | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Candidate Name | |

| | | | |
|--|--|---|--|
| Full Name (Last, First, Middle Initial) C. Daniel Conant | | Transaction ID: D202752 Date of Disbursement 08 / 03 / 2007 | |
| Mailing Address 13B Oak St | | Amount of Each Disbursement this Period 961.59 | |
| City Concord State NH Zip Code 03301 | Purpose of Disbursement Payroll Expenses | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Candidate Name | |

| | |
|--|-------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 1009.59 |
| TOTAL This Period (last page this line number only) ▶ | [Empty Box] |

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 Democratic Party

| | | | |
|--|--|--|--|
| Full Name (Last, First, Middle Initial) A. Daniel Conant | | Transaction ID: D202753 Date of Disbursement 08 / 17 / 2007 | |
| Mailing Address 13B Oak St | | Amount of Each Disbursement this Period 961.58 | |
| City Concord State NH Zip Code 03301 | Purpose of Disbursement Payroll Expenses Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | | |
|--|--|--|--|
| Full Name (Last, First, Middle Initial) B. Daniel Conant | | Transaction ID: D202754 Date of Disbursement 08 / 27 / 2007 | |
| Mailing Address 13B Oak St | | Amount of Each Disbursement this Period 961.58 | |
| City Concord State NH Zip Code 03301 | Purpose of Disbursement Payroll Expenses Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | | |
|--|--|--|--|
| Full Name (Last, First, Middle Initial) C. Delta Dental | | Transaction ID: D202822 Date of Disbursement 08 / 21 / 2007 | |
| Mailing Address PO Box 9566 | | Amount of Each Disbursement this Period 148.65 | |
| City Manchester State NH Zip Code 03108-9566 | Purpose of Disbursement Dental Insurance Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

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| SUBTOTAL of Disbursements This Page (optional) ▶ | 2071.81 |
| 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 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 Democratic Party

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Democratic National Committee | | Transaction ID: D203036 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 2 / 2 0 0 7 |
| Mailing Address 430 S Capitol St SE | | Amount of Each Disbursement this Period 2450.00 |
| City Washington State DC Zip Code 20003-4024 | * in-kind received | |
| Purpose of Disbursement Voter File Access | | Category/ Type |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|-------------------|---|
| Full Name (Last, First, Middle Initial) B. Factotum Productions | | Transaction ID: D202719 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 1 / 2 0 0 7 |
| Mailing Address 95 N Main St | | Amount of Each Disbursement this Period 3000.00 |
| City Westford State MA Zip Code 01886-1211 | Category/ Type | |
| Purpose of Disbursement Database Maintenance | | Candidate Name |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | | |

| | | |
|--|-------------------|---|
| Full Name (Last, First, Middle Initial) C. Factotum Productions | | Transaction ID: D202720 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 7 / 2 0 0 7 |
| Mailing Address 95 N Main St | | Amount of Each Disbursement this Period 3000.00 |
| City Westford State MA Zip Code 01886-1211 | Category/ Type | |
| Purpose of Disbursement Database Maintenance | | Candidate Name |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | | |

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| SUBTOTAL of Disbursements This Page (optional) ▶ | 8450.00 |
| TOTAL This Period (last page this line number only) ▶ | (Empty box) |

**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 24 / 66

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 Democratic Party

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Gordon & Schwenkmeyer | | Transaction ID: D203163 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 7 |
| Mailing Address 300 N Sepulveda Blvd Ste 2050 | | Amount of Each Disbursement this Period 603.98 |
| City El Segundo State CA Zip Code 90245-4477 | Purpose of Disbursement Telemarketing Fees Candidate Name Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Ian Graves | | Transaction ID: D202758 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 7 |
| Mailing Address 553 Merrimack St | | Amount of Each Disbursement this Period 1278.76 |
| City Manchester State NH Zip Code 03103-3427 | Purpose of Disbursement Payroll Expenses Candidate Name Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Ian Graves | | Transaction ID: D202759 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 7 / 2 0 0 7 |
| Mailing Address 553 Merrimack St | | Amount of Each Disbursement this Period 1278.77 |
| City Manchester State NH Zip Code 03103-3427 | Purpose of Disbursement Payroll Expenses Candidate Name Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

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| SUBTOTAL of Disbursements This Page (optional) ▶ | 3161.51 |
| 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 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 Democratic Party

| | | | |
|--|--|---|--|
| Full Name (Last, First, Middle Initial) A. Ian Graves | | Transaction ID: D202760 Date of Disbursement 08 / 27 / 2007 | |
| Mailing Address 553 Merrimack St | | Amount of Each Disbursement this Period 1278.76 | |
| City Manchester State NH Zip Code 03103-3427 | Purpose of Disbursement Payroll Expenses Candidate Name | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | | |
|--|--|---|--|
| Full Name (Last, First, Middle Initial) B. Delana Jones | | Transaction ID: D202764 Date of Disbursement 08 / 03 / 2007 | |
| Mailing Address 21 Tremont | | Amount of Each Disbursement this Period 1357.36 | |
| City Concord State NH Zip Code 03301 | Purpose of Disbursement Payroll Expenses Candidate Name | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | | |
|--|--|---|--|
| Full Name (Last, First, Middle Initial) C. Delana Jones | | Transaction ID: D202765 Date of Disbursement 08 / 17 / 2007 | |
| Mailing Address 21 Tremont | | Amount of Each Disbursement this Period 1357.36 | |
| City Concord State NH Zip Code 03301 | Purpose of Disbursement Payroll Expenses Candidate Name | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

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| SUBTOTAL of Disbursements This Page (optional) ▶ | 3993.48 |
| TOTAL This Period (last page this line number only) ▶ | [Empty Box] |

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 26 / 66

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 Democratic Party

| | | | |
|--|--|---|--|
| Full Name (Last, First, Middle Initial) A. Delana Jones | | Transaction ID: D202766 Date of Disbursement 08 / 27 / 2007 | |
| Mailing Address 21 Tremont | | Amount of Each Disbursement this Period 1357.38 | |
| City Concord State NH Zip Code 03301 | Purpose of Disbursement Payroll Expenses Candidate Name | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | | |
|--|--|---|--|
| Full Name (Last, First, Middle Initial) B. Keystone Press, Inc | | Transaction ID: D202870 Date of Disbursement 08 / 30 / 2007 | |
| Mailing Address 9 Old Falls Rd | | Amount of Each Disbursement this Period 374.00 | |
| City Manchester State NH Zip Code 03103-3622 | Purpose of Disbursement Printing: Business Cards Candidate Name | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | | |
|--|--|---|--|
| Full Name (Last, First, Middle Initial) C. One Communications | | Transaction ID: D202871 Date of Disbursement 08 / 09 / 2007 | |
| Mailing Address PO Box 1927 | | Amount of Each Disbursement this Period 291.30 | |
| City Albany State NY Zip Code 12201 | Purpose of Disbursement Telephone Candidate Name | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

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| SUBTOTAL of Disbursements This Page (optional) ▶ | 2022.68 |
| TOTAL This Period (last page this line number only) ▶ | [Empty Box] |

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 Democratic Party

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Patriot Investment Company | | Transaction ID: D202869 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 7 / 2 0 0 7 |
| Mailing Address 4 Park St. Suite 212 | | Amount of Each Disbursement this Period 1738.33 |
| City Concord State NH Zip Code 03301 | Purpose of Disbursement Rent | |
| Candidate Name | | Category/ Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Mr. Blake Roter | | Transaction ID: D202769 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 7 |
| Mailing Address 1200 Elm St., #818 | | Amount of Each Disbursement this Period 1001.62 |
| City Manchester State NH Zip Code 03101 | Purpose of Disbursement Payroll Expenses | |
| Candidate Name | | Category/ Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. Mr. Blake Roter | | Transaction ID: D202770 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 7 / 2 0 0 7 |
| Mailing Address 1200 Elm St., #818 | | Amount of Each Disbursement this Period 1001.62 |
| City Manchester State NH Zip Code 03101 | Purpose of Disbursement Payroll Expenses | |
| Candidate Name | | Category/ Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

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| SUBTOTAL of Disbursements This Page (optional) ▶ | 3741.57 |
| 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 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 Democratic Party

| | | | |
|--|--|--|--|
| Full Name (Last, First, Middle Initial) A. Mr. Blake Roter | | Transaction ID: D202771 Date of Disbursement 08 / 27 / 2007 | |
| Mailing Address 1200 Elm St., #818 | | Amount of Each Disbursement this Period 1001.61 | |
| City Manchester State NH Zip Code 03101 | Purpose of Disbursement Payroll Expenses Candidate Name | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | | |
|--|--|--|--|
| Full Name (Last, First, Middle Initial) B. Staples | | Transaction ID: D202865 Date of Disbursement 08 / 21 / 2007 | |
| Mailing Address 76 Fort Eddy Rd | | Amount of Each Disbursement this Period 1228.24 | |
| City Concord State NH Zip Code 03301-7404 | Purpose of Disbursement Office Supplies Candidate Name | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | | |
|--|--|--|--|
| Full Name (Last, First, Middle Initial) C. State Of N.H | | Transaction ID: D202737 Date of Disbursement 08 / 16 / 2007 | |
| Mailing Address Secretary Of State 107 N. State St | | Amount of Each Disbursement this Period 440.50 | |
| City Concord State NH Zip Code 03301 | Purpose of Disbursement Voter List Candidate Name | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

