



# Report of Contributions and Expenditures for the City of Manchester

Office of the City Clerk/ One City Hall Plaza/ Manchester, NH 03101/ P: 603-624-6455 F: 603-624-6481

Check those categories which apply:

- |                                     |                                                                                                                              |                          |                                                |                          |                  |
|-------------------------------------|------------------------------------------------------------------------------------------------------------------------------|--------------------------|------------------------------------------------|--------------------------|------------------|
| <input type="checkbox"/>            | Candidate's Election Filing                                                                                                  | <input type="checkbox"/> | Disclosure Report, ten days preceding election | <input type="checkbox"/> | General Election |
| <input type="checkbox"/>            | Political Committee's Election Filing                                                                                        | <input type="checkbox"/> | Disclosure Report, ten days following election | <input type="checkbox"/> | Primary Election |
| <input checked="" type="checkbox"/> | Incumbent's Report for ___ Quarter Ending: ___ Mar. ___ June ___ Sept. <input checked="" type="checkbox"/> Dec. 20 <u>14</u> |                          |                                                |                          |                  |

### FOR CANDIDATE FILING:

I, \_\_\_\_\_, candidate for the office of \_\_\_\_\_  
 or I, \_\_\_\_\_, fiscal agent, **do not have** contributions or expenditures equal to or exceeding \$500 for the reporting period indicated above.

### FOR COMMITTEE FILING:

I, \_\_\_\_\_ chairman of the \_\_\_\_\_  
 Committee, or I, \_\_\_\_\_, treasurer, **do not have** contributions or expenditures equal to or exceeding \$500 for the reporting period indicated above.

### FOR INCUMBENT FILING:

I, Debra Gagnon Laughon, incumbent for the office of BOSC Ward 2  
**do not have** contributions or expenditures equal to or exceeding \$500 for the period indicated above.

I, Debra Gagnon Laughon, candidate/fiscal agent/treasurer/committee chair/incumbent, hereby swear that the information contained herein is true and correct to the best of my knowledge and belief.

Signed: Debra Gagnon Laughon  
 Candidate or Campaign Chairman/Treasurer  
 Committee Chairman/Treasurer  
 Incumbent

Date: 1/7/15

Signed: NOAH E. FERRUOLO  
 Justice of the Peace  
 My Commission Expires February 2, 2016

Date: 1/7/15