

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
NEW HAMPSHIRE REPUBLICAN STATE COMMITTEE

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

2. **FEC IDENTIFICATION NUMBER** C00136457  
**3. IS THIS REPORT**  NEW (N) **OR**  AMENDED (A)

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report(Q1)  
 July 15 Quarterly Report(Q2)  
 October 15 Quarterly Report(Q3)  
 January 31 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post -Election** Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on 11 02 2010 in the State of NH

5. Covering Period 10 14 2010 through 11 22 2010

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

Type or Print Name of Treasurer Robert Scott

Signature of Treasurer Electronically Filed by Robert Scott Date 12 02 2010

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

Office Use Only **FEC FORM 3X** (Rev. 12/2004)

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
NEW HAMPSHIRE REPUBLICAN STATE COMMITTEE

Report Covering the Period: From: 

M	M
1	0

D	D
1	4

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
1	1

D	D
2	2

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		40062.74
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period .....	213068.97									
(c) Total Receipts (from Line 19) .....	301043.44	876020.16								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	514112.41	916082.90								
7. Total Disbursements (from Line 31) .....	452118.87	854089.36								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	61993.54	61993.54								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name

NEW HAMPSHIRE REPUBLICAN STATE COMMITTEE

Report Covering the Period: From: 

M	M
1	0

D	D
1	4

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
1	1

D	D
2	2

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	56275.00	210650.00
(ii) Unitemized .....	6257.00	55687.33
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	62532.00	266337.33
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	41000.00	169555.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	103532.00	435892.33
12. Transfers From Affiliated/Other Party Committees .....	197511.44	380405.76
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	1667.57
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	58054.50
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	58054.50
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	301043.44	876020.16
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	301043.44	817965.66

## DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

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.....	0.00	9167.09
(ii) Non-Federal Share.....	0.00	34739.50
(b) Other Federal Operating Expenditures.....	124929.70	361134.50
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	124929.70	405041.09
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	327189.17	449048.27
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	327189.17	449048.27
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	452118.87	854089.36
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	452118.87	819349.86

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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) .....	103532.00	435892.33
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	103532.00	435892.33
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	124929.70	370301.59
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	1667.57
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	124929.70	368634.02

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 95
	<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 REPUBLICAN STATE COMMITTEE

<b>A.</b>	Full Name (Last, First, Middle Initial) Yalcin Ayasli		Date of Receipt MM / DD / YYYY 10 / 22 / 2010		
	Mailing Address 75 Hawthorne Village Road		<b>Transaction ID:</b> SA11AI.17964		
	City Nashua	State NH	Zip Code 03062	Amount of Each Receipt this Period 10000.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Hittite Microwave Corp.	Occupation Scientist			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 10000.00			

<b>B.</b>	Full Name (Last, First, Middle Initial) Craig Cain		Date of Receipt MM / DD / YYYY 10 / 18 / 2010		
	Mailing Address 80 Lyme Road Apt. 449		<b>Transaction ID:</b> SA11AI.18115		
	City Hanover	State NH	Zip Code 03755-1236	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer n/a	Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00			

<b>C.</b>	Full Name (Last, First, Middle Initial) David Carlson		Date of Receipt MM / DD / YYYY 10 / 18 / 2010		
	Mailing Address 47 Abenaki Lane		<b>Transaction ID:</b> SA11AI.18049		
	City Bristol	State NH	Zip Code 03222-5243	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer retired	Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	10750.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 95  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**NEW HAMPSHIRE REPUBLICAN STATE COMMITTEE**

<p><b>A.</b> Full Name (Last, First, Middle Initial) Gary Chapman</p> <p>Mailing Address 150 Cattle Landing Road</p> <p>City Meredith State NH Zip Code 03253-6908</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Self-Employed Occupation Consultant</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">1100.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">1 0 / 2 0 / 2 0 1 0</span></p> <p><b>Transaction ID:</b> SA11AI.18119</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">500.00</span></p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) Landon T. Clay</p> <p>Mailing Address 188 Old Street Road</p> <p>City Peterborough State NH Zip Code 03458</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Retired</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">10000.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">1 0 / 3 0 / 2 0 1 0</span></p> <p><b>Transaction ID:</b> SA11AI.17980</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">10000.00</span></p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) David Doherty</p> <p>Mailing Address PO Box 2227</p> <p>City Conway State NH Zip Code 03818</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Pepsi Cola of Conway Occupation President</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">1000.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">1 0 / 1 8 / 2 0 1 0</span></p> <p><b>Transaction ID:</b> SA11AI.18067</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">1000.00</span></p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">11500.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 95  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NEW HAMPSHIRE REPUBLICAN STATE COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)  
Karin Finlay

Mailing Address 29 Armory Road

City Milford State NH Zip Code 03055

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

Name of Employer Occupation  
Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 22 / 2010

Transaction ID: SA11AI.18025

Amount of Each Receipt this Period 5000.00

**B.**

Full Name (Last, First, Middle Initial)  
Robert Finlay

Mailing Address 29 Armory Road

City Milford State NH Zip Code 03055

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

Name of Employer Occupation  
Hillcrest Managment President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 22 / 2010

Transaction ID: SA11AI.18023

Amount of Each Receipt this Period 5000.00

**C.**

Full Name (Last, First, Middle Initial)  
Thomas Flynn

Mailing Address PO Box 312

City Plainfield State NH Zip Code 03781

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

Name of Employer Occupation  
Ivy Square, Ltd. Banker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 18 / 2010

Transaction ID: SA11AI.18106

Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 10250.00

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



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

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

FOR LINE NUMBER: PAGE 9 / 95  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
NEW HAMPSHIRE REPUBLICAN STATE COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
James Forsythe  
Mailing Address 51 Lake Shore Drive  
City State Zip Code  
Strafford NH 03884-6726  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Occupation Engineer  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 835.00  
Date of Receipt 10 / 26 / 2010  
Transaction ID: SA11AI.17995  
Amount of Each Receipt this Period 800.00

**B.** Full Name (Last, First, Middle Initial)  
August Fromuth  
Mailing Address 618 North Bay Street  
City State Zip Code  
Manchester NH 03104  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Halifax American Energy Co. Occupation Energy Marketing  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00  
Date of Receipt 10 / 24 / 2010  
Transaction ID: SA11AI.17926  
Amount of Each Receipt this Period 500.00

**C.** Full Name (Last, First, Middle Initial)  
Patrick W. Griffin  
Mailing Address 956 Straw Hill Road  
City State Zip Code  
Manchester NH 03104  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Griffin, Bodi, Krause Occupation Partner  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1500.00  
Date of Receipt 10 / 18 / 2010  
Transaction ID: SA11AI.18057  
Amount of Each Receipt this Period 1500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2800.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 95
	<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 REPUBLICAN STATE COMMITTEE

<b>A.</b>	Full Name (Last, First, Middle Initial) J. Michael Hickey	Date of Receipt MM / DD / YYYY 10 / 26 / 2010
	Mailing Address 2311 26th South Street	<b>Transaction ID:</b> SA11AI.17923
	City State Zip Code Arlington VA 22206	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Verizon Communications Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Lawrence Lepard	Date of Receipt MM / DD / YYYY 10 / 26 / 2010
	Mailing Address 211 Grove Street	<b>Transaction ID:</b> SA11AI.17921
	City State Zip Code Wellesley MA 02482	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Equity Management Association Investment Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Paul J. McGoldrick	Date of Receipt MM / DD / YYYY 10 / 23 / 2010
	Mailing Address PO Box 439	<b>Transaction ID:</b> SA11AI.18102
	City State Zip Code Littleton NH 03561-0439	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Self-Employed Financial Advisor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 625.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	6100.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 95  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NEW HAMPSHIRE REPUBLICAN STATE COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)  
Daniel McGuire

Mailing Address 700 Suncook Valley Hwy

City State Zip Code  
Epsom NH 03234

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

Name of Employer Occupation  
Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11AI.18022

Amount of Each Receipt this Period  
250.00

**B.**

Full Name (Last, First, Middle Initial)  
Eli Mistovich

Mailing Address 5 Leelynn Circle

City State Zip Code  
Londonderry NH 03053

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

Name of Employer Occupation  
Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

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

Transaction ID: SA11AI.18060

Amount of Each Receipt this Period  
500.00

**C.**

Full Name (Last, First, Middle Initial)  
Ambassador Joseph Petrone

Mailing Address PO Box 1037

City State Zip Code  
Dublin NH 03444-1037

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

Name of Employer Occupation  
N/A Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 5 / 2 0 1 0

Transaction ID: SA11AI.17931

Amount of Each Receipt this Period  
3000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3750.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 95
	<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 REPUBLICAN STATE COMMITTEE

<b>A.</b>	Full Name (Last, First, Middle Initial) James A. Progin		Date of Receipt																					
	Mailing Address PO Box 85		<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>1</td><td>0</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	4		2	0	1	0
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	0		1	4		2	0	1	0														
	City State Zip Code Jackson NH 03846		<b>Transaction ID:</b> SA11AI.18100																					
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period																						
Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00		100.00																						

<b>B.</b>	Full Name (Last, First, Middle Initial) Jeffery Rand		Date of Receipt																					
	Mailing Address 44 Jones Road		<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>1</td><td>0</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	6		2	0	1	0
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	0		1	6		2	0	1	0														
	City State Zip Code Hillsborough NH 03244-4712		<b>Transaction ID:</b> SA11AI.17930																					
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period																						
Name of Employer Occupation Self-Employed Consultant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		100.00																						

<b>C.</b>	Full Name (Last, First, Middle Initial) Michael Rogers		Date of Receipt																					
	Mailing Address 76 Dow Road		<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>1</td><td>1</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	0		2	0	1	0
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	1		1	0		2	0	1	0														
	City State Zip Code Hollis NH 03049-6504		<b>Transaction ID:</b> SA11AI.17906																					
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period																						
Name of Employer Occupation Aruba Networks Manager, Customer Engineering Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		25.00																						

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	225.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 95

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NEW HAMPSHIRE REPUBLICAN STATE COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)  
Susan E. Scarborough

Mailing Address 4810 Rockwood Parkway, N.W

City State Zip Code  
Washington DC 20016

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

Name of Employer Occupation  
Homemaker

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 10000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 2 / 2 0 1 0