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| SUBTOTAL of Disbursements This Page (optional) ▶ | 2670.35 |
| 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 29 / 66

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 Democratic Party

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Telephone Network Technologies | | Transaction ID: D202867 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 1 / 2 0 0 7 |
| Mailing Address 117 Londonderry Tpke | | Amount of Each Disbursement this Period 225.00 |
| City Hooksett State NH Zip Code 03106-2015 | Purpose of Disbursement Telephone Networking & Wiring Candidate Name | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/ Type |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Telephone Network Technologies | | Transaction ID: D202872 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 9 / 2 0 0 7 |
| Mailing Address 117 Londonderry Tpke | | Amount of Each Disbursement this Period 2075.00 |
| City Hooksett State NH Zip Code 03106-2015 | Purpose of Disbursement Telephone Networking & Wiring Candidate Name | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/ Type |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Kari Thurman | | Transaction ID: D202790 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 7 |
| Mailing Address 2031 Country Club Drive | | Amount of Each Disbursement this Period 961.58 |
| City Manchester State NH Zip Code 03102 | Purpose of Disbursement Payroll Expenses Candidate Name | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/ Type |

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| SUBTOTAL of Disbursements This Page (optional) ▶ | 3261.58 |
| TOTAL This Period (last page this line number only) ▶ | [Empty Box] |

**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 Democratic Party

| | | | |
|--|---|--|--|
| Full Name (Last, First, Middle Initial) A. Kari Thurman | | Transaction ID: D202791 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 7 / 2 0 0 7 | |
| Mailing Address 2031 Country Club Drive | | Amount of Each Disbursement this Period 961.58 | |
| City Manchester State NH Zip Code 03102 | Purpose of Disbursement Payroll Expenses Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | | |
|--|---|--|--|
| Full Name (Last, First, Middle Initial) B. Kari Thurman | | Transaction ID: D202792 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 7 / 2 0 0 7 | |
| Mailing Address 2031 Country Club Drive | | Amount of Each Disbursement this Period 961.57 | |
| City Manchester State NH Zip Code 03102 | Purpose of Disbursement Payroll Expenses Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | | |
|--|--|--|--|
| Full Name (Last, First, Middle Initial) C. UJIMA Collective | | Transaction ID: D202882 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 1 / 2 0 0 7 | |
| Mailing Address 1217 Elm St. #205 | | Amount of Each Disbursement this Period 50.00 | |
| City Manchester State NH Zip Code 03101 | Purpose of Disbursement Table at Festival Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

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| SUBTOTAL of Disbursements This Page (optional) ▶ | 1973.15 |
| TOTAL This Period (last page this line number only) ▶ | (Empty box) |

**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 31 / 66

| | | | | | | | | | | | |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|-----|
| <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 Democratic Party

| | | | | | | | | | | | | | | | | | | | | | | | |
|--|---|---|---|--------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| Full Name (Last, First, Middle Initial) A. Unutil | | Transaction ID: D202866 | | | | | | | | | | | | | | | | | | | | | |
| Mailing Address PO Box 2013 | | Date of Disbursement | | | | | | | | | | | | | | | | | | | | | |
| City Concord State NH Zip Code 03302 | | <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>8</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> | | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 8 | | 2 | 1 | | 2 | 0 | 0 | 7 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | | |
| 0 | 8 | | 2 | 1 | | 2 | 0 | 0 | 7 | | | | | | | | | | | | | | |
| Purpose of Disbursement Electricity | | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | | |
| Candidate Name | | <table border="1"> <tr> <td colspan="10">205.64</td> </tr> </table> | | 205.64 | | | | | | | | | | | | | | | | | | | |
| 205.64 | | | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | Disbursement For: 2008 | | | | | | | | | | | | | | | | | | | | | |
| State: District: | | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | | |
| Category/Type | | | | | | | | | | | | | | | | | | | | | | | |

| | | |
|--|---|----------|
| SUBTOTAL of Disbursements This Page (optional) | ▶ | 205.64 |
| TOTAL This Period (last page this line number only) | ▶ | 42790.46 |

**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 Democratic Party

| | | | |
|--|-------------|--|--|
| Full Name (Last, First, Middle Initial) A. Citizens Bank | | Transaction ID: D202859 Date of Disbursement MM / DD / YYYY 08 / 03 / 2007 | |
| Mailing Address 1 Capital Plz | | Amount of Each Disbursement this Period 1277.94 | |
| City Concord | State NH | Zip Code 03301-4900 | |
| Purpose of Disbursement Payroll Taxes | | Category/ Type | |
| Candidate Name | | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| State: District: | | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | | |
|--|-------------|--|--|
| Full Name (Last, First, Middle Initial) B. Citizens Bank | | Transaction ID: D202860 Date of Disbursement MM / DD / YYYY 08 / 03 / 2007 | |
| Mailing Address 1 Capital Plz | | Amount of Each Disbursement this Period 11.69 | |
| City Concord | State NH | Zip Code 03301-4900 | |
| Purpose of Disbursement FUTA Taxes | | Category/ Type | |
| Candidate Name | | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| State: District: | | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | | |
|--|-------------|--|--|
| Full Name (Last, First, Middle Initial) C. Citizens Bank | | Transaction ID: D202861 Date of Disbursement MM / DD / YYYY 08 / 17 / 2007 | |
| Mailing Address 1 Capital Plz | | Amount of Each Disbursement this Period 2439.06 | |
| City Concord | State NH | Zip Code 03301-4900 | |
| Purpose of Disbursement Payroll Taxes | | Category/ Type | |
| Candidate Name | | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| State: District: | | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | |
|--|-------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 3728.69 |
| TOTAL This Period (last page this line number only) ▶ | [Empty Box] |

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 33 / 66

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <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 Democratic Party

| | | | |
|--|--|--|--|
| Full Name (Last, First, Middle Initial) A. Citizens Bank | | Transaction ID: D202862 Date of Disbursement 08 / 17 / 2007 | |
| Mailing Address 1 Capital Plz | | Amount of Each Disbursement this Period 8.61 | |
| City Concord State NH Zip Code 03301-4900 | Purpose of Disbursement FUTA Taxes Candidate Name | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | | |
|--|--|--|--|
| Full Name (Last, First, Middle Initial) B. Citizens Bank | | Transaction ID: D202863 Date of Disbursement 08 / 27 / 2007 | |
| Mailing Address 1 Capital Plz | | Amount of Each Disbursement this Period 2879.90 | |
| City Concord State NH Zip Code 03301-4900 | Purpose of Disbursement Payroll Taxes Candidate Name | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | | |
|--|--|--|--|
| Full Name (Last, First, Middle Initial) C. Citizens Bank | | Transaction ID: D202743 Date of Disbursement 08 / 17 / 2007 | |
| Mailing Address 1 Capital Plz | | Amount of Each Disbursement this Period 848.95 | |
| City Concord State NH Zip Code 03301-4900 | Purpose of Disbursement Payroll Taxes Candidate Name | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

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|--|----------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 3737.46 |
| 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)

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <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 Democratic Party

| | | | |
|--|--|---|--|
| Full Name (Last, First, Middle Initial) A. Citizens Bank | | Transaction ID: D202741 Date of Disbursement 08 / 03 / 2007 | |
| Mailing Address 1 Capital Plz | | Amount of Each Disbursement this Period 997.61 | |
| City Concord State NH Zip Code 03301-4900 | Purpose of Disbursement Payroll Taxes Candidate Name | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | | |
|--|--|---|--|
| Full Name (Last, First, Middle Initial) B. Citizens Bank | | Transaction ID: D202747 Date of Disbursement 08 / 31 / 2007 | |
| Mailing Address 1 Capital Plz | | Amount of Each Disbursement this Period 1018.76 | |
| City Concord State NH Zip Code 03301-4900 | Purpose of Disbursement Payroll Taxes Candidate Name | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | | |
|--|--|---|--|
| Full Name (Last, First, Middle Initial) C. Citizens Bank | | Transaction ID: D202745 Date of Disbursement 08 / 17 / 2007 | |
| Mailing Address 1 Capital Plz | | Amount of Each Disbursement this Period 11.62 | |
| City Concord State NH Zip Code 03301-4900 | Purpose of Disbursement FUTA Taxes Candidate Name | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

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|--|-------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 2027.99 |
| TOTAL This Period (last page this line number only) ▶ | (Empty box) |

**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 35 / 66

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <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 Democratic Party

