



# 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 <u>4th</u> Quarter Ending: <u>   </u> Mar. <u>   </u> June <u>   </u> Sept. <input checked="" type="checkbox"/> Dec. <u>20</u> <u>25</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, Dr. Sean Parr, incumbent for the office of School Board Ward 2  
**do not have** contributions or expenditures equal to or exceeding \$500 for the period indicated above.

I, Dr. Sean Parr, 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: [Signature]  
~~Candidate or Campaign Chairman/Treasurer~~  
~~Committee Chairman/Treasurer~~  
Incumbent

Date: 8-24-26

Signed: [Signature]  
~~Justice of the Peace~~  
Angela M Carey  
Notary Public  
State of New Hampshire  
My Commission Expires 3/25/2031

Date: 8/24/26