Transaction ID: SA11AI.17997

Amount of Each Receipt this Period

10000.00

**B.**

Full Name (Last, First, Middle Initial)  
William Smith

Mailing Address 30 Devonshire Road

City State Zip Code  
Atkinson NH 03811

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

Name of Employer Occupation  
Juniper Networks Engineer

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 9 / 2 0 1 0

Transaction ID: SA11AI.17946

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)  
Stephen Stepanek

Mailing Address PO Box 1015

City State Zip Code  
Milford NH 03055

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

Name of Employer Occupation  
White Cliff Realty Managing Partner

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 760.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 4 / 2 0 1 0

Transaction ID: SA11AI.17975

Amount of Each Receipt this Period

250.00

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

10750.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 14 / 95	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NEW HAMPSHIRE REPUBLICAN STATE COMMITTEE

<b>A.</b>	Full Name (Last, First, Middle Initial) Richard Verney		Date of Receipt	
	Mailing Address PO Box 145		M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 1 0	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.18062
	Bennington	NH	03442-0145	
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
	C		150.00	
Name of Employer Monadnock Paper Mills		Occupation Chair		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	150.00
<b>TOTAL</b> This Period (last page this line number only) .....	56275.00

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

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

FOR LINE NUMBER: PAGE 15 / 95  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
NEW HAMPSHIRE REPUBLICAN STATE COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
AMERICAN SOCIETY OF ANESTHESIOLOGISTS  
 Mailing Address 520 N NORTHWEST HIGHWAY  
 City State Zip Code  
 PARK RIDGE IL 60068  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 0 / 2 0 / 2 0 1 0  
**Transaction ID:** SA11C.17999  
 Amount of Each Receipt this Period  
 5000.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 5000.00

**B.** Full Name (Last, First, Middle Initial)  
DIRECTV GROUP, INC. FUND - FEDERAL (DIRECTV PAC)  
 Mailing Address 901 F Street, NW  
 Suite 600  
 City State Zip Code  
 Washington DC 20004  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 0 / 2 1 / 2 0 1 0  
**Transaction ID:** SA11C.17942  
 Amount of Each Receipt this Period  
 1000.00  
 FEC ID number of contributing federal political committee. **C** C00331991  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
FREEDOM PROJECT; THE  
 Mailing Address 631-B Pennsylvania Ave., SE  
 Basement UNIT  
 City State Zip Code  
 Washington DC 20003  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 0 / 2 5 / 2 0 1 0  
**Transaction ID:** SA11C.17976  
 Amount of Each Receipt this Period  
 5000.00  
 FEC ID number of contributing federal political committee. **C** C00305805  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 11000.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 95  
(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 REPUBLICAN STATE COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)  
HALEYS PAC

Mailing Address P.O. Box 1186

City State Zip Code  
Jackson MS 39215

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

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

**Transaction ID:** SA11C.18031

Amount of Each Receipt this Period  
5000.00

**B.**

Full Name (Last, First, Middle Initial)  
HEARTLAND VALUES PAC

Mailing Address PO Box 505

City State Zip Code  
Sioux Falls SD 57101

FEC ID number of contributing federal political committee. **C** C00409003

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 1 5 / 2 0 1 0

**Transaction ID:** SA11C.18162

Amount of Each Receipt this Period  
5000.00

**C.**

Full Name (Last, First, Middle Initial)  
HOME DEPOT INC. POLITICAL ACTION COMMITTEE, THE

Mailing Address 101 Constitution Ave. NW  
Suite 800 West

City State Zip Code  
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00284885

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

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

**Transaction ID:** SA11C.17982

Amount of Each Receipt this Period  
5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **15000.00**

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



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 95  
(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 REPUBLICAN STATE COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
REPUBLICAN MAINSTREET PARTNERSHIP PAC

Mailing Address c/o G&W 2201 Wisconsin Ave. NW  
Suite 320

City Washington State DC Zip Code 20007

FEC ID number of contributing federal political committee. **C** C00165159

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 10 / 15 / 2010  
Transaction ID: SA11C.18001  
Amount of Each Receipt this Period: 5000.00

**B.** Full Name (Last, First, Middle Initial)  
SARAH PAC

Mailing Address PO Box 7711

City Arlington State VA Zip Code 22207

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 10 / 21 / 2010  
Transaction ID: SA11C.18027  
Amount of Each Receipt this Period: 5000.00

**C.** Full Name (Last, First, Middle Initial)  
TUESDAY GROUP POLITICAL ACTION COMMITTEE

Mailing Address P. O. Box 11586

City Washington State DC Zip Code 20008

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 10 / 19 / 2010  
Transaction ID: SA11C.18029  
Amount of Each Receipt this Period: 5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	15000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	41000.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 95

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
NEW HAMPSHIRE REPUBLICAN STATE COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)  
21ST CENTURY MAJORITY FUND

Mailing Address 6065 Roswell Road, #2274  
BOX 2274

City State Zip Code  
Atlanta GA 30328

FEC ID number of contributing federal political committee. **C** C00361956

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA12.18175

Amount of Each Receipt this Period

3571.43

transfer memo: target sta-  
te victory fund

**[MEMO ITEM]**

**B.**

Full Name (Last, First, Middle Initial)  
ALAMO PAC

Mailing Address 919 CONGRESS AVE SUITE 1400  
FROST BANK PLAZA

City State Zip Code  
AUSTIN TX 78701

FEC ID number of contributing federal political committee. **C** C00387464

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA12.18136

Amount of Each Receipt this Period

3846.16

transfer memo: target sta-  
te victory fund

**[MEMO ITEM]**

**C.**

Full Name (Last, First, Middle Initial)  
ALTRIA GROUP, INC. POLITICAL ACTION COMMITTEE (ALTRIAPAC)

Mailing Address 101 Constitution Ave NW  
Suite 400W

City State Zip Code  
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00089136

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA12.18165

Amount of Each Receipt this Period

285.71

transfer memo: target sta-  
te victory fund

**[MEMO ITEM]**

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

0.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 95  
(check only one)

11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
NEW HAMPSHIRE REPUBLICAN STATE COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
AMERICAN HEALTH CARE ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1201 L Street, NW

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00006080

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
MM / DD / YYYY  
10 / 25 / 2010

**Transaction ID:** SA12.18126

Amount of Each Receipt this Period  
357.14

transfer memo: target state victory fund

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Association of Private Sector Colleges adn Universities PAC

Mailing Address 1101 Connecticut Avenue, NW Suite 900

City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00213066

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
MM / DD / YYYY  
10 / 25 / 2010

**Transaction ID:** SA12.18140

Amount of Each Receipt this Period  
357.14

transfer memo: target state victory fund

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
BLUEGRASS COMMITTEE

Mailing Address 400 N Capitol St NW #585 #585

City State Zip Code  
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00235655

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
MM / DD / YYYY  
10 / 27 / 2010

**Transaction ID:** SA12.18174

Amount of Each Receipt this Period  
5000.00

transfer memo: target state victory fund

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 95

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
NEW HAMPSHIRE REPUBLICAN STATE COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
BUILD POLITICAL ACTION COMMITTEE OF THE NATIONAL ASSOCIATION OF HOME BUILDERS (BUILDERS)

Mailing Address 1201 15th Street, NW

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00000901

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt: 10 / 25 / 2010  
**Transaction ID:** SA12.18159  
 Amount of Each Receipt this Period: 5000.00  
 transfer memo: target state victory fund  
**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
CLEAR CHANNEL COMMUNICATIONS INC. PAC

Mailing Address 200 E. Basse Road

City San Antonio State TX Zip Code 78209

FEC ID number of contributing federal political committee. **C** C00279216

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt: 10 / 25 / 2010  
**Transaction ID:** SA12.18142  
 Amount of Each Receipt this Period: 200.00  
 transfer memo: target state victory fund  
**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
CORINTHIAN COLLEGES INC PAC

Mailing Address 6 HUTTON CENTRE DRIVE SUITE 400  
C/O JOHN FIORETTO

City SANTA ANA State CA Zip Code 92707

FEC ID number of contributing federal political committee. **C** C00357640

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt: 10 / 25 / 2010  
**Transaction ID:** SA12.18144  
 Amount of Each Receipt this Period: 357.14  
 transfer memo: target state victory fund  
**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► 0.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 95

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	--	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
NEW HAMPSHIRE REPUBLICAN STATE COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)  
ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

Mailing Address LILLY CORPORATE CENTER

City State Zip Code  
INDIANAPOLIS IN 46285

FEC ID number of contributing federal political committee. **C** C00082792

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA12.18164

Amount of Each Receipt this Period

5000.00

transfer memo: target sta-  
te victory fund

**[MEMO ITEM]**

**B.**

Full Name (Last, First, Middle Initial)  
David E. Franasiak

Mailing Address 873 Coach Way

City State Zip Code  
Annapolis MD 21401

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

Name of Employer Occupation  
Williams & Jenson, PLLC Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA12.18122

Amount of Each Receipt this Period

333.34

transfer memo: target sta-  
te victory fund

**[MEMO ITEM]**

**C.**

Full Name (Last, First, Middle Initial)  
FREEDOM FUND

Mailing Address 701 8th Street, NW  
Suite 500

City State Zip Code  
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00390674

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA12.18138

Amount of Each Receipt this Period

3571.43

transfer memo: target sta-  
te victory fund

**[MEMO ITEM]**

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

0.00

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

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

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

FOR LINE NUMBER: PAGE 22 / 95  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
NEW HAMPSHIRE REPUBLICAN STATE COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
GLAXOSMITHKLINE LLC POLITICAL ACTION COMMITTEE (GSK PAC)

Mailing Address Five Moore Drive P.O. Box 13358  
P.O. Box 13358

City Res. Triangle Park State NC Zip Code 27709

FEC ID number of contributing federal political committee. **C** C00199703

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 5 / 2 0 1 0

**Transaction ID:** SA12.18167

Amount of Each Receipt this Period  
357.14

transfer memo: target sta-  
te victory fund

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Marcus Hiles

Mailing Address 2505 North State Street  
Suite 800

City Grand Prairie State TX Zip Code 75050

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

Name of Employer Occupation  
Western Rim Property Serv-  
ices Chairman / CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

**Transaction ID:** SA12.18176

Amount of Each Receipt this Period  
325.00

transfer memo: target sta-  
te victory fund

**[MEMO ITEM]**

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

Mailing Address 2505 North State Street 360  
Suite 800

City Grand Prairie State TX Zip Code 75050

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

Name of Employer Occupation  
Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