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Delta Dental | | Transaction ID: D202864 Date of Disbursement 08 / 21 / 2007 |
| Mailing Address PO Box 9566 | | Amount of Each Disbursement this Period 207.71 |
| City Manchester | State NH | |
| Zip Code 03108-9566 | | |
| Purpose of Disbursement Dental Insurance | | |
| Candidate Name | | Category/ Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Delta Dental | | Transaction ID: D202823 Date of Disbursement 08 / 21 / 2007 |
| Mailing Address PO Box 9566 | | Amount of Each Disbursement this Period 83.37 |
| City Manchester | State NH | |
| Zip Code 03108-9566 | | |
| Purpose of Disbursement Dental Insurance | | |
| Candidate Name | | Category/ Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Ms. Chelsey Goff | | Transaction ID: D202755 Date of Disbursement 08 / 17 / 2007 |
| Mailing Address 371 Pembroke Street | | Amount of Each Disbursement this Period 922.57 |
| City Pembroke | State NH | |
| Zip Code 03275 | | |
| Purpose of Disbursement Payroll Expenses | | |
| Candidate Name | | Category/ Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 1213.65 |
| 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 36 / 66

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <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 Democratic Party

| | | | |
|---|------------------|--|-------------------|
| Full Name (Last, First, Middle Initial) A. Ms. Chelsey Goff | | Transaction ID: D202756 Date of Disbursement 08 / 03 / 2007 | |
| Mailing Address 371 Pembroke Street | | Amount of Each Disbursement this Period 922.58 | |
| City Pembroke | State NH | Zip Code 03275 | Category/ Type |
| Purpose of Disbursement Payroll Expenses | | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | State: District: | | |

| | | | |
|---|------------------|--|-------------------|
| Full Name (Last, First, Middle Initial) B. Ms. Chelsey Goff | | Transaction ID: D202757 Date of Disbursement 08 / 27 / 2007 | |
| Mailing Address 371 Pembroke Street | | Amount of Each Disbursement this Period 922.58 | |
| City Pembroke | State NH | Zip Code 03275 | Category/ Type |
| Purpose of Disbursement Payroll Expenses | | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | State: District: | | |

| | | | |
|---|------------------|--|-------------------|
| Full Name (Last, First, Middle Initial) C. Courtney Hubbard | | Transaction ID: D202873 Date of Disbursement 08 / 17 / 2007 | |
| Mailing Address 1200 Elm St. #622 | | Amount of Each Disbursement this Period 961.58 | |
| City Manchester | State NH | Zip Code 03101 | Category/ Type |
| Purpose of Disbursement Payroll Expenses | | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | State: District: | | |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 2806.74 |
| 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 37 / 66

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <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 Democratic Party

| | | | |
|---|------------------|--|-------------------|
| Full Name (Last, First, Middle Initial) A. Courtney Hubbard | | Transaction ID: D202874 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 7 | |
| Mailing Address 1200 Elm St. #622 | | Amount of Each Disbursement this Period 961.58 | |
| City Manchester | State NH | Zip Code 03101 | Category/ Type |
| Purpose of Disbursement Payroll Expenses | | | |
| Candidate Name | | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | State: District: | | |

| | | | |
|---|------------------|--|-------------------|
| Full Name (Last, First, Middle Initial) B. Russell Kornblith | | Transaction ID: D202877 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 7 / 2 0 0 7 | |
| Mailing Address 1200 Elm St. #818 | | Amount of Each Disbursement this Period 922.58 | |
| City Manchester | State NH | Zip Code 03101 | Category/ Type |
| Purpose of Disbursement Payroll Expenses | | | |
| Candidate Name | | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | State: District: | | |

| | | | |
|---|------------------|--|-------------------|
| Full Name (Last, First, Middle Initial) C. Russell Kornblith | | Transaction ID: D202878 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 7 | |
| Mailing Address 1200 Elm St. #818 | | Amount of Each Disbursement this Period 922.58 | |
| City Manchester | State NH | Zip Code 03101 | Category/ Type |
| Purpose of Disbursement Payroll Expenses | | | |
| Candidate Name | | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | State: District: | | |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 2806.74 |
| 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)

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <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 Democratic Party

| | | | |
|--|--|--|--|
| Full Name (Last, First, Middle Initial) A. Ms. Jennifer L. Kuzma | | Transaction ID: D202732 Date of Disbursement 08 / 03 / 2007 | |
| Mailing Address 166 South St. | | Amount of Each Disbursement this Period 1893.79 | |
| City Concord State NH Zip Code 03301 | Purpose of Disbursement Payroll Expenses Candidate Name | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | | |
|--|--|--|--|
| Full Name (Last, First, Middle Initial) B. Ms. Jennifer L. Kuzma | | Transaction ID: D202734 Date of Disbursement 08 / 17 / 2007 | |
| Mailing Address 166 South St. | | Amount of Each Disbursement this Period 1893.79 | |
| City Concord State NH Zip Code 03301 | Purpose of Disbursement Payroll Expenses Candidate Name | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | | |
|--|--|--|--|
| Full Name (Last, First, Middle Initial) C. Ms. Jennifer L. Kuzma | | Transaction ID: D202736 Date of Disbursement 08 / 27 / 2007 | |
| Mailing Address 166 South St. | | Amount of Each Disbursement this Period 1893.78 | |
| City Concord State NH Zip Code 03301 | Purpose of Disbursement Payroll Expenses Candidate Name | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

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|--|----------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 5681.36 |
| 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)

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <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 Democratic Party

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Mr. John F Nelson | | Transaction ID: D202875 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 7 / 2 0 0 7 |
| Mailing Address 100 N. Bedford St. #4 | | Amount of Each Disbursement this Period 961.58 |
| City Manchester State NH Zip Code 03101 | Purpose of Disbursement Payroll Expenses Candidate Name | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/ Type |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Mr. John F Nelson | | Transaction ID: D202876 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 7 |
| Mailing Address 100 N. Bedford St. #4 | | Amount of Each Disbursement this Period 961.58 |
| City Manchester State NH Zip Code 03101 | Purpose of Disbursement Payroll Expenses Candidate Name | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/ Type |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Colin O'Dea | | Transaction ID: D202856 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 7 |
| Mailing Address 335 Cypress St. | | Amount of Each Disbursement this Period 2696.84 |
| City Manchester State NH Zip Code 03103 | Purpose of Disbursement Payroll Expenses Candidate Name | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/ Type |

| | |
|--|----------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 4620.00 |
| TOTAL This Period (last page this line number only) ▶ | (Empty box) |

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 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 |

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 Democratic Party

| | | | |
|---|------------------|--|-------------------|
| Full Name (Last, First, Middle Initial) A. Colin O'Dea | | Transaction ID: D202857 Date of Disbursement 08 / 17 / 2007 | |
| Mailing Address 335 Cypress St. | | Amount of Each Disbursement this Period 2696.86 | |
| City Manchester | State NH | Zip Code 03103 | Category/ Type |
| Purpose of Disbursement Payroll Expenses | | | |
| Candidate Name | | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | State: District: | | |

| | | | |
|---|------------------|--|-------------------|
| Full Name (Last, First, Middle Initial) B. Colin O'Dea | | Transaction ID: D202858 Date of Disbursement 08 / 31 / 2007 | |
| Mailing Address 335 Cypress St. | | Amount of Each Disbursement this Period 2696.85 | |
| City Manchester | State NH | Zip Code 03103 | Category/ Type |
| Purpose of Disbursement Payroll Expenses | | | |
| Candidate Name | | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | State: District: | | |

| | | | |
|---|------------------|--|-------------------|
| Full Name (Last, First, Middle Initial) C. Adam Robbins | | Transaction ID: D202881 Date of Disbursement 08 / 31 / 2007 | |
| Mailing Address 1200 Elm St. #622 | | Amount of Each Disbursement this Period 1422.37 | |
| City Manchester | State NH | Zip Code 03101 | Category/ Type |
| Purpose of Disbursement Payroll Expenses | | | |
| Candidate Name | | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | State: District: | | |

| | |
|--|----------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 6816.08 |
| TOTAL This Period (last page this line number only) ▶ | [Empty Box] |

**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 41 / 66

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <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 |

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 Democratic Party

| | | | |
|---|--|--|---|
| Full Name (Last, First, Middle Initial) A. Joshua Zaretsky | | Transaction ID: D202879 | |
| Mailing Address 112 English Village Rd #303 | | Date of Disbursement 08 / 17 / 2007 | |
| City Manchester | State NH | Zip Code 03102 | Amount of Each Disbursement this Period 961.58 |
| Purpose of Disbursement Payroll Expenses | | Category/ Type | |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: District: | | | |

| | | | |
|---|--|--|---|
| Full Name (Last, First, Middle Initial) B. Joshua Zaretsky | | Transaction ID: D202880 | |
| Mailing Address 112 English Village Rd #303 | | Date of Disbursement 08 / 31 / 2007 | |
| City Manchester | State NH | Zip Code 03102 | Amount of Each Disbursement this Period 961.58 |
| Purpose of Disbursement Payroll Expenses | | Category/ Type | |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: District: | | | |

| | |
|--|-----------------|
| SUBTOTAL of Disbursements This Page (optional) | 1923.16 |
| TOTAL This Period (last page this line number only) | 35361.87 |

