## STATE OF NEW HAMPSHIRE

## 2020 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

### PLEASE PRINT

I. Name of Lob	byist(s)	Curtis J. Barı	r <b>y</b>			
II. Name of lob	byist's partne	rship, firm or c	orporation, if a	ny:		
	Barry Gove	ernment Rela	ations, LLC			
-		nership, firm or co				······································
•	4 Park Stree	et, Suite 405	Concord	N.	Н.	03301
Business Address			(Town/City)	(State		(Zip Code)
(603)49	6-4564	( )		e-mail	Curtisa	@BarryGR.com
(Teleph	none)	( )	(Fax	)		<u></u>
reportable expe	ense transactio	ons which are n	ot attributable	to any one client).		file a separate report for following client:
<del></del>	(Full Na	ame of Client as it	appears on the Lo	obbyist Registration Form	1)	
<u>OR</u>						
All reportable unrelated to any			ncluding the lob	obyist's family), or the	lobbying f	īrm listed below which are
IV. Date of Rep	ort April 2	29, 2020		July 29, 2020	•	
Reports cover:	activity from d	ate of registration	to 3/31/20	activity from 4/1/20 to		
		er 28, 2020 🗸		January 27, 2		
	activity fr	om 7/1/20 to 9/30	/20	activity from 10/1/20	to 12/31/2	0
	cked, complete	just this form at		e transactions made he Secretary of State's		
VI. Check if ad-	ditional report	ts are attached:				
				file <b>Addendum A</b> - Fee	s and Exp	enses
	paid an honora			ou must file <b>Addendu</b> n		
✓ If you, your	firm, or your fa	amily has made	political contrib	utions, you must file A	ddendum.	C- Political Contributions
and complete to	15, RSA 15-B the best of my	, RSA 14-C and			that the for $\partial 7 -$	regoing information is true $\partial -\mathcal{O}$
Signature of lo	bb∲ist)	7			(Date)	
( sa	٠ ل راير	PARIZY	<i>,</i> 			RECEIVED
(Print Name of	lobbyist)	,—				OCT 2 g 2020

NEW HAMPSHIRE DEPARTMENT OF STATE

# STATE OF NEW HAMPSHIRE

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

RECEIVED

OCT 28 2020

NEW HAMPSHIRE

I. Name of Lobbyist(s)	Curtis J	Barry		DEPARTMENT OF STAT
II. Name of lobbyist's par	rtnership, firm or cor	rporation, if any:		
-	y Government Rela	-		
	tnership, firm or corporation)			
III. Name of Client			Date	October 27, 2020
Political Contributions For each political contribu client/lobbyist and lobbyir	ng firm, indicate the fo		-	
Full name of candidate: _				
	(Last Name)	(First Name)	(Middl	e Name/Initial)
Amount of contribution \$	100	Office Candidate	is Seeking	State Representativ
	<del> </del>			
Full name of candidate: _	Senate (Last Name)			ee e Name/Initial)
Amount of contribution \$	•	(First Name) Office Candidate i	•	•
If the contribution is an in-ki actual cost of the in-kind con enter an estimated value and	tribution on the line abo	ve for amount of contrib	oution. If the	
·				
Full name of candidate: _		to Elect House Re	_	
Full name of candidate: _	Committee (Last Name)	to Elect House Re (First Name)	_	le Name/Initial)

If the contribution is an in-kind contribution, provide a des actual cost of the in-kind contribution on the line above for enter an estimated value and the word "estimate."	
	·
(If more than three contributions were made, report additional con	ntributions on separate addendum C forms.)
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and her is true and complete to the best of my knowledge and	•
(Signature of lobbyist)	<u> 10 - 27 − 20</u> (Date)
CURTUJ. BARRY	
(Print Name of lobbyist)	