**Transaction ID:** SA12.18178

Amount of Each Receipt this Period  
325.00

transfer memo: target sta-  
te victory fund

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **0.00**

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

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

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

FOR LINE NUMBER: PAGE 23 / 95  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
NEW HAMPSHIRE REPUBLICAN STATE COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
INDEPENDENT INSURANCE AGENTS & BROKERS OF AMERICA, INC. POLITICAL ACTION COMMITTEE

Mailing Address 412 First Street, SE, Suite 300

City State Zip Code  
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00022343

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 5 / 2 0 1 0

**Transaction ID:** SA12.18146

Amount of Each Receipt this Period  
5000.00

transfer memo: target state victory fund

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC

Mailing Address 1501 K Street NW Suite 350

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00084491

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 5 / 2 0 1 0

**Transaction ID:** SA12.18130

Amount of Each Receipt this Period  
1071.43

transfer memo: target state victory fund

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
INVESTMENT ADVISER ASSOCIATION POLITICAL ACTION COMMITTEE (IAA-PAC)

Mailing Address 1050 17TH ST NW SUITE 725

City State Zip Code  
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C00440826

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 5 / 2 0 1 0

**Transaction ID:** SA12.18148

Amount of Each Receipt this Period  
357.14

transfer memo: target state victory fund

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **0.00**

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

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

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

FOR LINE NUMBER: PAGE 24 / 95

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	--	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
NEW HAMPSHIRE REPUBLICAN STATE COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)  
Kelly Ayotte Victory Committee

Mailing Address 901 N. Washington Street  
Suite 102

City State Zip Code  
Alexandria NH 22314

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3078.86

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 0 1 / 2 0 1 0

Transaction ID: SA12.17956

Amount of Each Receipt this Period

3078.86

transfer of joint fundrai-  
sing proceeds

**B.**

Full Name (Last, First, Middle Initial)  
KOCH INDUSTRIES INC POLITICAL ACTION COMMITTEE (KOCHPAC)

Mailing Address 655 15th Street NW  
Suite 445

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00236489

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA12.18134

Amount of Each Receipt this Period

5000.00

transfer memo: target sta-  
te victory fund

**[MEMO ITEM]**

**C.**

Full Name (Last, First, Middle Initial)  
KPMG PARTNERS/PRINCIPALS & EMPLOYEES PAC

Mailing Address P.O. Box 18254

City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00280222

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA12.18169

Amount of Each Receipt this Period

1071.43

transfer memo: target sta-  
te victory fund

**[MEMO ITEM]**

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

3078.86

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



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 95  
(check only one)

11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
NEW HAMPSHIRE REPUBLICAN STATE COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
MAKING BUSINESS EXCEL POLITICAL ACTION COMMITTEE

Mailing Address PO Box 3241

City State Zip Code  
Cheyenne WY 82003

FEC ID number of contributing federal political committee. **C** C00392134

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 5 / 2 0 1 0

**Transaction ID:** SA12.18158

Amount of Each Receipt this Period  
1428.57

transfer memo: target sta-  
te victory fund

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
MCGUIREWOODS LLP

Mailing Address One James Center  
901 E. Cary Street

City State Zip Code  
Richmond VA 23219

FEC ID number of contributing federal political committee. **C** C00225342

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 5 / 2 0 1 0

**Transaction ID:** SA12.18150

Amount of Each Receipt this Period  
357.15

transfer memo: target sta-  
te victory fund

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (A.K.A. MEDCO HEALTH PAC)

Mailing Address 2350 KERNER BLVD., SUITE 250

City State Zip Code  
SAN RAFAEL CA 94901

FEC ID number of contributing federal political committee. **C** C00384362

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 5 / 2 0 1 0

**Transaction ID:** SA12.18152

Amount of Each Receipt this Period  
5000.00

transfer memo: target sta-  
te victory fund

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 / 95  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
NEW HAMPSHIRE REPUBLICAN STATE COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
NATIONAL FISHERIES INSTITUTE (FISHPAC)

Mailing Address 7918 Jones Branch Drive  
Suite 700

City State Zip Code  
McLean VA 22102

FEC ID number of contributing federal political committee. **C** C00101204

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	1	/	2	0	1	0

Transaction ID: SA12.17960

Amount of Each Receipt this Period  
5000.00

Transfer memo: Kelly Ayotte Victory Committee

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
POLITICAL ACTION COMMITTEE OF THE AMERICAN ASSOCIATION OF ORTHOPAEDIC SURGEONS

Mailing Address 317 Massachusetts Avenue, NE  
1st Floor

City State Zip Code  
Washington DC 20002

FEC ID number of contributing federal political committee. **C** C00343137

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	5	/	2	0	1	0

Transaction ID: SA12.18124

Amount of Each Receipt this Period  
357.14

transfer memo: target state victory fund

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
PRICEWATERHOUSECOOPERS POLITICAL ACTION COMMITTEE I

Mailing Address 1301 K Street, NW  
Suite 800W

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00107235

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	5	/	2	0	1	0

Transaction ID: SA12.18171

Amount of Each Receipt this Period  
1071.43

transfer memo: target state victory fund

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 0.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 / 95  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
NEW HAMPSHIRE REPUBLICAN STATE COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
PSYCHIATRIC SOLUTIONS INC. FED PAC

Mailing Address 6640 Carothers Parkway  
Suite 500

City State Zip Code  
Franklin TN 37067

FEC ID number of contributing federal political committee. **C** C00407684

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 5 / 2 0 1 0

**Transaction ID:** SA12.18132

Amount of Each Receipt this Period  
1100.00

transfer memo: target sta-  
te victory fund

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
REPUBLICAN NATIONAL COMMITTEE

Mailing Address 310 FIRST STREET SE

City State Zip Code  
WASHINGTON DC 20003

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 5 / 2 0 1 0

**Transaction ID:** SA12.18059

Amount of Each Receipt this Period  
112100.00

274745.00

**C.** Full Name (Last, First, Middle Initial)  
REPUBLICAN NATIONAL COMMITTEE

Mailing Address 310 FIRST STREET SE

City State Zip Code  
WASHINGTON DC 20003

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

Name of Employer Occupation

Receipt For: 2010  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼

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

**Transaction ID:** SA12.17966

Amount of Each Receipt this Period  
720.00

In-kind - Office Equipment

275465.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **112820.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 95  
(check only one)

11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
NEW HAMPSHIRE REPUBLICAN STATE COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
REPUBLICAN NATIONAL COMMITTEE

Mailing Address 310 FIRST STREET SE

City State Zip Code  
WASHINGTON DC 20003

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
304465.00

Date of Receipt  
MM / DD / YYYY  
11 / 10 / 2010

**Transaction ID:** SA12.17944

Amount of Each Receipt this Period  
29000.00

**B.** Full Name (Last, First, Middle Initial)  
Target State Victory Fund

Mailing Address 228 South Washington Street  
Suite 115

City State Zip Code  
Alexandria VA 22314

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
63482.35

Date of Receipt  
MM / DD / YYYY  
10 / 25 / 2010

**Transaction ID:** SA12.18121

Amount of Each Receipt this Period  
43233.03

transfer of joint fundrai-  
sing proceeds

**C.** Full Name (Last, First, Middle Initial)  
Target State Victory Fund

Mailing Address 228 South Washington Street  
Suite 115

City State Zip Code  
Alexandria VA 22314

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
72861.90

Date of Receipt  
MM / DD / YYYY  
10 / 27 / 2010

**Transaction ID:** SA12.18173

Amount of Each Receipt this Period  
9379.55

transfer of joint fundrai-  
sing proceeds

**SUBTOTAL** of Receipts This Page (optional) ..... ► **81612.58**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 29 / 95
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NEW HAMPSHIRE REPUBLICAN STATE COMMITTEE

A.

Full Name (Last, First, Middle Initial)  
George Vradenburg

Mailing Address 2901 Woodland Drive, NW

City State Zip Code  
Washington DC 20008

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

Name of Employer Occupation  
Vradenburg Foundation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	5	/	2	0	1	0

Transaction ID: SA12.18156

Amount of Each Receipt this Period  

1000.00
---------

transfer memo: target state victory fund

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	<b>0.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	▶	<b>197511.44</b>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)  
NEW HAMPSHIRE REPUBLICAN STATE COMMITTEE

<p><b>A.</b> Full Name (Last, First, Middle Initial) Ajima Investment, LLC</p> <p>Mailing Address 427 Amherst Street 2nd Floor, #1</p> <p>City Nashua State NH Zip Code 03063</p> <p>Purpose of Disbursement office rent</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.17863</p> <p>Date of Disbursement 11 / 01 / 2010</p> <p>Amount of Each Disbursement this Period 1800.00</p> <p>001 Category/Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Atherton Building, LLC</p> <p>Mailing Address 10 Water Street</p> <p>City Concord State NH Zip Code 03301</p> <p>Purpose of Disbursement rent</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.17859</p> <p>Date of Disbursement 11 / 01 / 2010</p> <p>Amount of Each Disbursement this Period 1300.00</p> <p>001 Category/Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) BayRing Communications</p> <p>Mailing Address 359 Corporate Drive</p> <p>City Portsmouth State NH Zip Code 03801</p> <p>Purpose of Disbursement phone service</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.17854</p> <p>Date of Disbursement 11 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 929.46</p> <p>001 Category/Type</p>

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

4029.46

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

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NAME OF COMMITTEE (In Full)  
NEW HAMPSHIRE REPUBLICAN STATE COMMITTEE

A.	Full Name (Last, First, Middle Initial) Brick River Technologies	Transaction ID: SB21B.17853 Date of Disbursement 11 / 09 / 2010
	Mailing Address 117 Water Street Suite 1	Amount of Each Disbursement this Period 500.00
	City Exeter State NH Zip Code 03833	
	Purpose of Disbursement website hosting / maintenance Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Comcast	Transaction ID: SB21B.17838 Date of Disbursement 11 / 09 / 2010
	Mailing Address PO Box 196	Amount of Each Disbursement this Period 224.47
	City Newark State NJ Zip Code 07101-0196	
	Purpose of Disbursement cable / internet Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Comcast	Transaction ID: SB21B.17840 Date of Disbursement 11 / 09 / 2010
	Mailing Address PO Box 196	Amount of Each Disbursement this Period 163.93
	City Newark State NJ Zip Code 07101-0196	
	Purpose of Disbursement cable / internet Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>888.40</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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

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 REPUBLICAN STATE COMMITTEE

A.	Full Name (Last, First, Middle Initial) Comcast	Transaction ID: SB21B.17842 Date of Disbursement 11 / 09 / 2010
	Mailing Address PO Box 196	
	City Newark State NJ Zip Code 07101-0196	Amount of Each Disbursement this Period 224.51
	Purpose of Disbursement cable / internet Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Comcast	Transaction ID: SB21B.17844 Date of Disbursement 11 / 09 / 2010
	Mailing Address PO Box 196	
	City Newark State NJ Zip Code 07101-0196	Amount of Each Disbursement this Period 224.47
	Purpose of Disbursement cable / internet Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Comcast	Transaction ID: SB21B.17852 Date of Disbursement 11 / 09 / 2010
	Mailing Address PO Box 196	
	City Newark State NJ Zip Code 07101-0196	Amount of Each Disbursement this Period 224.47
	Purpose of Disbursement cable / internet Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>673.45</b>
<b>TOTAL</b> This Period (last page this line number only) .....	