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
New Hampshire Democratic Party

| | |
|--|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor 1848 Associates | Nature of Debt (Purpose): WMUR debate |
| Mailing Address 340 Commercial St | |
| City State ZIP Code Manchester NH 03101-1121 | |

| | | |
|--|--|--|
| Outstanding Balance Beginning This Period <input type="text" value="100.00"/> | Transaction ID: D1547 | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="100.00"/> |

| | |
|--|---|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Ariel Press | Nature of Debt (Purpose): sample ballot printing |
| Mailing Address 26 Roxbury St | |
| City State ZIP Code Keene NH 03431-3265 | |

| | | |
|---|--|---|
| Outstanding Balance Beginning This Period <input type="text" value="1276.41"/> | Transaction ID: D1548 | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="1276.41"/> |

| | |
|--|---|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Ariel Press | Nature of Debt (Purpose): sample ballot printing |
| Mailing Address 26 Roxbury St | |
| City State ZIP Code Keene NH 03431-3265 | |

| | | |
|---|--|---|
| Outstanding Balance Beginning This Period <input type="text" value="1276.41"/> | Transaction ID: D749 | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="1276.41"/> |

| | |
|--|--------------------------------------|
| 1) SUBTOTALS This Period This Page (optional)..... | <input type="text" value="2652.82"/> |
| 2) TOTALS This Period (last page this line number only)..... | <input type="text"/> |
| 3) TOTALS OUTSTANDING LOANS from Schedule C (last page only)..... | <input type="text"/> |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | <input type="text"/> |

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
New Hampshire Democratic Party

| | |
|--|--------------------------------------|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Bannon Research | Nature of Debt (Purpose): polling |
| Mailing Address 545 Boylston St | |
| City State ZIP Code Boston MA 02116-3621 | |

| | | |
|--|------------------------------|--|
| Outstanding Balance Beginning This Period 2000.00 | Transaction ID: D1550 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 2000.00 |

| | |
|---|---|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Below Tobe | Nature of Debt (Purpose): voter list |
| Mailing Address 801 Fairfax St | |
| City State ZIP Code Alexandria VA 22314 | |

| | | |
|--|-----------------------------|--|
| Outstanding Balance Beginning This Period 3500.00 | Transaction ID: D751 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 3500.00 |

| | |
|---|---|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Below Tobe | Nature of Debt (Purpose): voter list |
| Mailing Address 801 Fairfax St | |
| City State ZIP Code Alexandria VA 22314 | |

| | | |
|--|------------------------------|--|
| Outstanding Balance Beginning This Period 3500.00 | Transaction ID: D1551 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 3500.00 |

| | | |
|--|---|---------|
| 1) SUBTOTALS This Period This Page (optional)..... | ▶ | 9000.00 |
| 2) TOTALS This Period (last page this line number only)..... | ▶ | |
| 3) TOTALS OUTSTANDING LOANS from Schedule C (last page only)..... | ▶ | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | ▶ | |

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
New Hampshire Democratic Party

| | |
|--|-----------------------------------|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Bronco Realty | Nature of Debt (Purpose): rent |
| Mailing Address 922 Elm St | |
| City State ZIP Code Manchester NH 03101-2017 | |

| | | |
|---|-----------------------------|---|
| Outstanding Balance Beginning This Period 990.00 | Transaction ID: D752 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 990.00 |

| | |
|--|---|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Bronco Realty | Nature of Debt (Purpose): admin/rent |
| Mailing Address 922 Elm St | |
| City State ZIP Code Manchester NH 03101-2017 | |

| | | |
|---|------------------------------|---|
| Outstanding Balance Beginning This Period 990.00 | Transaction ID: D1552 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 990.00 |

| | |
|--|---|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Federal Express | Nature of Debt (Purpose): admin/mail |
| Mailing Address PO Box 1140 | |
| City State ZIP Code Memphis TN 38101-1140 | |

| | | |
|---|------------------------------|---|
| Outstanding Balance Beginning This Period 148.75 | Transaction ID: D1554 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 148.75 |

| | | |
|--|---|---------|
| 1) SUBTOTALS This Period This Page (optional)..... | ▶ | 2128.75 |
| 2) TOTALS This Period (last page this line number only)..... | ▶ | |
| 3) TOTALS OUTSTANDING LOANS from Schedule C (last page only)..... | ▶ | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | ▶ | |

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
New Hampshire Democratic Party

| | |
|--|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor John Durkin | Nature of Debt (Purpose): admin/equipment |
| Mailing Address 40 Longwood Dr | |
| City State ZIP Code Keene NH 03431-4505 | |

| | | |
|--|------------------------------|--|
| Outstanding Balance Beginning This Period 1000.00 | Transaction ID: D1553 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 1000.00 |

| | |
|--|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Morrill & Everett | Nature of Debt (Purpose): insurance |
| Mailing Address 2 Capital Plz | |
| City State ZIP Code Concord NH 03301-4911 | |

| | | |
|--|-----------------------------|--|
| Outstanding Balance Beginning This Period 1000.00 | Transaction ID: D756 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 1000.00 |

| | |
|--|--|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Morrill & Everett | Nature of Debt (Purpose): admin/insurance |
| Mailing Address 2 Capital Plz | |
| City State ZIP Code Concord NH 03301-4911 | |

| | | |
|--|------------------------------|--|
| Outstanding Balance Beginning This Period 1000.00 | Transaction ID: D1557 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 1000.00 |

| | |
|--|----------------|
| 1) SUBTOTALS This Period This Page (optional)..... | 3000.00 |
| 2) TOTALS This Period (last page this line number only)..... | |
| 3) TOTALS OUTSTANDING LOANS from Schedule C (last page only)..... | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | |

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

| | |
|---|---|
| (Use separate schedule(s) for each numbered line) | PAGE 46 / 66 |
| | FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10 |

NAME OF COMMITTEE (In Full)
New Hampshire Democratic Party

| | |
|---|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor National Health Policy Institute | Nature of Debt (Purpose): health care forum reimbursement |
| Mailing Address 1601 Nw 114th St Ste 130 | |
| City State ZIP Code Des Moines IA 50325-7035 | |

| | | |
|---|--|---|
| Outstanding Balance Beginning This Period <input type="text" value="1700.00"/> | Transaction ID: D755 | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="1700.00"/> |

| | |
|---|---|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor National Health Policy Institute | Nature of Debt (Purpose): Health Care Form Reimburse |
| Mailing Address 1601 Nw 114th St Ste 130 | |
| City State ZIP Code Des Moines IA 50325-7035 | |

| | | |
|---|--|---|
| Outstanding Balance Beginning This Period <input type="text" value="1700.00"/> | Transaction ID: D1556 | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="1700.00"/> |

| | |
|--|---|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nh Mailing Services | Nature of Debt (Purpose): 100 Club Mailing |
| Mailing Address 7 Perimeter Rd | |
| City State ZIP Code Manchester NH 03103-3343 | |

| | | |
|--|--|--|
| Outstanding Balance Beginning This Period <input type="text" value="156.58"/> | Transaction ID: D754 | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="156.58"/> |

| | |
|--|--------------------------------------|
| 1) SUBTOTALS This Period This Page (optional)..... | <input type="text" value="3556.58"/> |
| 2) TOTALS This Period (last page this line number only)..... | <input type="text"/> |
| 3) TOTALS OUTSTANDING LOANS from Schedule C (last page only)..... | <input type="text"/> |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | <input type="text"/> |

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
New Hampshire Democratic Party

| | |
|--|---|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nh Mailing Services | Nature of Debt (Purpose): 100C Mailing |
| Mailing Address 7 Perimeter Rd | |
| City State ZIP Code Manchester NH 03103-3343 | |

| | | |
|--|--|--|
| Outstanding Balance Beginning This Period <input type="text" value="156.58"/> | Transaction ID: D1555 | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="156.58"/> |

| | |
|---|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Russell Verney | Nature of Debt (Purpose): admin/reimbursement |
| Mailing Address 4 Nutt St | |
| City State ZIP Code Nashua NH 03060-5110 | |

| | | |
|---|--|---|
| Outstanding Balance Beginning This Period <input type="text" value="2029.51"/> | Transaction ID: D1560 | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="2029.51"/> |

| | |
|---|--|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Russell Verney | Nature of Debt (Purpose): reimbursement |
| Mailing Address 4 Nutt St | |
| City State ZIP Code Nashua NH 03060-5110 | |

| | | |
|---|--|---|
| Outstanding Balance Beginning This Period <input type="text" value="2029.51"/> | Transaction ID: D759 | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="2029.51"/> |

| | |
|--|--------------------------------------|
| 1) SUBTOTALS This Period This Page (optional)..... | <input type="text" value="4215.60"/> |
| 2) TOTALS This Period (last page this line number only)..... | <input type="text"/> |
| 3) TOTALS OUTSTANDING LOANS from Schedule C (last page only)..... | <input type="text"/> |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | <input type="text"/> |

