

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

Chec	ek those categories which apply:	
	Candidate's Election Filing Disclosure Report	t, ten days preceding election General Election
X	Political Committee's Election Filing Disclosure Report	t, ten days following election Primary Election
	Incumbent's Report for Quarter Ending: Mar June Sep	it Dec. 20_ 25
	FOR CANDIDATE FILING:	
I,		, candidate for the office of
or I,		, fiscal agent, have contributions or expenditures equal to or exceeding
\$500	for the reporting period indicated above and do submit the following report of	f contributions and expenditures.
т	FOR COMMITTEE FILING:	chairman of the FRIGHTS OF VALUET ROMANIANIANIA
Ι,		
	mittee, or I,	, treasurer, have contributions or expenditures equal to or exceeding
\$500	for the reporting period indicated above and do submit the following report of	f contributions and expenditures.
•••••	FOR INCUMBENT FILING:	
I,		, incumbent for the office of
have	contributions or expenditures equal to or exceeding \$500 for the period indicate	ated above and do submit the following report of contributions and expenditures.
	SUMMARY OF CONTRIBU	UTIONS AND EXPENDITURES
	Total of Contributions Itemized in this Report: \$	Total of Expenditures Itemized in this Report 1987
I,		, candidate/fiscal agent/treasurer in initial later incument, hereby swear
that t	he information contained herein is true and correct to the best of my knowledged: Date: 7/35/25 Candidate or Campaign Chairman/Treasurer	Signed: Justice of the Peace Date: Date:
	Committee Chairman/Treasurer	Notary Public
	Incumbent	



Campaign Expenditures Disclosure Report for the City of Manchester

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An expenditure shall mean the disbursement of money or thing of value or the making of a legally binding commitment, for political purposes, to make such a disbursement in the future. (City Charter - Section 5.29)

Report Period Ending: 9/25/25				
Paid to or will be Paid to (Full Name)	Address	Nature of Expense	Date Paid	Amount
PIVOT	712 HSt. Washington DC	Wall cardo a mailingo	9/25/25.	19831.82
	0	/		
7				
7		Total of Expenditures Item	ized on this page:	\$983180
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