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
NEW HAMPSHIRE REPUBLICAN STATE COMMITTEE

A.	Full Name (Last, First, Middle Initial) Comcast  Mailing Address PO Box 196  City Newark State NJ Zip Code 07101-0196  Purpose of Disbursement cable / internet Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.17821 Date of Disbursement 11 / 19 / 2010  Amount of Each Disbursement this Period 33.92  001 Category/ Type
B.	Full Name (Last, First, Middle Initial) Comcast  Mailing Address PO Box 196  City Newark State NJ Zip Code 07101-0196  Purpose of Disbursement cable / internet Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.17823 Date of Disbursement 11 / 19 / 2010  Amount of Each Disbursement this Period 85.04  001 Category/ Type
C.	Full Name (Last, First, Middle Initial) Comcast  Mailing Address PO Box 196  City Newark State NJ Zip Code 07101-0196  Purpose of Disbursement cable / internet Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.17824 Date of Disbursement 11 / 19 / 2010  Amount of Each Disbursement this Period 107.49  001 Category/ Type

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

226.45

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 REPUBLICAN STATE COMMITTEE

A.	Full Name (Last, First, Middle Initial) Dolphin Capital Corp.	Transaction ID: SB21B.17768 Date of Disbursement																			
	Mailing Address PO Box 605	<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>1</td><td>0</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	2		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		2	2		2	0	1	0												
	City Moberly State MO Zip Code 65270-0605	Amount of Each Disbursement this Period																			
	Purpose of Disbursement fax lease	<table border="1"><tr><td>36.17</td></tr></table>	36.17																		
36.17																					
	Candidate Name	001 Category/ Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) Dolphin Capital Corp.	Transaction ID: SB21B.17820 Date of Disbursement																			
	Mailing Address PO Box 605	<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>1</td><td>1</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	9		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		1	9		2	0	1	0												
	City Moberly State MO Zip Code 65270-0605	Amount of Each Disbursement this Period																			
	Purpose of Disbursement fax lease	<table border="1"><tr><td>36.17</td></tr></table>	36.17																		
36.17																					
	Candidate Name	001 Category/ Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) ElectionMall Technologies, Inc.	Transaction ID: SB21B.17758 Date of Disbursement																			
	Mailing Address 1101 Pennsylvania Avenue NW	<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>1</td><td>0</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	2		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		2	2		2	0	1	0												
	City Washington State DC Zip Code 20004-2514	Amount of Each Disbursement this Period																			
	Purpose of Disbursement online credit card processing fee	<table border="1"><tr><td>50.00</td></tr></table>	50.00																		
50.00																					
	Candidate Name	001 Category/ Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>122.34</td></tr></table>	122.34
122.34		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td></td></tr></table>	

**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 / 95

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

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NAME OF COMMITTEE (In Full)  
NEW HAMPSHIRE REPUBLICAN STATE COMMITTEE

<b>A.</b>	Full Name (Last, First, Middle Initial) FairPoint Communications  Mailing Address 350 Granite Street  City Braintree State MA Zip Code 02184-3958  Purpose of Disbursement cable / internet Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.17855 <b>Date of Disbursement</b> 11 / 09 / 2010  Amount of Each Disbursement this Period 139.98  001 Category/ Type	
<b>B.</b>	Full Name (Last, First, Middle Initial) G.L. Rogers and Co., Inc.  Mailing Address PO Box 100  City York Harbor State ME Zip Code 03911  Purpose of Disbursement office rent Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.17861 <b>Date of Disbursement</b> 11 / 01 / 2010  Amount of Each Disbursement this Period 1000.00  001 Category/ Type	
<b>C.</b>	Full Name (Last, First, Middle Initial) GE Capital  Mailing Address PO Box 642333  City Pittsburgh State PA Zip Code 15264-2333  Purpose of Disbursement copier lease Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.17767 <b>Date of Disbursement</b> 10 / 22 / 2010  Amount of Each Disbursement this Period 241.33  001 Category/ Type	

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

**1381.31**

**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 / 95

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

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NAME OF COMMITTEE (In Full)  
NEW HAMPSHIRE REPUBLICAN STATE COMMITTEE

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) GE Capital</p> <p>Mailing Address PO Box 642333</p> <p>City Pittsburgh State PA Zip Code 15264-2333</p> <p>Purpose of Disbursement copier lease</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.17825</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="241.39"/></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Hostway Corporation</p> <p>Mailing Address 100 North Riverside, Suite 800</p> <p>City Chicago State IL Zip Code 60606</p> <p>Purpose of Disbursement email hosting fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.17869</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="143.40"/></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) JH Realty Trust</p> <p>Mailing Address PO Box 886</p> <p>City Epping State NH Zip Code 03042</p> <p>Purpose of Disbursement office rent</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.17860</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1000.00"/></p>

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

**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 REPUBLICAN STATE COMMITTEE

A.	Full Name (Last, First, Middle Initial) Metrocast	Transaction ID: SB21B.17851
	Mailing Address 9 Apple Road	Date of Disbursement 11 / 09 / 2010
	City Belmont State NH Zip Code 03220	Amount of Each Disbursement this Period 106.95
	Purpose of Disbursement cable / internet Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Nathan Wechsler & Company, P.A.	Transaction ID: SB21B.17766
	Mailing Address 70 Commercial Street Suite 401	Date of Disbursement 10 / 22 / 2010
	City Concord State NH Zip Code 03301-5094	Amount of Each Disbursement this Period 962.50
	Purpose of Disbursement tax preparation Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) National Grid	Transaction ID: SB21B.17763
	Mailing Address PO Box 1040	Date of Disbursement 10 / 22 / 2010
	City Northborough State MA Zip Code 01532	Amount of Each Disbursement this Period 40.77
	Purpose of Disbursement utilities Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1110.22
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 38 / 95

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

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NAME OF COMMITTEE (In Full)  
NEW HAMPSHIRE REPUBLICAN STATE COMMITTEE

<b>A.</b>	Full Name (Last, First, Middle Initial) National Grid  Mailing Address PO Box 1040  City Northborough State MA Zip Code 01532 Purpose of Disbursement utilities Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.17764 Date of Disbursement 10 / 22 / 2010  Amount of Each Disbursement this Period 43.40  001 Category/ Type
<b>B.</b>	Full Name (Last, First, Middle Initial) National Grid  Mailing Address PO Box 1040  City Northborough State MA Zip Code 01532 Purpose of Disbursement utilities Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.17765 Date of Disbursement 10 / 22 / 2010  Amount of Each Disbursement this Period 83.25  001 Category/ Type
<b>C.</b>	Full Name (Last, First, Middle Initial) National Grid  Mailing Address PO Box 1040  City Northborough State MA Zip Code 01532 Purpose of Disbursement utilities Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.17826 Date of Disbursement 11 / 19 / 2010  Amount of Each Disbursement this Period 36.82  001 Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	163.47
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
NEW HAMPSHIRE REPUBLICAN STATE COMMITTEE

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) National Grid</p> <p>Mailing Address PO Box 1040</p> <p>City Northborough State MA Zip Code 01532</p> <p>Purpose of Disbursement utilities Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.17827</p> <p>Date of Disbursement 11 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 33.73</p> <p>001 Category/Type</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) National Grid</p> <p>Mailing Address PO Box 1040</p> <p>City Northborough State MA Zip Code 01532</p> <p>Purpose of Disbursement utilities Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.17833</p> <p>Date of Disbursement 11 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 51.91</p> <p>001 Category/Type</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Public Service New Hampshire</p> <p>Mailing Address PO Box 360</p> <p>City Manchester State NH Zip Code 03105-0360</p> <p>Purpose of Disbursement utilities Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.17760</p> <p>Date of Disbursement 10 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 30.77</p> <p>001 Category/Type</p>

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

116.41

**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 REPUBLICAN STATE COMMITTEE

A.	Full Name (Last, First, Middle Initial) Public Service New Hampshire	Transaction ID: SB21B.17761 Date of Disbursement
	Mailing Address PO Box 360	<input type="text" value="10"/> <input type="text" value="22"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Manchester State NH Zip Code 03105-0360	Amount of Each Disbursement this Period
	Purpose of Disbursement utilities	<input type="text" value="10.59"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Public Service New Hampshire	Transaction ID: SB21B.17762 Date of Disbursement
	Mailing Address PO Box 360	<input type="text" value="10"/> <input type="text" value="22"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Manchester State NH Zip Code 03105-0360	Amount of Each Disbursement this Period
	Purpose of Disbursement utilities	<input type="text" value="191.97"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Public Service New Hampshire	Transaction ID: SB21B.17850 Date of Disbursement
	Mailing Address PO Box 360	<input type="text" value="11"/> <input type="text" value="09"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Manchester State NH Zip Code 03105-0360	Amount of Each Disbursement this Period
	Purpose of Disbursement utilities	<input type="text" value="181.94"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="384.50"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
NEW HAMPSHIRE REPUBLICAN STATE COMMITTEE