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
New Hampshire Democratic Party

| | |
|--|---|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Christos Spirou | Nature of Debt (Purpose): admin/travel |
| Mailing Address 259 Whitford St | |
| City State ZIP Code Manchester NH 03104-2166 | |

| | | |
|--|--|--|
| Outstanding Balance Beginning This Period <input type="text" value="676.55"/> | Transaction ID: D1558 | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="676.55"/> |

| | |
|--|-------------------------------------|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Christos Spirou | Nature of Debt (Purpose): travel |
| Mailing Address 259 Whitford St | |
| City State ZIP Code Manchester NH 03104-2166 | |

| | | |
|--|--|--|
| Outstanding Balance Beginning This Period <input type="text" value="676.55"/> | Transaction ID: D757 | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="676.55"/> |

| | |
|--|--|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Star Graphics | Nature of Debt (Purpose): Health Care Forum Invite Design |
| Mailing Address PO Box 1475 | |
| City State ZIP Code Concord NH 03302-1475 | |

| | | |
|--|--|--|
| Outstanding Balance Beginning This Period <input type="text" value="119.00"/> | Transaction ID: D1559 | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="119.00"/> |

| | |
|--|--------------------------------------|
| 1) SUBTOTALS This Period This Page (optional)..... | <input type="text" value="1472.10"/> |
| 2) TOTALS This Period (last page this line number only)..... | <input type="text"/> |
| 3) TOTALS OUTSTANDING LOANS from Schedule C (last page only)..... | <input type="text"/> |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | <input type="text"/> |

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
New Hampshire Democratic Party

| | |
|--|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Star Graphics | Nature of Debt (Purpose): health care forum invite design |
| Mailing Address PO Box 1475 | |
| City State ZIP Code Concord NH 03302-1475 | |

| | | |
|--|--|--|
| Outstanding Balance Beginning This Period <input type="text" value="119.00"/> | Transaction ID: D758 | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="119.00"/> |

| | |
|--|---|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor WNNE-TV | Nature of Debt (Purpose): debate media hook-up |
| Mailing Address PO Box 1310 | |
| City State ZIP Code White Riv Jct VT 05001-1310 | |

| | | |
|---|--|---|
| Outstanding Balance Beginning This Period <input type="text" value="1665.00"/> | Transaction ID: D760 | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="1665.00"/> |

| | |
|--|---|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor WNNE-TV | Nature of Debt (Purpose): debate media hook-up |
| Mailing Address PO Box 1310 | |
| City State ZIP Code White Riv Jct VT 05001-1310 | |

| | | |
|---|--|---|
| Outstanding Balance Beginning This Period <input type="text" value="1665.00"/> | Transaction ID: D1561 | |
| Amount Incurred This Period <input type="text" value="0.00"/> | Payment This Period <input type="text" value="0.00"/> | Outstanding Balance at Close of This Period <input type="text" value="1665.00"/> |

| | |
|--|--------------------------------------|
| 1) SUBTOTALS This Period This Page (optional)..... | <input type="text" value="3449.00"/> |
| 2) TOTALS This Period (last page this line number only)..... | <input type="text"/> |
| 3) TOTALS OUTSTANDING LOANS from Schedule C (last page only)..... | <input type="text"/> |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | <input type="text"/> |

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
New Hampshire Democratic Party

| | |
|--|---|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Xerox Corporation | Nature of Debt (Purpose): admin - copier service |
| Mailing Address 191 Spring St | |
| City State ZIP Code Lexington MA 02421-8045 | |

| | | |
|--|------------------------------|--|
| Outstanding Balance Beginning This Period 91.50 | Transaction ID: D1562 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 91.50 |

| | |
|--|------------------------------------|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Xerox Corporation | Nature of Debt (Purpose): admin |
| Mailing Address 191 Spring St | |
| City State ZIP Code Lexington MA 02421-8045 | |

| | | |
|--|-----------------------------|--|
| Outstanding Balance Beginning This Period 91.50 | Transaction ID: D761 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 91.50 |

| | |
|--|-----------------|
| 1) SUBTOTALS This Period This Page (optional)..... | 183.00 |
| 2) TOTALS This Period (last page this line number only)..... | 29657.85 |
| 3) TOTALS OUTSTANDING LOANS from Schedule C (last page only)..... | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | |

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)

New Hampshire Democratic Party

NAME OF ACCOUNT
 NH Dem State Commi-
 ttee Non-Fed Acct

DATE OF RECEIPT

M M / D D / Y Y Y Y
 0 8 / 3 0 / 2 0 0 7

TOTAL AMOUNT TRANSFERRED

12000.00

BREAKDOWN OF TRANSFER RECEIVED

i) **Total Administrative**

12000.00

Transaction ID: T1408

ii) **Generic Voter Drive**

Transaction ID:

iii) **Exempt Activities**

Transaction ID:

iv) **Direct Fundraising** (List Activity or Event Identifier)

a) _____

Transaction ID:

b) _____

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) **Direct Candidate Support** (List of Activity or Event Identifier)

a) _____

Transaction ID:

b) _____

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) **Public Communications Referring Only to Party** (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

12000.00

TOTAL This Period (Generic Voter Drive)

0.00

TOTAL This Period (Exempt Activities)

0.00

TOTAL This Period (Direct Fundraising)

0.00

TOTAL This Period (Direct Candidate Support)

0.00

TOTAL This Period (Public Communications Referring Only to Party)

0.00

TOTAL This Period (Total Amount Transferred)

12000.00

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
New Hampshire Democratic Party

| | | | | | |
|---|-------------|------------------------|---|--|--|
| A. Full Name (Last, First, Middle Initial) BCN Telecom, Inc | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address PO Box 52245 | | | Allocated Activity or Event Year-To-Date 150278.59 | | |
| City Newark | State NJ | Zip Code 07101-0220 | Date <input type="text" value="08"/> / <input type="text" value="09"/> / <input type="text" value="2007"/> | | |
| Purpose of Disbursement: Telephone | | | Transaction ID: D202815H4 | | |
| Activity or Event Identifier: Administrative | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 398.28 | | 708.04 | | 1106.32 |

| | | | | | |
|---|-------------|-------------------|---|--|--|
| B. Full Name (Last, First, Middle Initial) Boston Logan Airport | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address Massport Parking Facilities 1 Harborside Drive, Suite 200S | | | Allocated Activity or Event Year-To-Date 150278.59 | | |
| City East Boston | State MA | Zip Code 02128 | Date <input type="text" value="08"/> / <input type="text" value="25"/> / <input type="text" value="2007"/> | | |
| Purpose of Disbursement: Parking | | | Transaction ID: D202842H4 | | |
| Activity or Event Identifier: Administrative [MEMO ITEM] | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 19.44 | | 34.56 | | 54.00 |

| | | | | | |
|---|-------------|-------------------|---|--|--|
| C. Full Name (Last, First, Middle Initial) Carbonite Inc. | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address 780 Boylston St. | | | Allocated Activity or Event Year-To-Date 150278.59 | | |
| City Boston | State MA | Zip Code 02199 | Date <input type="text" value="08"/> / <input type="text" value="02"/> / <input type="text" value="2007"/> | | |
| Purpose of Disbursement: Computer Server Backup | | | Transaction ID: D202761H4 | | |
| Activity or Event Identifier: Administrative [MEMO ITEM] | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 17.98 | | 31.97 | | 49.95 |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 398.28 | | 708.04 | | 1106.32 |

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

| | | | | |
|---------------|--|------------------|--|--------------|
| FEDERAL SHARE | | NONFEDERAL SHARE | | TOTAL AMOUNT |
| | | | | |

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
New Hampshire Democratic Party

| | | | | | |
|--|-------------|------------------------|---|--|--|
| A. Full Name (Last, First, Middle Initial) Comcast | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address PO Box 196 | | | Allocated Activity or Event Year-To-Date 150278.59 | | |
| City Newark | State NJ | Zip Code 07101-0196 | Date <input type="text" value="08"/> / <input type="text" value="21"/> / <input type="text" value="2007"/> | | |
| Purpose of Disbursement: Cable TV | | | Transaction ID: D202824H4 | | |
| Activity or Event Identifier: Administrative | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 26.72 | | 47.50 | | 74.22 |

| | | | | | |
|--|-------------|-------------------|---|--|--|
| B. Full Name (Last, First, Middle Initial) Crowne Plaza Washington | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address 1375 K St. NW | | | Allocated Activity or Event Year-To-Date 150278.59 | | |
| City Washington | State DC | Zip Code 20005 | Date <input type="text" value="08"/> / <input type="text" value="25"/> / <input type="text" value="2007"/> | | |
| Purpose of Disbursement: Hotel Rooms | | | Transaction ID: D202844H4 | | |
| Activity or Event Identifier: Administrative [MEMO ITEM] | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 147.16 | | 261.62 | | 408.78 |

| | | | | | |
|--|-------------|------------------------|---|--|--|
| C. Full Name (Last, First, Middle Initial) Dana Howitt | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address 6511 10th St C-1 | | | Allocated Activity or Event Year-To-Date 150278.59 | | |
| City Alexandria | State VA | Zip Code 22307-6507 | Date <input type="text" value="08"/> / <input type="text" value="01"/> / <input type="text" value="2007"/> | | |
| Purpose of Disbursement: Consulting: Compliance | | | Transaction ID: D202728H4 | | |
| Activity or Event Identifier: Administrative | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 36.00 | | 64.00 | | 100.00 |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 62.72 | | 111.50 | | 174.22 |

