

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

# RECEIVED

OCT 0.6 2023

NEW HAMPSHIRE DEPARTMENT OF STATE

I. Name of Lobbyist(s)	Margaret Gilmour		
II. Name of lobbyist's par	mership, firm or cor	poration, if any:	
Preti Strategies			
(Name of parts	nership, firm or corporation)		
III. Name of Client			Date October 5, 2023
Political Contributions			
For each political contribute client/lobbyist and lobbyin			ter 664 paid on behalf of the
Chemoloodyist and loodyin	g min, mulcale me to	nowing.	
Full name of candidate:	Soucy	Donna	
	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$	50.00	Office Candidate i	is Seeking NH State Senate
		<del></del>	<u> </u>
<u> </u>			
Full name of candidate:	Dowd	Rick	
	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$	50.00	Office Candidate is	s Seeking Alderman in Ward 2
		<del></del>	
			ds or services provided, and enter t
enter an estimated value and		ve for amount of contribu	ition. If the actual cost is not know
chief an estimated value and	ne word estimate.		
F-11 F 1 1 - 4			
Full name of candidate:		,	
	Elect House Demo		(Middle Name/Initial)
Amount of contribution \$	Elect House Demo (Last Name)	Office Candidate in	(Middle Name/Initial)

enter an estimated value and the word "estimate."	for amount of contribution. If the actual cost is not known,
f more than three contributions were made, report additional	contributions on separate addendum C forms.)
Sworn Statement/Affirmation by Lobbyist	
have read RSA 15, RSA 15-B and RSA 664 and his true and complete to the best of my knowledge a	hereby swear or affirm that the foregoing information
is true and complete to the best of my knowledge at	nd benef.
- · · · · · · · · · · · · · · · · · · ·	October 5, 2023
Transport Lilmour (Signature of lobbyist)	
- · · · · · · · · · · · · · · · · · · ·	October 5, 2023

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II Name of labburist's n			
ii. Maine oi ionnyist s p	artnership, firm or corp	poration, if any:	
Preti Strategies			
(Name of p	partnership, firm or corporation)		
III. Name of Client			Date October 5, 2023
		_	oter 664 paid on behalf of the
Full name of candidate:		mocratic Committee	
	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$	25.00	Office Candidate i	is Seeking
Full name of candidate:	Craig	Joyce	
Full name of candidate:	Craig (Last Name)	Joyce (First Name)	(Middle Name/Initial)
Full name of candidate:  Amount of contribution \$	(Last Name)	(First Name)	(Middle Name/Initial) s Seeking Governor of NH
Amount of contribution \$ _ If the contribution is an in- actual cost of the in-kind co	(Last Name)  200.00  kind contribution, provide a contribution on the line above	(First Name) Office Candidate is a description of the good	s Seeking Governor of NH  ds or services provided, and enter the
Amount of contribution \$	(Last Name)  200.00  kind contribution, provide a contribution on the line above de the word "estimate."  Biden	(First Name)  Office Candidate is a description of the good e for amount of contribu	s Seeking _ Governor of NH  ds or services provided, and enter the stion. If the actual cost is not known
Amount of contribution \$	(Last Name)  200.00  kind contribution, provide a contribution on the line above and the word "estimate."	(First Name)  Office Candidate is a description of the good e for amount of contribution of the good o	,

If the contribution is an in-kind contribution, provide a descr actual cost of the in-kind contribution on the line above for a	
enter an estimated value and the word "estimate."	•
	<u> </u>
(If more than three contributions were made, report additional contributions)	ributions on separate addendum C forms.)
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and here is true and complete to the best of my knowledge and b	•
Margaret Gilmone (Signature of lobbyist)	October 5, 2023
(Signature of lobbyist)	(Date)
Margaret Gilmour	
(Print Name of lobbyist)	