A.	Full Name (Last, First, Middle Initial) Public Service New Hampshire	Transaction ID: SB21B.17819 Date of Disbursement																			
	Mailing Address PO Box 360	<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>1</td><td>1</td><td>/</td><td>1</td><td>9</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	1	9	/	2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	1	/	1	9	/	2	0	1	0												
	City Manchester State NH Zip Code 03105-0360	Amount of Each Disbursement this Period																			
	Purpose of Disbursement utilities	<table border="1"><tr><td>22.30</td></tr></table>	22.30																		
22.30																					
	Candidate Name	<table border="1"><tr><td>001</td></tr></table> Category/Type	001																		
001																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) REPUBLICAN NATIONAL COMMITTEE	Transaction ID: SB21B.17967 Date of Disbursement																			
	Mailing Address 310 FIRST STREET SE	<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>1</td><td>1</td><td>/</td><td>0</td><td>2</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	2	/	2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	1	/	0	2	/	2	0	1	0												
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period																			
	Purpose of Disbursement In-kind - Office Equipment	<table border="1"><tr><td>720.00</td></tr></table>	720.00																		
720.00																					
	Candidate Name	<table border="1"><tr><td>001</td></tr></table> Category/Type	001																		
001																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) Frank Reynolds	Transaction ID: SB21B.17862 Date of Disbursement																			
	Mailing Address 52 Spring Street	<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>1</td><td>1</td><td>/</td><td>0</td><td>1</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	1	/	2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	1	/	0	1	/	2	0	1	0												
	City Amherst State NH Zip Code 03031	Amount of Each Disbursement this Period																			
	Purpose of Disbursement office rent	<table border="1"><tr><td>1600.00</td></tr></table>	1600.00																		
1600.00																					
	Candidate Name	<table border="1"><tr><td>001</td></tr></table> Category/Type	001																		
001																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>2342.30</td></tr></table>	2342.30
2342.30		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td> </td></tr></table>	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
NEW HAMPSHIRE REPUBLICAN STATE COMMITTEE

<p><b>A.</b> Full Name (Last, First, Middle Initial) Staples</p> <p>Mailing Address PO Box 182378</p> <p>City Columbus State OH Zip Code 43218-2378</p> <p>Purpose of Disbursement offices supplies - toner, paper, binders</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> SB21B.17849</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="1041.84"/></p> <p>Category/Type: <input type="text" value="001"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Union Leader Corporation</p> <p>Mailing Address 100 William Loeb Drive # 9555</p> <p>City Manchester State NH Zip Code 03109-5309</p> <p>Purpose of Disbursement subscription renewal</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> SB21B.17846</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="143.00"/></p> <p>Category/Type: <input type="text" value="001"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) United States Postal Service</p> <p>Mailing Address 68 Fort Eddy Road</p> <p>City Concord State NH Zip Code 03301-7404</p> <p>Purpose of Disbursement postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> SB21B.17812</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="224.00"/></p> <p>Category/Type: <input type="text" value="001"/></p>

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

**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 REPUBLICAN STATE COMMITTEE

<b>A.</b>	Full Name (Last, First, Middle Initial) United States Postmaster  Mailing Address 955 Goffs Falls Road  City Manchester State NH Zip Code 03103 Purpose of Disbursement postage Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.17810 Date of Disbursement 10 / 14 / 2010  Amount of Each Disbursement this Period 8600.00  001 Category/ Type
<b>B.</b>	Full Name (Last, First, Middle Initial) United States Postmaster  Mailing Address 955 Goffs Falls Road  City Manchester State NH Zip Code 03103 Purpose of Disbursement postage Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.17807 Date of Disbursement 10 / 15 / 2010  Amount of Each Disbursement this Period 24400.00  001 Category/ Type
<b>C.</b>	Full Name (Last, First, Middle Initial) United States Postmaster  Mailing Address 955 Goffs Falls Road  City Manchester State NH Zip Code 03103 Purpose of Disbursement postage Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.17783 Date of Disbursement 10 / 25 / 2010  Amount of Each Disbursement this Period 37000.00  001 Category/ Type

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

70000.00

**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 REPUBLICAN STATE COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) United States Postmaster <hr/> Mailing Address 955 Goffs Falls Road <hr/> City Manchester State NH Zip Code 03103 Purpose of Disbursement Postage Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.17744 Date of Disbursement 10 / 27 / 2010
	Amount of Each Disbursement this Period 40000.00
	Category/ Type 001
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Unutil <hr/> Mailing Address PO Box 2014 <hr/> City Concord State NH Zip Code 03302-2014 Purpose of Disbursement utilities Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.17836 Date of Disbursement 11 / 09 / 2010
	Amount of Each Disbursement this Period 66.94
	Category/ Type 001
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Unutil <hr/> Mailing Address PO Box 2014 <hr/> City Concord State NH Zip Code 03302-2014 Purpose of Disbursement utilities Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.17837 Date of Disbursement 11 / 09 / 2010
	Amount of Each Disbursement this Period 44.24
	Category/ Type 001
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

40111.18

**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 REPUBLICAN STATE COMMITTEE

A.	Full Name (Last, First, Middle Initial) Unitil	Transaction ID: SB21B.17839 Date of Disbursement
	Mailing Address PO Box 2014	<input type="text" value="11"/> <input type="text" value="09"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Concord State NH Zip Code 03302-2014	Amount of Each Disbursement this Period
	Purpose of Disbursement utilities	<input type="text" value="242.03"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Unitil	Transaction ID: SB21B.17841 Date of Disbursement
	Mailing Address PO Box 2014	<input type="text" value="11"/> <input type="text" value="09"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Concord State NH Zip Code 03302-2014	Amount of Each Disbursement this Period
	Purpose of Disbursement unitil	<input type="text" value="18.06"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Unitil	Transaction ID: SB21B.17843 Date of Disbursement
	Mailing Address PO Box 2014	<input type="text" value="11"/> <input type="text" value="09"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Concord State NH Zip Code 03302-2014	Amount of Each Disbursement this Period
	Purpose of Disbursement utilities	<input type="text" value="18.27"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="278.36"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
NEW HAMPSHIRE REPUBLICAN STATE COMMITTEE

A.

Full Name (Last, First, Middle Initial)  
Unitil

Mailing Address PO Box 2014

City Concord State NH Zip Code 03302-2014

Purpose of Disbursement  
utilities

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB21B.17845  
Date of Disbursement

11 / 09 / 2010

Amount of Each Disbursement this Period

52.86

B.

Full Name (Last, First, Middle Initial)  
Unitil

Mailing Address PO Box 2014

City Concord State NH Zip Code 03302-2014

Purpose of Disbursement  
utilities

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB21B.17832  
Date of Disbursement

11 / 19 / 2010

Amount of Each Disbursement this Period

13.20

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

66.06

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

124687.54

**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 47 / 95

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

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NAME OF COMMITTEE (In Full)  
NEW HAMPSHIRE REPUBLICAN STATE COMMITTEE

<b>A.</b>	Full Name (Last, First, Middle Initial) Anthem Blue Cross and Blue Shield  Mailing Address PO Box 11007  City Lewiston State ME Zip Code 04243-9458  Purpose of Disbursement employee healthcare Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB30B.17858 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 1 0	Amount of Each Disbursement this Period  2151.95
<b>B.</b>	Full Name (Last, First, Middle Initial) Anthem Blue Cross and Blue Shield  Mailing Address PO Box 11007  City Lewiston State ME Zip Code 04243-9458  Purpose of Disbursement employee healthcare Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB30B.17831 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 1 9 / 2 0 1 0	Amount of Each Disbursement this Period  2151.95
<b>C.</b>	Full Name (Last, First, Middle Initial) Arena Communications  Mailing Address 1780 West Sequoia Vista Circle  City Salt Lake City State UT Zip Code 84104  Purpose of Disbursement direct mail - Kelly Ayotte Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB30B.17759 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 1 0	Amount of Each Disbursement this Period  49993.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>54296.90</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

C. Form/Schedule : **SB30B**  
Transaction ID : **SB30B.17759**

paid for with general party funds. No funds transferred from the national party were used in the production or distribution of these materials.



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
NEW HAMPSHIRE REPUBLICAN STATE COMMITTEE

A.	Full Name (Last, First, Middle Initial) Arena Communications	Transaction ID: SB30B.17747 Date of Disbursement																			
	Mailing Address 1780 West Sequoia Vista Circle	<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>1</td><td>0</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	5		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		2	5		2	0	1	0												
	City State Zip Code Salt Lake City UT 84104	Amount of Each Disbursement this Period																			
	Purpose of Disbursement direct mail - Ayotte / Hodes contrast	<table border="1"><tr><td>30579.00</td></tr></table>	30579.00																		
30579.00																					
	Candidate Name	<table border="1"><tr><td>006</td></tr></table> Category/ Type	006																		
006																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) Luke Botting	Transaction ID: SB30B.17875 Date of Disbursement																			
	Mailing Address 15 Compromise Lane	<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>1</td><td>0</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	5		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	5		2	0	1	0												
	City State Zip Code Sandown NH 03873	Amount of Each Disbursement this Period																			
	Purpose of Disbursement salary	<table border="1"><tr><td>600.00</td></tr></table>	600.00																		
600.00																					
	Candidate Name	<table border="1"><tr><td>001</td></tr></table> Category/ Type	001																		
001																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) Luke Botting	Transaction ID: SB30B.17876 Date of Disbursement																			
	Mailing Address 15 Compromise Lane	<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>1</td><td>0</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	0		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	0		2	0	1	0												
	City State Zip Code Sandown NH 03873	Amount of Each Disbursement this Period																			
	Purpose of Disbursement salary	<table border="1"><tr><td>600.00</td></tr></table>	600.00																		
600.00																					
	Candidate Name	<table border="1"><tr><td>001</td></tr></table> Category/ Type	001																		
001																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>31779.00</td></tr></table>	31779.00
31779.00		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td></td></tr></table>	

A. Form/Schedule : **SB30B**  
Transaction ID : **SB30B.17747**

paid for with general party funds. No funds transferred from the national party were used in the production or distribution of these materials.