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

| | | | | |
|---------------|--|------------------|--|--------------|
| FEDERAL SHARE | | NONFEDERAL SHARE | | TOTAL AMOUNT |
| | | | | |

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
New Hampshire Democratic Party

| | | | | | |
|--|-------------|------------------------|---|--|--|
| A. Full Name (Last, First, Middle Initial) Dana Howitt | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address 6511 10th St C-1 | | | Allocated Activity or Event Year-To-Date 150278.59 | | |
| City Alexandria | State VA | Zip Code 22307-6507 | Date M M / D D / Y Y Y Y 08 / 27 / 2007 | | |
| Purpose of Disbursement: Consulting: Compliance | | | Transaction ID: D202730H4 | | |
| Activity or Event Identifier: Administrative | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 36.00 | | 64.00 | | 100.00 |

| | | | | | |
|--|-------------|-------------------|---|--|--|
| B. Full Name (Last, First, Middle Initial) David Lee | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address 22 Paul Ave | | | Allocated Activity or Event Year-To-Date 150278.59 | | |
| City Derry | State NH | Zip Code 03038 | Date M M / D D / Y Y Y Y 08 / 01 / 2007 | | |
| Purpose of Disbursement: Consulting: Accounting | | | Transaction ID: D202726H4 | | |
| Activity or Event Identifier: Administrative | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 180.00 | | 320.00 | | 500.00 |

| | | | | | |
|--|-------------|-------------------|---|--|--|
| C. Full Name (Last, First, Middle Initial) David Lee | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address 22 Paul Ave | | | Allocated Activity or Event Year-To-Date 150278.59 | | |
| City Derry | State NH | Zip Code 03038 | Date M M / D D / Y Y Y Y 08 / 27 / 2007 | | |
| Purpose of Disbursement: Consulting: Accounting | | | Transaction ID: D202727H4 | | |
| Activity or Event Identifier: Administrative | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 180.00 | | 320.00 | | 500.00 |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 396.00 | | 704.00 | | 1100.00 |

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

| | | | | |
|---------------|--|------------------|--|--------------|
| FEDERAL SHARE | | NONFEDERAL SHARE | | TOTAL AMOUNT |
| | | | | |

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
New Hampshire Democratic Party

| | | | | | |
|---|-------------|------------------------|---|--|--|
| A. Full Name (Last, First, Middle Initial) De Lage Landen | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address PO Box 41601 | | | Allocated Activity or Event Year-To-Date 150278.59 | | |
| City Philadelphia | State PA | Zip Code 19101-1601 | Date <input type="text" value="08"/> / <input type="text" value="09"/> / <input type="text" value="2007"/> | | |
| Purpose of Disbursement: Photocopier Rental | | | Transaction ID: D202814H4 | | |
| Activity or Event Identifier: Administrative | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 177.84 | | 316.16 | | 494.00 |

| | | | | | |
|---|-------------|-------------------|---|--|--|
| B. Full Name (Last, First, Middle Initial) Esther Dickinson | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address 6 Buckingham Drive | | | Allocated Activity or Event Year-To-Date 150278.59 | | |
| City Bow | State NH | Zip Code 03304 | Date <input type="text" value="08"/> / <input type="text" value="09"/> / <input type="text" value="2007"/> | | |
| Purpose of Disbursement: Reimbursement: Travel | | | Transaction ID: D202818H4 | | |
| Activity or Event Identifier: Administrative | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 95.80 | | 170.30 | | 266.10 |

| | | | | | |
|---|-------------|-------------------|---|--|--|
| C. Full Name (Last, First, Middle Initial) Esther Dickinson | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address 6 Buckingham Drive | | | Allocated Activity or Event Year-To-Date 150278.59 | | |
| City Bow | State NH | Zip Code 03304 | Date <input type="text" value="08"/> / <input type="text" value="27"/> / <input type="text" value="2007"/> | | |
| Purpose of Disbursement: Reimbursement: Travel | | | Transaction ID: D202838H4 | | |
| Activity or Event Identifier: Administrative | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 12.60 | | 22.40 | | 35.00 |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 286.24 | | 508.86 | | 795.10 |

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

| | | | | |
|---------------|--|------------------|--|--------------|
| FEDERAL SHARE | | NONFEDERAL SHARE | | TOTAL AMOUNT |
| | | | | |

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
New Hampshire Democratic Party

A. Full Name (Last, First, Middle Initial)
Hilton Seattle

Mailing Address
P.O. Box 1927

City State Zip Code
Seattle WA 98111

Purpose of Disbursement:
Hotel Rooms

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

150278.59

Activity or Event Identifier:
Administrative

[MEMO ITEM]

Date 08 / 24 / 2007

Transaction ID: D202840H4

| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
|---------------|---|------------------|---|--------------|
| 297.96 | | 529.72 | | 827.68 |

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

Mailing Address
553 Merrimack St

City State Zip Code
Manchester NH 03103-3427

Purpose of Disbursement:
Reimbursement: Travel

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

150278.59

Activity or Event Identifier:
Administrative

Date 08 / 21 / 2007

Transaction ID: D202834H4

| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
|---------------|---|------------------|---|--------------|
| 101.05 | | 179.65 | | 280.70 |

C. Full Name (Last, First, Middle Initial)
Janvier Holding Co.

Mailing Address
2 1/2 Beacon Street Concord Suite 143

City State Zip Code
Concord NH 03301

Purpose of Disbursement:
Rent

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

150278.59

Activity or Event Identifier:
Administrative

Date 08 / 01 / 2007

Transaction ID: D202750H4

| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
|---------------|---|------------------|---|--------------|
| 937.80 | | 1667.20 | | 2605.00 |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
|---------------|---|------------------|---|--------------|
| 1038.85 | | 1846.85 | | 2885.70 |

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

| FEDERAL SHARE | NONFEDERAL SHARE | TOTAL AMOUNT |
|---------------|------------------|--------------|
| | | |

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
New Hampshire Democratic Party

| | | | | |
|--|-------------|-------------------|--|--|
| A. Full Name (Last, First, Middle Initial) Janvier Holding Co. | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | |
| Mailing Address 2 1/2 Beacon Street Concord Suite 143 | | | Allocated Activity or Event Year-To-Date [150278.59] | |
| City Concord | State NH | Zip Code 03301 | Date M M / D D / Y Y Y Y [08 / 27 / 2007] Transaction ID: D202751H4 | |
| Purpose of Disbursement: Rent | | | | |
| Activity or Event Identifier: Administrative | | | Category/ Type [] | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| [937.80] | | [1667.20] | | [2605.00] |

| | | | | |
|---|-------------|-------------------|--|--|
| B. Full Name (Last, First, Middle Initial) JetBlue Airways | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | |
| Mailing Address 8002 Kew Gardens | | | Allocated Activity or Event Year-To-Date [150278.59] | |
| City Kew Gardens | State NY | Zip Code 11415 | Date M M / D D / Y Y Y Y [08 / 24 / 2007] Transaction ID: D202841H4 | |
| Purpose of Disbursement: Travel | | | | |
| Activity or Event Identifier: Administrative [MEMO ITEM] | | | Category/ Type [] | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| [294.77] | | [524.03] | | [818.80] |

| | | | | |
|---|-------------|-------------------|--|--|
| C. Full Name (Last, First, Middle Initial) Jordan Winch | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | |
| Mailing Address 69 Hall Street | | | Allocated Activity or Event Year-To-Date [150278.59] | |
| City Dunstable | State MA | Zip Code 01827 | Date M M / D D / Y Y Y Y [08 / 01 / 2007] Transaction ID: D202716H4 | |
| Purpose of Disbursement: Consulting: Technology | | | | |
| Activity or Event Identifier: Administrative | | | Category/ Type [] | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| [225.00] | | [400.00] | | [625.00] |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| [1162.80] | | [2067.20] | | [3230.00] |

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

| | | |
|---------------|------------------|--------------|
| FEDERAL SHARE | NONFEDERAL SHARE | TOTAL AMOUNT |
| [] | [] | [] |

