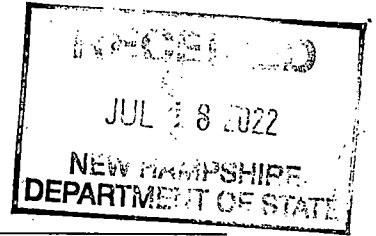




STATE OF NEW HAMPSHIRE

Lobbyists Report of Political Contributions Addendum C (RSA Chapter 15:6)



P I. Name of Lobbyist(s) Derek L. Crawford

L E II. Name of lobbyist's partnership, firm or corporation, if any:

A S Altria Client Services LLC and its Affiliates

(Name of partnership, firm or corporation)

P III. Name of Client Altria Client Services and its Affiliates Date July 15, 2022

R I Political Contributions

N For each political contribution that is reportable pursuant to RSA Chapter 664 paid on behalf of the client/lobbyist and lobbying firm, indicate the following:

Full name of candidate: Committee to Elect House Republicans

(Last Name)

(First Name)

(Middle Name/Initial)

Amount of contribution \$ 1,500.00 Office Candidate is Seeking N/A

If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter the actual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not known, enter an estimated value and the word "estimate."

\_\_\_\_\_

Full name of candidate: Sununu Chris

(Last Name)

(First Name)

(Middle Name/Initial)

Amount of contribution \$ 2,000.00 Office Candidate is Seeking Governor

If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter the actual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not known, enter an estimated value and the word "estimate."

\_\_\_\_\_

Full name of candidate: Birdsell Regina

(Last Name)

(First Name)

(Middle Name/Initial)

Amount of contribution \$ 1,000.00 Office Candidate is Seeking State Senate

If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter the actual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not known, enter an estimated value and the word "estimate."

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(If more than three contributions were made, report additional contributions on separate addendum C forms.)

**Sworn Statement/Affirmation by Lobbyist**

I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm that the foregoing information is true and complete to the best of my knowledge and belief.

DocuSigned by:

*Derek Crawford*

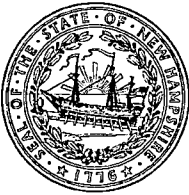
(Signature of lobbyist)

July 15, 2022

(Date)

Derek L. Crawford

(Print Name of lobbyist)



STATE OF NEW HAMPSHIRE

Lobbyists Report of Political Contributions Addendum C (RSA Chapter 15:6)

P I. Name of Lobbyist(s) Derek L. Crawford

L II. Name of lobbyist's partnership, firm or corporation, if any: Altria Client Services LLC and its Affiliates

A III. Name of Client Altria Client Services and its Affiliates Date July 15, 2022

R Political Contributions

I For each political contribution that is reportable pursuant to RSA Chapter 664 paid on behalf of the client/lobbyist and lobbying firm, indicate the following:

Full name of candidate: Carson Sharon (Last Name) (First Name) (Middle Name/Initial) Amount of contribution \$ 1,000.00 Office Candidate is Seeking State Senate

If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter the actual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not known, enter an estimated value and the word "estimate."

Full name of candidate: Gannon Bill (Last Name) (First Name) (Middle Name/Initial) Amount of contribution \$ 1,000.00 Office Candidate is Seeking State Senate

If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter the actual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not known, enter an estimated value and the word "estimate."

Full name of candidate: Daniels Gary (Last Name) (First Name) (Middle Name/Initial) Amount of contribution \$ 1,000.00 Office Candidate is Seeking State Senate

If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter the actual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not known, enter an estimated value and the word "estimate."

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(If more than three contributions were made, report additional contributions on separate addendum C forms.)

**Sworn Statement/Affirmation by Lobbyist**

I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm that the foregoing information is true and complete to the best of my knowledge and belief.

DocuSigned by:

*Derek Crawford*

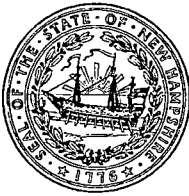
(Signature of lobbyist)

July 15, 2022

(Date)

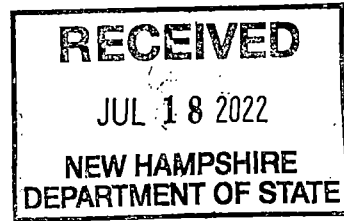
Derek L. Crawford

(Print Name of lobbyist)



STATE OF NEW HAMPSHIRE

Lobbyists Report of Political Contributions Addendum C (RSA Chapter 15:6)



P I. Name of Lobbyist(s) Derek L. Crawford

L II. Name of lobbyist's partnership, firm or corporation, if any:

A Altria Client Services LLC and its Affiliates
S (Name of partnership, firm or corporation)

P III. Name of Client Altria Client Services and its Affiliates Date July 15, 2022

R I Political Contributions

N For each political contribution that is reportable pursuant to RSA Chapter 664 paid on behalf of the
T client/lobbyist and lobbying firm, indicate the following:

Full name of candidate: Ward Ruth
(Last Name) (First Name) (Middle Name/Initial)
Amount of contribution \$ 1,000.00 Office Candidate is Seeking State Senate

If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter the actual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not known, enter an estimated value and the word "estimate."