**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 REPUBLICAN STATE COMMITTEE

A.	Full Name (Last, First, Middle Initial) Luke Botting	Transaction ID: SB30B.17877 Date of Disbursement 11 / 15 / 2010
	Mailing Address 15 Compromise Lane	Amount of Each Disbursement this Period 600.00
	City Sandown State NH Zip Code 03873	
	Purpose of Disbursement salary Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Luke Botting	Transaction ID: SB30B.17816 Date of Disbursement 11 / 19 / 2010
	Mailing Address 15 Compromise Lane	Amount of Each Disbursement this Period 30.35
	City Sandown State NH Zip Code 03873	
	Purpose of Disbursement travel / mileage Candidate Name	002 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Michael Ciccio	Transaction ID: SB30B.17878 Date of Disbursement 10 / 15 / 2010
	Mailing Address 157C Hamilton Street	Amount of Each Disbursement this Period 1059.42
	City Saugus State MA Zip Code 01906	
	Purpose of Disbursement salary Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>1689.77</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
NEW HAMPSHIRE REPUBLICAN STATE COMMITTEE

A.	Full Name (Last, First, Middle Initial) Michael Ciccio	Transaction ID: SB30B.17879 Date of Disbursement 10 / 30 / 2010
	Mailing Address 157C Hamilton Street	Amount of Each Disbursement this Period 1059.42
	City Saugus State MA Zip Code 01906	
	Purpose of Disbursement salary Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Michael Ciccio	Transaction ID: SB30B.17880 Date of Disbursement 11 / 15 / 2010
	Mailing Address 157C Hamilton Street	Amount of Each Disbursement this Period 1059.42
	City Saugus State MA Zip Code 01906	
	Purpose of Disbursement salary Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Michael Ciccio	Transaction ID: SB30B.17815 Date of Disbursement 11 / 19 / 2010
	Mailing Address 157C Hamilton Street	Amount of Each Disbursement this Period 231.18
	City Saugus State MA Zip Code 01906	
	Purpose of Disbursement travel / mileage Candidate Name	002 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2350.02
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
NEW HAMPSHIRE REPUBLICAN STATE COMMITTEE

<b>A.</b>	Full Name (Last, First, Middle Initial) Citadel Broadcasting  Mailing Address 292 Middle Road  City Dover State NH Zip Code 03820  Purpose of Disbursement radio advertising Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.17771 Date of Disbursement 10 / 25 / 2010  Amount of Each Disbursement this Period 9588.00  004 Category/ Type
<b>B.</b>	Full Name (Last, First, Middle Initial) Clear Channel  Mailing Address 815 Lafayette Road  City Portsmouth State NH Zip Code 03801  Purpose of Disbursement radio advertising Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.17795 Date of Disbursement 10 / 25 / 2010  Amount of Each Disbursement this Period 10184.70  004 Category/ Type
<b>C.</b>	Full Name (Last, First, Middle Initial) Thomas DeRosa  Mailing Address 19 Hillcrest Avenue  City Manchester State NH Zip Code 03103  Purpose of Disbursement salary Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.17881 Date of Disbursement 10 / 15 / 2010  Amount of Each Disbursement this Period 1385.72  001 Category/ Type

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

**21158.42**

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

A. Form/Schedule : **SB30B**  
Transaction ID : **SB30B.17771**

general party advertising, did not identify nor benefit any specific federal candidate.

B. Form/Schedule : **SB30B**  
Transaction ID : **SB30B.17795**

general party advertising, did not identify nor benefit any specific federal candidate.

# 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 REPUBLICAN STATE COMMITTEE

<p><b>A.</b> Full Name (Last, First, Middle Initial) Thomas DeRosa</p> <p>Mailing Address 19 Hillcrest Avenue</p> <p>City Manchester State NH Zip Code 03103</p> <p>Purpose of Disbursement salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> SB30B.17882</p> <p>Date of Disbursement 10 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 1385.72</p> <p>001 Category/Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Thomas DeRosa</p> <p>Mailing Address 19 Hillcrest Avenue</p> <p>City Manchester State NH Zip Code 03103</p> <p>Purpose of Disbursement travel / mileage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> SB30B.17848</p> <p>Date of Disbursement 11 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 323.12</p> <p>002 Category/Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Thomas DeRosa</p> <p>Mailing Address 19 Hillcrest Avenue</p> <p>City Manchester State NH Zip Code 03103</p> <p>Purpose of Disbursement salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> SB30B.17883</p> <p>Date of Disbursement 11 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 1385.72</p> <p>001 Category/Type</p>

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

3094.56

**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 56 / 95

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

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NAME OF COMMITTEE (In Full)  
NEW HAMPSHIRE REPUBLICAN STATE COMMITTEE

A.	Full Name (Last, First, Middle Initial) Fosters Daily Democrat	Transaction ID: SB30B.17775 Date of Disbursement 10 / 25 / 2010
	Mailing Address 150 Venture Drive	Amount of Each Disbursement this Period 1257.00
	City Dover State NH Zip Code 03820	
	Purpose of Disbursement Print Advertising Candidate Name	004 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) Bianca Garcia	Transaction ID: SB30B.17884 Date of Disbursement 10 / 15 / 2010
	Mailing Address 23 School Street	Amount of Each Disbursement this Period 1059.42
	City Salem State NH Zip Code 03079	
	Purpose of Disbursement salary Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) Bianca Garcia	Transaction ID: SB30B.17885 Date of Disbursement 10 / 30 / 2010
	Mailing Address 23 School Street	Amount of Each Disbursement this Period 1059.42
	City Salem State NH Zip Code 03079	
	Purpose of Disbursement salary Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

3375.84

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



A. Form/Schedule : **SB30B**  
Transaction ID : **SB30B.17775**

general party advertising, did not identify nor benefit any specific federal candidate.

# 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 REPUBLICAN STATE COMMITTEE

A.	Full Name (Last, First, Middle Initial) Bianca Garcia <hr/> Mailing Address 23 School Street <hr/> City Salem State NH Zip Code 03079 <hr/> Purpose of Disbursement salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.17886 Date of Disbursement 11 / 15 / 2010 <hr/> Amount of Each Disbursement this Period 1059.42
B.	Full Name (Last, First, Middle Initial) Caroline Gilger <hr/> Mailing Address 1 Galsam Way, #113 <hr/> City Manchester State NH Zip Code 03102 <hr/> Purpose of Disbursement salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.17887 Date of Disbursement 10 / 15 / 2010 <hr/> Amount of Each Disbursement this Period 1059.42
C.	Full Name (Last, First, Middle Initial) Caroline Gilger <hr/> Mailing Address 1 Galsam Way, #113 <hr/> City Manchester State NH Zip Code 03102 <hr/> Purpose of Disbursement salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.17888 Date of Disbursement 10 / 30 / 2010 <hr/> Amount of Each Disbursement this Period 1059.42

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

**3178.26**

**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 REPUBLICAN STATE COMMITTEE

A.	Full Name (Last, First, Middle Initial) Caroline Gilger	Transaction ID: SB30B.17889 Date of Disbursement 11 / 15 / 2010
	Mailing Address 1 Galsam Way, #113	Amount of Each Disbursement this Period 1059.42
	City Manchester State NH Zip Code 03102	
	Purpose of Disbursement salary Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) Caroline Gilger	Transaction ID: SB30B.17835 Date of Disbursement 11 / 19 / 2010
	Mailing Address 1 Galsam Way, #113	Amount of Each Disbursement this Period 641.52
	City Manchester State NH Zip Code 03102	
	Purpose of Disbursement travel / mileage Candidate Name	002 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) Great East Radio	Transaction ID: SB30B.17789 Date of Disbursement 10 / 25 / 2010
	Mailing Address 31 Hanover Street Suite 4	Amount of Each Disbursement this Period 2480.30
	City Lebanon State NH Zip Code 03766	
	Purpose of Disbursement radio advertising Candidate Name	004 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

4181.24

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

C. Form/Schedule : **SB30B**  
Transaction ID : **SB30B.17789**

general party advertising, did not identify nor benefit any specific federal candidate.

# 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 REPUBLICAN STATE COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Anne Kasper <hr/> Mailing Address 122 Prospect Hill Road <hr/> City Walpole State NH Zip Code 03608 <hr/> Purpose of Disbursement salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB30B.17890 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 1 0
	Amount of Each Disbursement this Period 1059.42
	Category/ Type 001
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Anne Kasper <hr/> Mailing Address 122 Prospect Hill Road <hr/> City Walpole State NH Zip Code 03608 <hr/> Purpose of Disbursement salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB30B.17891 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 1 0
	Amount of Each Disbursement this Period 1059.42
	Category/ Type 001
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Anne Kasper <hr/> Mailing Address 122 Prospect Hill Road <hr/> City Walpole State NH Zip Code 03608 <hr/> Purpose of Disbursement salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB30B.17892 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 1 0
	Amount of Each Disbursement this Period 1059.42
	Category/ Type 001
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

3178.26

**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 REPUBLICAN STATE COMMITTEE

A.	Full Name (Last, First, Middle Initial) Anne Kasper	Transaction ID: SB30B.17834 Date of Disbursement 11 / 19 / 2010
	Mailing Address 122 Prospect Hill Road	Amount of Each Disbursement this Period 308.96
	City Walpole State NH Zip Code 03608	
	Purpose of Disbursement travel / mileage Candidate Name	002 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Andrew Leach	Transaction ID: SB30B.17893 Date of Disbursement 10 / 15 / 2010
	Mailing Address 6 Beebe Lane	Amount of Each Disbursement this Period 2042.08
	City Merrimack State NH Zip Code 03054	
	Purpose of Disbursement salary Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Andrew Leach	Transaction ID: SB30B.17894 Date of Disbursement 10 / 30 / 2010
	Mailing Address 6 Beebe Lane	Amount of Each Disbursement this Period 2042.08
	City Merrimack State NH Zip Code 03054	
	Purpose of Disbursement salary Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	4393.12
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
NEW HAMPSHIRE REPUBLICAN STATE COMMITTEE

<b>A.</b>	Full Name (Last, First, Middle Initial) Andrew Leach  Mailing Address 6 Beebe Lane  City Merrimack State NH Zip Code 03054  Purpose of Disbursement travel / mileage Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB30B.17856 <b>Date of Disbursement</b> 11 / 09 / 2010  Amount of Each Disbursement this Period 277.58  002 Category/ Type	
<b>B.</b>	Full Name (Last, First, Middle Initial) Andrew Leach  Mailing Address 6 Beebe Lane  City Merrimack State NH Zip Code 03054  Purpose of Disbursement salary Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB30B.17895 <b>Date of Disbursement</b> 11 / 15 / 2010  Amount of Each Disbursement this Period 2042.08  001 Category/ Type	
<b>C.</b>	Full Name (Last, First, Middle Initial) Andrew Leach  Mailing Address 6 Beebe Lane  City Merrimack State NH Zip Code 03054  Purpose of Disbursement travel / mileage Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB30B.17817 <b>Date of Disbursement</b> 11 / 19 / 2010  Amount of Each Disbursement this Period 138.73  002 Category/ Type	

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

**2458.39**

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
NEW HAMPSHIRE REPUBLICAN STATE COMMITTEE

A.

Full Name (Last, First, Middle Initial)  
Mailways, Inc.

