STATE OF NEW HAMPSHIRE

2019 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

PLEASE PRINT

RECEIVED

JAN 3 0 2020

I. Name of Lobbyist(3411 0 0 2020		
II. Name of lobbyist	NEW HAMPSHIRE DEPARTMENT OF STATE		
Bianco Professio	onal Association		
(Nai	me of partnership, firm or corporation)	•	
18 Centre Street	Concord	NH	03301
Business Address: (St	reet) (Town/City)	(State)	(Zip Code)
(603) 225-7170	(603) 226-0165	e-mail_attys@bianc	opa.com_
(Telephone)	(Fa	ux)	
reportable expense t	overs: (Choose one – file separate repransactions which are not attributable	e to any one client).	
All reportable trar	sactions occurring in the months prior t		owing client:
-	NH Association of S	· · · · · · · · · · · · · · · · · · ·	
OR	(Full Name of Client as it appears on the	Lobbyist Registration Form)	
	sactions by the lobbyist (including the k	obbyist's family), or the lobbying firm	listed below which are
IV. Date of Report Reports cover: activ	April 24, 2019 wity from date of registration to 3/31/19	July 31, 2019	
	October 30, 2019 activity from 7/1/19 to 9/30/19	January 29, 2020 🛭 activity from 10/1/19 to 12/31/19	
	n no fees received and no reportab complete just this form and submit it to		
VI. Check if addition	nal reports are attached:		
	ved fees or made expenditures, you must	t file Addendum A- Fees and Expense	es
	an honorarium or reimbursed expenses,		
☐ If you, your firm,	or your family has made political contri	ibutions, you must file Addendum C-	Political Contributions
I have read RSA 15, F	firmation by Lobbyist RSA 5-B, PSA 14-C and RSA 664 and est of my knowledge and belief.	hereby swear or affirm that the forego	ing information is true
		1/29/2020	
(Signature of lobbyis	1)//	(Date)	 -
James J. Bianco), Jr.		
(Print Name of lobby			

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.

PECEIVED JAN 3 0 2020 NEW HAMPSHIRE DEPARTMENT OF STATE

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

Name of Lobbying partnership,	firm, or corpo	_{ration:} Bianco Professi	onal Association	_
Name of Client (leave blank if particular client): NH Associa			corporation and not related to ar	у -
Date of Report (check one):				
April 24, 2019	31, 2019 🗆	October 30, 2019 🗆	January 29, 2020 🙀	
· · · · · · · · · · · · · · · · · · ·	,		nd Expenses described above, ar umber of Addendum forms beir	
Addendum A(s).				
Addendum B(s).				
Addendum C(s).				
I hereby swear or affirm that the complete to the best of my known	~ ~		nt and each Addendum is true ar	d
UM DB.			1/29/2020	
(Signature of lobbyist)			(Date)	
Aiden O'Brien				
(Print Name of lobbyist)				
		วเ ส *์		