



# 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 <input checked="" type="checkbox"/> 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, John B Avard, DC, incumbent for the office of Board of School Committee  
**do not have** contributions or expenditures equal to or exceeding \$500 for the period indicated above.

I, John B Avard, DC, 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: \_\_\_\_\_ Date: 10-14-14  
Candidate or Campaign Chairman/Treasurer  
Committee Chairman/Treasurer  
Incumbent

Signed: \_\_\_\_\_ Date: 10-15-14  
Justice of the Peace  
Notary Public  
JENNIFER A. MESSIER, Notary Public  
My Commission Expires December 14 2016