Transaction ID: SB30B.17785  
Date of Disbursement

Mailing Address PO Box 4926

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	5		2	0	1	0

City Manchester State NH Zip Code 03108

Amount of Each Disbursement this Period

Purpose of Disbursement  
mailing costs - general party mail

001  
Category/  
Type

8192.01
---------

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
Monadnock Radio

Transaction ID: SB30B.17791  
Date of Disbursement

Mailing Address 69 Stanhope Avenue

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	5		2	0	1	0

City Keene State NH Zip Code 03431

Amount of Each Disbursement this Period

Purpose of Disbursement  
radio advertising

004  
Category/  
Type

3247.00
---------

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
Nassau Broadcasting

Transaction ID: SB30B.17793  
Date of Disbursement

Mailing Address 20 Park Plaza  
Suite 211

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	5		2	0	1	0

City Boston State MA Zip Code 02116

Amount of Each Disbursement this Period

Purpose of Disbursement  
radio advertising

004  
Category/  
Type

6138.70
---------

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼

State: District:

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

17577.71

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



A. Form/Schedule : **SB30B**  
Transaction ID : **SB30B.17785**

general party mailing, did not benefit any specific candidate and was not paid for with any funds transferred from the national party.

B. Form/Schedule : **SB30B**  
Transaction ID : **SB30B.17791**

general party advertising, did not identify nor benefit any specific federal candidate.

C. Form/Schedule : **SB30B**  
Transaction ID : **SB30B.17793**

general party advertising, did not identify nor benefit any specific federal candidate.

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
NEW HAMPSHIRE REPUBLICAN STATE COMMITTEE

<p><b>A.</b> Full Name (Last, First, Middle Initial) Neighborhood News</p> <p>Mailing Address 100 William Loeb Drive</p> <p>City Manchester State NH Zip Code 03109</p> <p>Purpose of Disbursement print advertising</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB30B.17780</p> <p>Date of Disbursement 10 / 25 / 2010</p> <p>Amount of Each Disbursement this Period 504.00</p> <p>004 Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Northeast Communications</p> <p>Mailing Address 110 Babbit Road</p> <p>City Franklin State NH Zip Code 03235</p> <p>Purpose of Disbursement radio advertising</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB30B.17787</p> <p>Date of Disbursement 10 / 25 / 2010</p> <p>Amount of Each Disbursement this Period 1402.50</p> <p>004 Category/ Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Nicholas Pappas</p> <p>Mailing Address 30 Quarry Way</p> <p>City Manchester State NH Zip Code 03104</p> <p>Purpose of Disbursement salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB30B.17896</p> <p>Date of Disbursement 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 1013.80</p> <p>001 Category/ Type</p>

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

2920.30

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

A. Form/Schedule : **SB30B**  
Transaction ID : **SB30B.17780**

general party advertising, did not identify nor benefit any specific federal candidate.

B. Form/Schedule : **SB30B**  
Transaction ID : **SB30B.17787**

general party advertising, did not identify nor benefit any specific federal candidate.

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
NEW HAMPSHIRE REPUBLICAN STATE COMMITTEE

A.	Full Name (Last, First, Middle Initial) Nicholas Pappas	Transaction ID: SB30B.17897
	Mailing Address 30 Quarry Way	Date of Disbursement 10 / 30 / 2010
	City Manchester State NH Zip Code 03104	Amount of Each Disbursement this Period 1013.80
	Purpose of Disbursement salary Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Nicholas Pappas	Transaction ID: SB30B.17898
	Mailing Address 30 Quarry Way	Date of Disbursement 11 / 15 / 2010
	City Manchester State NH Zip Code 03104	Amount of Each Disbursement this Period 1013.80
	Purpose of Disbursement salary Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Nicholas Pappas	Transaction ID: SB30B.17813
	Mailing Address 30 Quarry Way	Date of Disbursement 11 / 19 / 2010
	City Manchester State NH Zip Code 03104	Amount of Each Disbursement this Period 799.04
	Purpose of Disbursement Travel / Mileage Candidate Name	002 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>2826.64</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
NEW HAMPSHIRE REPUBLICAN STATE COMMITTEE

A.	Full Name (Last, First, Middle Initial) Paychex	Transaction ID: SB30B.17867 Date of Disbursement
	Mailing Address 43 Constitution Drive	<input type="text" value="10"/> <input type="text" value="15"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Bedford State NH Zip Code 03110-6083	Amount of Each Disbursement this Period
	Purpose of Disbursement payroll taxes Candidate Name	<input type="text" value="4378.05"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/ Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Paychex	Transaction ID: SB30B.17870 Date of Disbursement
	Mailing Address 43 Constitution Drive	<input type="text" value="10"/> <input type="text" value="29"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Bedford State NH Zip Code 03110-6083	Amount of Each Disbursement this Period
	Purpose of Disbursement payroll taxes Candidate Name	<input type="text" value="4207.05"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/ Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Paychex	Transaction ID: SB30B.17871 Date of Disbursement
	Mailing Address 43 Constitution Drive	<input type="text" value="10"/> <input type="text" value="29"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Bedford State NH Zip Code 03110-6083	Amount of Each Disbursement this Period
	Purpose of Disbursement processing fee Candidate Name	<input type="text" value="930.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/ Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="9515.10"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
NEW HAMPSHIRE REPUBLICAN STATE COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Paychex <hr/> Mailing Address 43 Constitution Drive <hr/> City Bedford State NH Zip Code 03110-6083 <hr/> Purpose of Disbursement payroll taxes Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB30B.17905 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 1 0
	Amount of Each Disbursement this Period 4042.05
	Category/ Type 001
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Portsmouth Herald <hr/> Mailing Address 111 New Hampshire Avenue <hr/> City Portsmouth State NH Zip Code 03801 <hr/> Purpose of Disbursement Print Advertising Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB30B.17777 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 1 0
	Amount of Each Disbursement this Period 1584.00
	Category/ Type 004
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) QOL Printing and Distribution Services <hr/> Mailing Address 49 Hollis Street <hr/> City Manchester State NH Zip Code 03101 <hr/> Purpose of Disbursement printing/design - general party material Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB30B.17803 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 1 0
	Amount of Each Disbursement this Period 7375.00
	Category/ Type 006
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

13001.05

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

B. Form/Schedule : **SB30B**  
Transaction ID : **SB30B.17777**

general party advertising, did not identify nor benefit any specific federal candidate.

C. Form/Schedule : **SB30B**  
Transaction ID : **SB30B.17803**

paid for with general party funds. No funds transfered from the national party were used in the production or distribution associated with these handouts.



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
NEW HAMPSHIRE REPUBLICAN STATE COMMITTEE

<p><b>A.</b> Full Name (Last, First, Middle Initial) QOL Printing and Distribution Services</p> <p>Mailing Address 49 Hollis Street</p> <p>City Manchester State NH Zip Code 03101</p> <p>Purpose of Disbursement printing costs - generic govt handouts</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB30B.17745 <b>Date of Disbursement</b> 10 / 27 / 2010</p> <p><b>Amount of Each Disbursement this Period</b> 710.94</p> <p>006 Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Republican Depot, LLC</p> <p>Mailing Address PO Box 222</p> <p>City Union City State IN Zip Code 47390</p> <p>Purpose of Disbursement campaign signs - Kelly Ayotte</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB30B.17752 <b>Date of Disbursement</b> 10 / 30 / 2010</p> <p><b>Amount of Each Disbursement this Period</b> 4045.86</p> <p>006 Category/ Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Republican Depot, LLC</p> <p>Mailing Address PO Box 222</p> <p>City Union City State IN Zip Code 47390</p> <p>Purpose of Disbursement campaign signs - Kelly Ayotte</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB30B.17828 <b>Date of Disbursement</b> 11 / 19 / 2010</p> <p><b>Amount of Each Disbursement this Period</b> 2692.50</p> <p>006 Category/ Type</p>

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

7449.30

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

A. Form/Schedule : **SB30B**  
Transaction ID : **SB30B.17745**

paid for with general party funds. No funds transferred from the national party were used in the production or distribution associated with these handouts.

B. Form/Schedule : **SB30B**  
Transaction ID : **SB30B.17752**

paid for with general party funds. No funds transferred from the national party were used in the production or distribution associated with these signs.

C. Form/Schedule : **SB30B**  
Transaction ID : **SB30B.17828**

paid for with general party funds. No funds transferred from the national party were used in the production or distribution associated with these signs.

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
NEW HAMPSHIRE REPUBLICAN STATE COMMITTEE

<p><b>A.</b> Full Name (Last, First, Middle Initial) Saving Grace Media</p> <p>Mailing Address 206 Dennett Street</p> <p>City Portsmouth State NH Zip Code 03801</p> <p>Purpose of Disbursement media placement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB30B.17754</p> <p>Date of Disbursement 10 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 3750.00</p> <p>004 Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Say it in Stitches</p> <p>Mailing Address 128-B Hall Street</p> <p>City Concord State NH Zip Code 03301</p> <p>Purpose of Disbursement campaign apparel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB30B.17749</p> <p>Date of Disbursement 10 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 1922.50</p> <p>006 Category/ Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Spectrum Marketing Companies</p> <p>Mailing Address 97 Eddy Road Suite 101</p> <p>City Manchester State NH Zip Code 03102</p> <p>Purpose of Disbursement printing / mail</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB30B.17806</p> <p>Date of Disbursement 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 7399.26</p> <p>006 Category/ Type</p>

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

13071.76

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

A. Form/Schedule : **SB30B**  
Transaction ID : **SB30B.17754**

general party advertising, did not identify nor benefit any specific federal candidate.

B. Form/Schedule : **SB30B**  
Transaction ID : **SB30B.17749**

paid for with general party funds. No funds transferred from the national party were used in the production or distribution of these materials.

C. Form/Schedule : **SB30B**

general party materials, did not identify nor benefit any specific federal candidate.