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

I. Name of Lobbyist(s)	Margaret Gilmour		
II. Name of lobbyist's pa	rtnership, firm or cor	poration, if any:	
Preti Strategies		<b>F,,</b>	
	rtnership, firm or corporation)		
III. Name of Client			Date October 5, 2023
Political Contributions For each political contrib client/lobbyist and lobbyi			ter 664 paid on behalf of the
Full name of candidate:	New Hampshir (Last Name)	e Young Democrats (First Name)	(Middle Name/Initial)
A	,	•	is Seeking
enter an estimated value and			ation. If the actual cost is not known,
Full name of candidate:	Nashua Democrat		
•	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$ _	150.00	Office Candidate i	s Seeking
If the contribution is an in-k actual cost of the in-kind co enter an estimated value and	ntribution on the line abov	a description of the good we for amount of contribu	ds or services provided, and enter the ation. If the actual cost is not known,
Eull name of condidate:	Pappas	Chris	
Full name of candidate:	Pappas (Last Name)	Chris (First Name)	(Middle Name/Initial)

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."		
Chica an estimated value and the word estimate.		
(If more than three contributions were made, report additional contribu	tions on separate addendum C forms.)	
Sworn Statement/Affirmation by Lobbyist		
I have read RSA 15, RSA 15-B and RSA 664 and hereby is true and complete to the best of my knowledge and believed.		
Margarett Gilmone (Signature of lobbyist)	October 5, 2023	
(Signature of lobbyist)	(Date)	
Margaret Gilmour		
(Print Name of lobbyist)		

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III. Name of Client	Preti Strategies			
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:    Brookline Democrats   (Middle Name/Initial)	(Name of partne	ership, firm or corporation)		
Full name of candidate:    Clast Name   Grist Name   Gris	III. Name of Client			Date October 5, 2023
(Last Name) (First Name) (Middle Name/Initial)  Amount of contribution \$ 44.00 Office Candidate is Seeking  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:  (Last Name) (First Name) (Middle Name/Initial)  Amount of contribution \$ Office Candidate is Seeking  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:	For each political contributi			oter 664 paid on behalf of the
Amount of contribution \$	Full name of candidate:	Brookline Dem	ocrats	
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:  (Last Name) (First Name) (Middle Name/Initial)  Amount of contribution \$  Office Candidate is Seeking  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:		(Last Name)	(First Name)	(Middle Name/Initial)
Full name of candidate:  (Last Name) (First Name) (Middle Name/Initial)  Amount of contribution \$Office Candidate is Seeking  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."	Amount of contribution \$4	4.00	Office Candidate	is Seeking
Amount of contribution \$Office Candidate is Seeking  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:	enter an estimated value and th	e word "estimate."		ition. If the actual cost is not known
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:				
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:	Full name of candidate:	(Last Name)	(First Name)	(Middle Name/Initial)
Full name of candidate:  (Last Name) (First Name) (Middle Name/Initial)	Full name of candidate:	(Last Name)	(First Name)	(Middle Name/Initial)
(Last Name) (First Name) (Middle Name/Initial)	Full name of candidate:  Amount of contribution \$  If the contribution is an in-kind actual cost of the in-kind contri	(Last Name) I contribution, provide ibution on the line above	(First Name) Office Candidate is a description of the good	(Middle Name/Initial) s Seeking ds or services provided, and enter the
	Full name of candidate: Amount of contribution \$ If the contribution is an in-kind actual cost of the in-kind contrienter an estimated value and the	(Last Name) I contribution, provide ibution on the line above word "estimate."	(First Name)  Office Candidate is a description of the good we for amount of contribution	(Middle Name/Initial) s Seeking ds or services provided, and enter the actual cost is not known

If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter t actual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not know enter an estimated value and the word "estimate."		
enter all estimated value and the word estimate.		
(If more than three contributions were made, report additional contr	ibutions on separate addendum C forms.)	
Sworn Statement/Affirmation by Lobbyist	•	
I have read RSA 15, RSA 15-B and RSA 664 and herel is true and complete to the best of my knowledge and b		
Tranquet Lilmon (Signature of lobbyist)	October 5, 2023	
(Signature of lobbyist)	(Date)	
Margaret Gilmour		
(Print Name of lobbyist)		