### STATE OF NEW HAMPSHIRE

## 2018 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

PLEASE PRINT

l. Name of Lobb	yist(s) Karen	Soucy			
II. Name of lobb	yist's partnership	o, firm or corporation, if a	any:		
Bianco Pro	fessional Assoc	eiation			
	(Name of partnersh	ip, firm or corporation)			
18 Centre S	Street	Concord	NH	03301	
Business Address:	(Street)	(Town/City)	(State)	(Zip Code)	
(603) 225-717	0	(603) 226-0165	e-mail ksoud	e-mail ksoucy@biancopa.com	
(Telepho	one)	(Fax)			
reportable expe	nse transactions v	vhich are not attributable		n may file a separate report for o the following client:	
 <u>OR</u>	(Full Name o	of Client as it appears on the L	obbyist Registration Form)		
		e lobbyist (including the lo	bbyist's family), or the lobby	ying firm listed below which are	
IV. Date of Repo	•	018 X f registration to 3/31/18	July 25, 2018 activity from 4/1/18 to 6/36	0/18	
	October 31 activity from 7	1, 2018	January 30, 2019 activity from 10/1/18 to 12		
	cked, complete just		e transactions made sinc the Secretary of State's Offic		
VI. Check if add	litional reports ar	e attached:			
	-		file Addendum A- Fees and	d Expenses	
☐ If you have p Expense Reimbur		or reimbursed expenses, y	ou must file Addendum B-	Report of Honorariums or	
If you, your f	firm, or your famil	y has made political contrib	outions, you must file Adder	ndum C– Political Contributions	
I have read RSA	nt/Affirmation by 15, RSA 15-B, RS the best of my know	A 14-C and RSA 664 and l		he foregoing information is true	
ħ.			April 25, 201		
(Signature of lob	by st)		(	Date)	
Karen Soucy	<u> </u>				
(Print Name of le	obbyist)			RECEIVED	

APR 25 2018

NEW HAMPSHIRE DEPARTMENT OF STATE

# STATE OF NEW HAMPSHIRE

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

I. Name of Lobbyist(s) Karen N. Soucy						
II. Name of lobbyist's partnership, firm or corporation, if any:						
Bianco Professional Association						
(Name of partnership, firm or corporation)  III. Name of Client Date						
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:	Committee to Elec	t House Democrats (First Name)	(Middle Name/Initial)			
Amount of contribution \$	30.00	Office Candidate i	s Seeking			
	tribution on the line above		ds or services provided, and enter the ution. If the actual cost is not known,			
Full name of candidate: _	(Last Name)	(First Name)	(Middle Name/Initial)			
Amount of contribution \$			(**************************************			
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:			(Middle Name/Initial)			
Amount of contribution \$						

If the contribution is an in-kind contribution, provide a descripactual cost of the in-kind contribution on the line above for an enter an estimated value and the word "estimate."	ption of the goods or services provided, and enter the mount of contribution. If the actual cost is not known,				
(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.					
(Signature of Tobbyist)  Karen N. Soucy	April 25, 2018 (Date)				
(Print Name of lobbyist)					