Transaction ID : **SB30B.17806**

**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 REPUBLICAN STATE COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Spectrum Marketing Companies

Mailing Address 97 Eddy Road  
Suite 101

City Manchester State NH Zip Code 03102

Purpose of Disbursement  
printing / mail - general party activities  
Candidate Name

006  
Category/  
Type

Office Sought:  House  Senate  President  
State: District:  
Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

**Transaction ID:** SB30B.17769  
Date of Disbursement

10 / 21 / 2010

Amount of Each Disbursement this Period

10330.16

**B.** Full Name (Last, First, Middle Initial)  
Spectrum Marketing Companies

Mailing Address 97 Eddy Road  
Suite 101

City Manchester State NH Zip Code 03102

Purpose of Disbursement  
printing / mail - general party activities  
Candidate Name

006  
Category/  
Type

Office Sought:  House  Senate  President  
State: District:  
Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

**Transaction ID:** SB30B.17770  
Date of Disbursement

10 / 21 / 2010

Amount of Each Disbursement this Period

9978.00

**C.** Full Name (Last, First, Middle Initial)  
Spectrum Marketing Companies

Mailing Address 97 Eddy Road  
Suite 101

City Manchester State NH Zip Code 03102

Purpose of Disbursement  
printing / mail - Charlie Bass  
Candidate Name

006  
Category/  
Type

Office Sought:  House  Senate  President  
State: District:  
Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

**Transaction ID:** SB30B.17757  
Date of Disbursement

10 / 26 / 2010

Amount of Each Disbursement this Period

29882.79

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

50190.95

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

A. Form/Schedule : **SB30B**  
Transaction ID : **SB30B.17769**

General Party activities, did not identify nor benefit any specific federal candidate.

B. Form/Schedule : **SB30B**  
Transaction ID : **SB30B.17770**

General Party activities, did not identify nor benefit any specific federal candidate.



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
NEW HAMPSHIRE REPUBLICAN STATE COMMITTEE

<b>A.</b>	Full Name (Last, First, Middle Initial) Spectrum Marketing Companies  Mailing Address 97 Eddy Road Suite 101  City Manchester State NH Zip Code 03102  Purpose of Disbursement printing / mail Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.17811 Date of Disbursement 10 / 27 / 2010  Amount of Each Disbursement this Period 16929.95  006 Category/ Type
<b>B.</b>	Full Name (Last, First, Middle Initial) Spectrum Marketing Companies  Mailing Address 97 Eddy Road Suite 101  City Manchester State NH Zip Code 03102  Purpose of Disbursement campaign signs Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.17756 Date of Disbursement 10 / 28 / 2010  Amount of Each Disbursement this Period 3250.00  006 Category/ Type
<b>C.</b>	Full Name (Last, First, Middle Initial) Spectrum Marketing Companies  Mailing Address 97 Eddy Road Suite 101  City Manchester State NH Zip Code 03102  Purpose of Disbursement printing / mail Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.17866 Date of Disbursement 11 / 02 / 2010  Amount of Each Disbursement this Period 1852.32  006 Category/ Type

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

**22032.27**

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

A. Form/Schedule : **SB30B**  
Transaction ID : **SB30B.17811**

general party activity, did not identify nor benefit any specific federal candidate

B. Form/Schedule : **SB30B**  
Transaction ID : **SB30B.17756**

signs did not mention nor benefit any specific candidate for federal office.

C. Form/Schedule : **SB30B**

general party activity, did not identify nor benefit any specific federal candidate

Transaction ID : **SB30B.17866**

# 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 REPUBLICAN STATE COMMITTEE

<p><b>A.</b> Full Name (Last, First, Middle Initial) Targeted Creative Communications</p> <p>Mailing Address 801 N Fairfax Street Suite 308</p> <p>City Alexandria State VA Zip Code 22314-1775</p> <p>Purpose of Disbursement mail production/design in support of Charlie Bass</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB30B.17748 <b>Date of Disbursement</b> 10 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 7500.00</p> <p>Category/Type 006</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) The Hippo</p> <p>Mailing Address 49 Hollis Street</p> <p>City Manchester State NH Zip Code 03101</p> <p>Purpose of Disbursement printing - general party material</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB30B.17804 <b>Date of Disbursement</b> 10 / 21 / 2010</p> <p>Amount of Each Disbursement this Period 1250.00</p> <p>Category/Type 006</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) The Troupe</p> <p>Mailing Address 3 Industrial Drive</p> <p>City Windham State NH Zip Code 03087</p> <p>Purpose of Disbursement radio production costs</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB30B.17746 <b>Date of Disbursement</b> 10 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 1972.00</p> <p>Category/Type 004</p>

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

10722.00

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

A. Form/Schedule : **SB30B**  
Transaction ID : **SB30B.17748**

paid for with general party funds. No funds transferred from the national party were used in the production or distribution of these materials.

B. Form/Schedule : **SB30B**  
Transaction ID : **SB30B.17804**

paid for with general party funds. No funds transferred from the national party were used in the production or distribution associated with these handouts.

C. Form/Schedule : **SB30B**

general party advertising, did not identify nor benefit any specific federal candidate.

Transaction ID : **SB30B.17746**

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
NEW HAMPSHIRE REPUBLICAN STATE COMMITTEE

<b>A.</b>	Full Name (Last, First, Middle Initial) Simon Thomson  Mailing Address 19 Plasic Road  City Merrimack State NH Zip Code 03054  Purpose of Disbursement salary Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.17899 Date of Disbursement 10 / 15 / 2010  Amount of Each Disbursement this Period 1678.15  001 Category/ Type
<b>B.</b>	Full Name (Last, First, Middle Initial) Simon Thomson  Mailing Address 19 Plasic Road  City Merrimack State NH Zip Code 03054  Purpose of Disbursement salary Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.17900 Date of Disbursement 10 / 30 / 2010  Amount of Each Disbursement this Period 1678.15  001 Category/ Type
<b>C.</b>	Full Name (Last, First, Middle Initial) Simon Thomson  Mailing Address 19 Plasic Road  City Merrimack State NH Zip Code 03054  Purpose of Disbursement salary Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.17901 Date of Disbursement 11 / 15 / 2010  Amount of Each Disbursement this Period 1678.15  001 Category/ Type

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

5034.45

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
NEW HAMPSHIRE REPUBLICAN STATE COMMITTEE

<p><b>A.</b> Full Name (Last, First, Middle Initial) Simon Thomson</p> <p>Mailing Address 19 Plasic Road</p> <p>City Merrimack State NH Zip Code 03054</p> <p>Purpose of Disbursement travel / mileage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB30B.17814</p> <p>Date of Disbursement 11 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 1428.06</p> <p>002 Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Union Leader Corporation</p> <p>Mailing Address 100 William Loeb Drive # 9555</p> <p>City Manchester State NH Zip Code 03109-5309</p> <p>Purpose of Disbursement generic govt advertising</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB30B.17774</p> <p>Date of Disbursement 10 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 7816.97</p> <p>004 Category/ Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Union Leader Corporation</p> <p>Mailing Address 100 William Loeb Drive # 9555</p> <p>City Manchester State NH Zip Code 03109-5309</p> <p>Purpose of Disbursement printing costs - general party handout</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB30B.17773</p> <p>Date of Disbursement 10 / 25 / 2010</p> <p>Amount of Each Disbursement this Period 5703.49</p> <p>006 Category/ Type</p>

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

14948.52

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



B. Form/Schedule : **SB30B**  
Transaction ID : **SB30B.17774**

general party advertising, did not identify nor benefit any specific federal candidate.

C. Form/Schedule : **SB30B**  
Transaction ID : **SB30B.17773**

general party activity, did not identify nor benefit any specific federal candidate.

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
NEW HAMPSHIRE REPUBLICAN STATE COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Union Leader Corporation <hr/> Mailing Address 100 William Loeb Drive # 9555 <hr/> City Manchester State NH Zip Code 03109-5309 <hr/> Purpose of Disbursement Print Advertising Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.17779 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 1 0
	Amount of Each Disbursement this Period 2776.50
	Category/ Type 004
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) WHOM <hr/> Mailing Address One City Center 3rd Floor <hr/> City Portland State ME Zip Code 04101 <hr/> Purpose of Disbursement radio advertising Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.17799 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 1 0
	Amount of Each Disbursement this Period 4836.50
	Category/ Type 004
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Ryan Williams <hr/> Mailing Address 10 Water Street <hr/> City Concord State NH Zip Code 03301-4844 <hr/> Purpose of Disbursement salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.17902 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 1 0
	Amount of Each Disbursement this Period 1676.30
	Category/ Type 001
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

9289.30

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

A. Form/Schedule : **SB30B**  
Transaction ID : **SB30B.17779**

general party advertising, did not identify nor benefit any specific federal candidate.

B. Form/Schedule : **SB30B**  
Transaction ID : **SB30B.17799**

general party advertising, did not identify nor benefit any specific federal candidate.

# 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 REPUBLICAN STATE COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Ryan Williams <hr/> Mailing Address 10 Water Street <hr/> City Concord State NH Zip Code 03301-4844 <hr/> Purpose of Disbursement salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB30B.17903 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 1 0
	Amount of Each Disbursement this Period 1676.30
	Category/ Type 001
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Ryan Williams <hr/> Mailing Address 10 Water Street <hr/> City Concord State NH Zip Code 03301-4844 <hr/> Purpose of Disbursement travel / mileage Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB30B.17857 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 0 9 / 2 0 1 0
	Amount of Each Disbursement this Period 1126.05
	Category/ Type 002
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Ryan Williams <hr/> Mailing Address 10 Water Street <hr/> City Concord State NH Zip Code 03301-4844 <hr/> Purpose of Disbursement salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB30B.17904 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 1 0
	Amount of Each Disbursement this Period 1676.30
	Category/ Type 001
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

4478.65

**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)

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

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NAME OF COMMITTEE (In Full)  
NEW HAMPSHIRE REPUBLICAN STATE COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) WNTK Mailing Address 103 Hanover Street City Lebanon State NH Zip Code 03766 Purpose of Disbursement radio advertising Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.17829 Date of Disbursement 11 / 19 / 2010
	Amount of Each Disbursement this Period 272.00
	Category/ Type 004
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) WXRV Mailing Address 30 How Street City Haverhill State MA Zip Code 01830 Purpose of Disbursement radio advertising Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.17801 Date of Disbursement 10 / 25 / 2010
	Amount of Each Disbursement this Period 2635.00
	Category/ Type 004
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) WZID Mailing Address 500 Commercial Street City Manchester State NH Zip Code 03101 Purpose of Disbursement radio advertising Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.17797 Date of Disbursement 10 / 25 / 2010
	Amount of Each Disbursement this Period 5903.25
	Category/ Type 004
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	8810.25
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	327002.03

A. Form/Schedule : **SB30B**  
Transaction ID : **SB30B.17829**

general party advertising, did not identify nor benefit any specific federal candidate.

B. Form/Schedule : **SB30B**  
Transaction ID : **SB30B.17801**

general party advertising, did not identify nor benefit any specific federal candidate.

C. Form/Schedule : **SB30B**  
Transaction ID : **SB30B.17797**

general party advertising, did not identify nor benefit any specific federal candidate.