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
New Hampshire Democratic Party

| | | | | | | | | | | | | | | | | | | | | | | | | | |
|---|-------|----------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| A. Full Name (Last, First, Middle Initial) Jordan Winch | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 69 Hall Street | | | Allocated Activity or Event Year-To-Date 150278.59 | | | | | | | | | | | | | | | | | | | | | | |
| City | State | Zip Code | Category/ Type | | | | | | | | | | | | | | | | | | | | | | |
| Dunstable | MA | 01827 | | | | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement: Consulting: Technology | | | Date <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>8</td><td>/</td><td>1</td><td>5</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table> | | | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 8 | / | 1 | 5 | / | 2 | 0 | 0 | 7 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | | | | |
| 0 | 8 | / | 1 | 5 | / | 2 | 0 | 0 | 7 | | | | | | | | | | | | | | | | |
| Activity or Event Identifier: Administrative | | | Transaction ID: D202717H4 | | | | | | | | | | | | | | | | | | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 225.00 | | 400.00 | | 625.00 |

| | | | | | | | | | | | | | | | | | | | | | | | | | |
|---|-------|----------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| B. Full Name (Last, First, Middle Initial) Jordan Winch | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 69 Hall Street | | | Allocated Activity or Event Year-To-Date 150278.59 | | | | | | | | | | | | | | | | | | | | | | |
| City | State | Zip Code | Category/ Type | | | | | | | | | | | | | | | | | | | | | | |
| Dunstable | MA | 01827 | | | | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement: Consulting: Technology | | | Date <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>8</td><td>/</td><td>2</td><td>7</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table> | | | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 8 | / | 2 | 7 | / | 2 | 0 | 0 | 7 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | | | | |
| 0 | 8 | / | 2 | 7 | / | 2 | 0 | 0 | 7 | | | | | | | | | | | | | | | | |
| Activity or Event Identifier: Administrative | | | Transaction ID: D202718H4 | | | | | | | | | | | | | | | | | | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 225.00 | | 400.00 | | 625.00 |

| | | | | | | | | | | | | | | | | | | | | | | | | | |
|---|-------|----------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| C. Full Name (Last, First, Middle Initial) Jordan Winch | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 69 Hall Street | | | Allocated Activity or Event Year-To-Date 150278.59 | | | | | | | | | | | | | | | | | | | | | | |
| City | State | Zip Code | Category/ Type | | | | | | | | | | | | | | | | | | | | | | |
| Dunstable | MA | 01827 | | | | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement: Reimbursement: Website Renewal | | | Date <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>8</td><td>/</td><td>2</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table> | | | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 8 | / | 2 | 1 | / | 2 | 0 | 0 | 7 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | | | | |
| 0 | 8 | / | 2 | 1 | / | 2 | 0 | 0 | 7 | | | | | | | | | | | | | | | | |
| Activity or Event Identifier: Administrative | | | Transaction ID: D202833H4 | | | | | | | | | | | | | | | | | | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 5.15 | | 9.15 | | 14.30 |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 455.15 | | 809.15 | | 1264.30 |

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

| | | |
|---------------|------------------|--------------|
| FEDERAL SHARE | NONFEDERAL SHARE | TOTAL AMOUNT |
| | | |

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
New Hampshire Democratic Party

| | | | | | |
|--|-------------|------------------------|---|--|--|
| A. Full Name (Last, First, Middle Initial) Keystone Press, Inc | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address 9 Old Falls Rd | | | Allocated Activity or Event Year-To-Date 150278.59 | | |
| City Manchester | State NH | Zip Code 03103-3622 | Date <input type="text" value="08"/> / <input type="text" value="09"/> / <input type="text" value="2007"/> | | |
| Purpose of Disbursement: Printing: Grassroots Materials | | | Transaction ID: D202821H4 | | |
| Activity or Event Identifier: Administrative | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 600.12 | | 1066.88 | | 1667.00 |

| | | | | | |
|--|-------------|-------------------|---|--|--|
| B. Full Name (Last, First, Middle Initial) Latinos Unidos of New Hampshire | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address PO Box 1202 | | | Allocated Activity or Event Year-To-Date 150278.59 | | |
| City Manchester | State NH | Zip Code 03105 | Date <input type="text" value="08"/> / <input type="text" value="16"/> / <input type="text" value="2007"/> | | |
| Purpose of Disbursement: Vendor Booth | | | Transaction ID: D202738H4 | | |
| Activity or Event Identifier: Administrative | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 63.00 | | 112.00 | | 175.00 |

| | | | | | |
|---|-------------|------------------------|---|--|--|
| C. Full Name (Last, First, Middle Initial) LexisNexis | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address PO Box 7247-7090 | | | Allocated Activity or Event Year-To-Date 150278.59 | | |
| City Philadelphia | State PA | Zip Code 19170-7090 | Date <input type="text" value="08"/> / <input type="text" value="09"/> / <input type="text" value="2007"/> | | |
| Purpose of Disbursement: Research Services | | | Transaction ID: D202816H4 | | |
| Activity or Event Identifier: Administrative | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 71.64 | | 127.36 | | 199.00 |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 734.76 | | 1306.24 | | 2041.00 |

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

| | | | | |
|---------------|--|------------------|--|--------------|
| FEDERAL SHARE | | NONFEDERAL SHARE | | TOTAL AMOUNT |
| | | | | |

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
New Hampshire Democratic Party

| | | | | | |
|---|-------------|-------------------|---|--|--|
| A. Full Name (Last, First, Middle Initial) Marlin Leasing | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address Champion Capital Corp 25 Mall Road, Suite 411 | | | Allocated Activity or Event Year-To-Date 150278.59 | | |
| City Burlington | State MA | Zip Code 01803 | Date <input type="text" value="08"/> / <input type="text" value="21"/> / <input type="text" value="2007"/> | | |
| Purpose of Disbursement: Computer Lease | | | Transaction ID: D202826H4 | | |
| Activity or Event Identifier: Administrative | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 149.19 | | 265.24 | | 414.43 |

| | | | | | |
|--|-------------|-------------------|---|--|--|
| B. Full Name (Last, First, Middle Initial) Mr. Blake Roter | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address 1200 Elm St., #818 | | | Allocated Activity or Event Year-To-Date 150278.59 | | |
| City Manchester | State NH | Zip Code 03101 | Date <input type="text" value="08"/> / <input type="text" value="30"/> / <input type="text" value="2007"/> | | |
| Purpose of Disbursement: Reimbursement: Travel | | | Transaction ID: D202839H4 | | |
| Activity or Event Identifier: Administrative | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 499.64 | | 888.24 | | 1387.88 |

| | | | | | |
|--|-------------|-------------------|---|--|--|
| C. Full Name (Last, First, Middle Initial) Ms. Jennifer L. Kuzma | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address 166 South St. | | | Allocated Activity or Event Year-To-Date 150278.59 | | |
| City Concord | State NH | Zip Code 03301 | Date <input type="text" value="08"/> / <input type="text" value="09"/> / <input type="text" value="2007"/> | | |
| Purpose of Disbursement: Reimbursement: Computer Server Backup | | | Transaction ID: D202733H4 | | |
| Activity or Event Identifier: Administrative | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 17.98 | | 31.97 | | 49.95 |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 666.81 | | 1185.45 | | 1852.26 |

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

| | | | | |
|---------------|--|------------------|--|--------------|
| FEDERAL SHARE | | NONFEDERAL SHARE | | TOTAL AMOUNT |
| | | | | |

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
New Hampshire Democratic Party

| | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|-------|----------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| A. Full Name (Last, First, Middle Initial) Ms. Jennifer L. Kuzma | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 166 South St. | | | Allocated Activity or Event Year-To-Date 150278.59 | | | | | | | | | | | | | | | | | | | | | | |
| City | State | Zip Code | Category/ Type | | | | | | | | | | | | | | | | | | | | | | |
| Concord | NH | 03301 | | | | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement: Reimbursement: Travel | | | Date <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>8</td><td>/</td><td>2</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table> | | | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 8 | / | 2 | 1 | / | 2 | 0 | 0 | 7 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | | | | |
| 0 | 8 | / | 2 | 1 | / | 2 | 0 | 0 | 7 | | | | | | | | | | | | | | | | |
| Activity or Event Identifier: Administrative | | | Transaction ID: D202735H4 | | | | | | | | | | | | | | | | | | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 10.80 | | 19.20 | | 30.00 |

| | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|-------|----------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| B. Full Name (Last, First, Middle Initial) Ms. Jennifer L. Kuzma | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 166 South St. | | | Allocated Activity or Event Year-To-Date 150278.59 | | | | | | | | | | | | | | | | | | | | | | |
| City | State | Zip Code | Category/ Type | | | | | | | | | | | | | | | | | | | | | | |
| Concord | NH | 03301 | | | | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement: Reimbursement: Travel | | | Date <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>8</td><td>/</td><td>3</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table> | | | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 8 | / | 3 | 0 | / | 2 | 0 | 0 | 7 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | | | | |
| 0 | 8 | / | 3 | 0 | / | 2 | 0 | 0 | 7 | | | | | | | | | | | | | | | | |
| Activity or Event Identifier: Administrative | | | Transaction ID: D202843H4 | | | | | | | | | | | | | | | | | | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 558.36 | | 992.64 | | 1551.00 |

| | | | | | | | | | | | | | | | | | | | | | | | | | |
|---|-------|----------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| C. Full Name (Last, First, Middle Initial) Ms. Julia Ramsey | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 20 Country Club Drive #31 | | | Allocated Activity or Event Year-To-Date 150278.59 | | | | | | | | | | | | | | | | | | | | | | |
| City | State | Zip Code | Category/ Type | | | | | | | | | | | | | | | | | | | | | | |
| Manchester | NH | 03102 | | | | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement: Reimbursement: Travel | | | Date <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>8</td><td>/</td><td>0</td><td>9</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table> | | | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 8 | / | 0 | 9 | / | 2 | 0 | 0 | 7 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | | | | |
| 0 | 8 | / | 0 | 9 | / | 2 | 0 | 0 | 7 | | | | | | | | | | | | | | | | |
| Activity or Event Identifier: Administrative | | | Transaction ID: D202819H4 | | | | | | | | | | | | | | | | | | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 95.80 | | 170.30 | | 266.10 |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 664.96 | | 1182.14 | | 1847.10 |