Full name of candidate: Gray James
(Last Name) (First Name) (Middle Name/Initial)
Amount of contribution \$ 1,000.00 Office Candidate is Seeking State Senate

If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter the actual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not known, enter an estimated value and the word "estimate."

Full name of candidate: Senate Republican Majority PAC
(Last Name) (First Name) (Middle Name/Initial)
Amount of contribution \$ 2,000.00 Office Candidate is Seeking N/A

If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter the actual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not known, enter an estimated value and the word "estimate."

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(If more than three contributions were made, report additional contributions on separate addendum C forms.)

**Sworn Statement/Affirmation by Lobbyist**

I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm that the foregoing information is true and complete to the best of my knowledge and belief.

DocuSigned by:

*Derek Crawford*

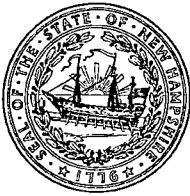
Signature of lobbyist

July 15, 2022

(Date)

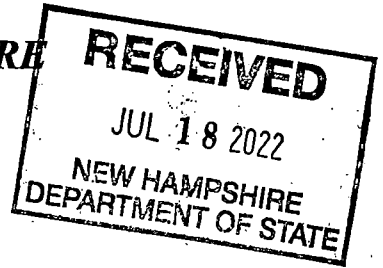
Derek L. Crawford

(Print Name of lobbyist)



STATE OF NEW HAMPSHIRE

Lobbyists Report of Political Contributions Addendum C (RSA Chapter 15:6)



P I. Name of Lobbyist(s) Derek L. Crawford

L II. Name of lobbyist's partnership, firm or corporation, if any: Altria Client Services LLC and its Affiliates

E III. Name of Client Altria Client Services and its Affiliates Date July 15, 2022

A Political Contributions For each political contribution that is reportable pursuant to RSA Chapter 664 paid on behalf of the client/lobbyist and lobbying firm, indicate the following:



Full name of candidate: Avard Kevin (Last Name) (First Name) (Middle Name/Initial) Amount of contribution \$ 1,000.00 Office Candidate is Seeking State Senate

If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter the actual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not known, enter an estimated value and the word "estimate."



Full name of candidate: Ricciardi Denise (Last Name) (First Name) (Middle Name/Initial) Amount of contribution \$ 500.00 Office Candidate is Seeking State Senate

If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter the actual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not known, enter an estimated value and the word "estimate."



Full name of candidate: Pearl Howard (Last Name) (First Name) (Middle Name/Initial) Amount of contribution \$ 500.00 Office Candidate is Seeking State Senate

If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter the actual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not known, enter an estimated value and the word "estimate."

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(If more than three contributions were made, report additional contributions on separate addendum C forms.)

**Sworn Statement/Affirmation by Lobbyist**

I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm that the foregoing information is true and complete to the best of my knowledge and belief.

DocuSigned by:

*Derek Crawford*

Signature of lobbyist)

July 15, 2022

(Date)

Derek L. Crawford

(Print Name of lobbyist)



*State of New Hampshire*  
*Signature Form for Associated Lobbyist*  
*RSA Chapter 15*

Use this form to swear or affirm the truth and completeness of  
Income and Expense Statements and related Addendums.

**Sworn Statement/Affirmation by Lobbyist**  
**Statement of Income and Expenses for:**

Name of Lobbying partnership, firm, or corporation: Altria Client Services LLC and its Affiliates

Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any particular client): Altria Client Services and its Affiliates

**Date of Report (check one):**

April 27, 2022       July 27, 2022       October 26, 2022       January 25, 2023

I have read RSA 15, RSA 15-B, RSA 664, the Statement of Income and Expenses described above, and the following Addendums submitted with that Statement (insert the number of Addendum forms being submitted):

Addendum A(s).   X  

Addendum B(s).           

Addendum C(s).   X  

I hereby swear or affirm that the foregoing information on the Statement and each Addendum is true and complete to the best of my knowledge and belief.

DocuSigned by:

Derek Crawford  
(Signature of lobbyist)

Derek L. Crawford

(Print Name of lobbyist)

July 15, 2022

(Date)