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

| | | | | |
|---------------|--|------------------|--|--------------|
| FEDERAL SHARE | | NONFEDERAL SHARE | | TOTAL AMOUNT |
| | | | | |

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
New Hampshire Democratic Party

| | | | | | |
|---|-------------|-------------------|---|--|--|
| A. Full Name (Last, First, Middle Initial) NGP Software, Inc. | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address 1101 Vermont Avenue Suite 710 | | | Allocated Activity or Event Year-To-Date 150278.59 | | |
| City Washington | State DC | Zip Code 20005 | Date <input type="text" value="08"/> / <input type="text" value="27"/> / <input type="text" value="2007"/> | | |
| Purpose of Disbursement: Networking/Computers | | | Transaction ID: D202831H4 | | |
| Activity or Event Identifier: Administrative | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 378.00 | | 672.00 | | 1050.00 |

| | | | | | |
|--|-------------|-------------------|---|--|--|
| B. Full Name (Last, First, Middle Initial) Nicole Cameli | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address 1200 Elm St. #622 | | | Allocated Activity or Event Year-To-Date 150278.59 | | |
| City Manchester | State NH | Zip Code 03101 | Date <input type="text" value="08"/> / <input type="text" value="21"/> / <input type="text" value="2007"/> | | |
| Purpose of Disbursement: Reimbursement: Travel | | | Transaction ID: D202835H4 | | |
| Activity or Event Identifier: Administrative | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 11.16 | | 19.83 | | 30.99 |

| | | | | | |
|--|-------------|-------------------|---|--|--|
| C. Full Name (Last, First, Middle Initial) Nicole Cameli | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address 1200 Elm St. #622 | | | Allocated Activity or Event Year-To-Date 150278.59 | | |
| City Manchester | State NH | Zip Code 03101 | Date <input type="text" value="08"/> / <input type="text" value="21"/> / <input type="text" value="2007"/> | | |
| Purpose of Disbursement: Reimbursement: Radio Shack | | | Transaction ID: D202836H4 | | |
| Activity or Event Identifier: Administrative | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 20.51 | | 36.47 | | 56.98 |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 409.67 | | 728.30 | | 1137.97 |

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

| | | | | |
|---------------|--|------------------|--|--------------|
| FEDERAL SHARE | | NONFEDERAL SHARE | | TOTAL AMOUNT |
| | | | | |

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
New Hampshire Democratic Party

| | | | | | |
|---|-------------|-------------------|---|--|--|
| A. Full Name (Last, First, Middle Initial) Peerless Insurance Company | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address P.O. Box 2051 | | | Allocated Activity or Event Year-To-Date 150278.59 | | |
| City Keene | State NH | Zip Code 03431 | Date <input type="text" value="08"/> / <input type="text" value="21"/> / <input type="text" value="2007"/> | | |
| Purpose of Disbursement: Insurance | | | Transaction ID: D202827H4 | | |
| Activity or Event Identifier: Administrative | | | | | |

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|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 36.36 | | 64.64 | | 101.00 |

| | | | | | |
|---|-------------|-------------------|---|--|--|
| B. Full Name (Last, First, Middle Initial) Radio Shack | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address 96 Fort Eddy Road | | | Allocated Activity or Event Year-To-Date 150278.59 | | |
| City Concord | State NH | Zip Code 03301 | Date <input type="text" value="08"/> / <input type="text" value="20"/> / <input type="text" value="2007"/> | | |
| Purpose of Disbursement: Radio | | | Transaction ID: D202837H4 | | |
| Activity or Event Identifier: Administrative [MEMO ITEM] | | | | | |

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|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 20.51 | | 36.47 | | 56.98 |

| | | | | | |
|--|-------------|------------------------|---|--|--|
| C. Full Name (Last, First, Middle Initial) Sandler & Reiff, P.C. | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | |
| Mailing Address 50 E St Se Ste 300 | | | Allocated Activity or Event Year-To-Date 150278.59 | | |
| City Washington | State DC | Zip Code 20003-2620 | Date <input type="text" value="08"/> / <input type="text" value="01"/> / <input type="text" value="2007"/> | | |
| Purpose of Disbursement: Legal Fees | | | Transaction ID: D202748H4 | | |
| Activity or Event Identifier: Administrative | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 144.00 | | 256.00 | | 400.00 |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 180.36 | | 320.64 | | 501.00 |

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

| | | | | |
|---------------|--|------------------|--|--------------|
| FEDERAL SHARE | | NONFEDERAL SHARE | | TOTAL AMOUNT |
| | | | | |

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
New Hampshire Democratic Party

| | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|-------|------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| A. Full Name (Last, First, Middle Initial) Sandler & Reiff, P.C. | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 50 E St Se Ste 300 | | | Allocated Activity or Event Year-To-Date 150278.59 | | | | | | | | | | | | | | | | | | | | | | |
| City | State | Zip Code | Category/ Type | | | | | | | | | | | | | | | | | | | | | | |
| Washington | DC | 20003-2620 | | | | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement: Legal Fees | | | Date <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>8</td><td>/</td><td>2</td><td>7</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table> | | | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 8 | / | 2 | 7 | / | 2 | 0 | 0 | 7 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | | | | |
| 0 | 8 | / | 2 | 7 | / | 2 | 0 | 0 | 7 | | | | | | | | | | | | | | | | |
| Activity or Event Identifier: Administrative | | | Transaction ID: D202749H4 | | | | | | | | | | | | | | | | | | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 144.00 | | 256.00 | | 400.00 |

| | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|-------|------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| B. Full Name (Last, First, Middle Initial) Staples | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 76 Fort Eddy Rd | | | Allocated Activity or Event Year-To-Date 150278.59 | | | | | | | | | | | | | | | | | | | | | | |
| City | State | Zip Code | Category/ Type | | | | | | | | | | | | | | | | | | | | | | |
| Concord | NH | 03301-7404 | | | | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement: Office Supplies | | | Date <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>8</td><td>/</td><td>2</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table> | | | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 8 | / | 2 | 1 | / | 2 | 0 | 0 | 7 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | | | | |
| 0 | 8 | / | 2 | 1 | / | 2 | 0 | 0 | 7 | | | | | | | | | | | | | | | | |
| Activity or Event Identifier: Administrative | | | Transaction ID: D202825H4 | | | | | | | | | | | | | | | | | | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 297.53 | | 528.95 | | 826.48 |

| | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|-------|----------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| C. Full Name (Last, First, Middle Initial) Time Payment Corp | | | Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC | | | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 10 M Commerce Way | | | Allocated Activity or Event Year-To-Date 150278.59 | | | | | | | | | | | | | | | | | | | | | | |
| City | State | Zip Code | Category/ Type | | | | | | | | | | | | | | | | | | | | | | |
| Woburn | MA | 01801 | | | | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement: Computer Lease | | | Date <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>8</td><td>/</td><td>0</td><td>9</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table> | | | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 8 | / | 0 | 9 | / | 2 | 0 | 0 | 7 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | | | | |
| 0 | 8 | / | 0 | 9 | / | 2 | 0 | 0 | 7 | | | | | | | | | | | | | | | | |
| Activity or Event Identifier: Administrative | | | Transaction ID: D202820H4 | | | | | | | | | | | | | | | | | | | | | | |

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 102.10 | | 181.50 | | 283.60 |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 543.63 | | 966.45 | | 1510.08 |

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

| | | | | |
|---------------|--|------------------|--|--------------|
| FEDERAL SHARE | | NONFEDERAL SHARE | | TOTAL AMOUNT |
| | | | | |

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
New Hampshire Democratic Party

A. Full Name (Last, First, Middle Initial)
U.S. Postmaster

Mailing Address
955 Goffs Falls Rd

City State Zip Code
Manchester NH 03103-6199

Purpose of Disbursement:
Stamps

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

150278.59

Date 08 / 27 / 2007

Transaction ID: D202832H4

| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
|---------------|---|------------------|---|--------------|
| 44.28 | | 78.72 | | 123.00 |

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

Mailing Address
P.O. Boc 15041

City State Zip Code
Worcester MA 01615

Purpose of Disbursement:
Cell Phone Service

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

150278.59

Date 08 / 21 / 2007

Transaction ID: D202845H4

Activity or Event Identifier:
Administrative
[MEMO ITEM]

| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
|---------------|---|------------------|---|--------------|
| 384.20 | | 683.02 | | 1067.22 |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
|---------------|---|------------------|---|--------------|
| 44.28 | | 78.72 | | 123.00 |

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

| FEDERAL SHARE | NONFEDERAL SHARE | TOTAL AMOUNT |
|---------------|------------------|--------------|
| 7044.51 | 12523.54 | 19568.05 |

Image# 27931563335

Form/Schedule: **SH4** Did not benefit any federal candidate.

Transaction ID: **D202832**
