STATE OF NEW HAMPSHIRE

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

PLEASE PRINT

I. Name of Lobbyist(s) ROBERT J. SCULLEY

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

N.H. MOTOR TRANSPORT ASSOCIATION
(Name of partnership, firm or corporation)

III. Name of Client N.H. MOTOR TRANSPORT ASSN Date 4-26-4

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: FORRESTER JEANNE
(Last Name) (First Name) (Middle Name/Initial)

Amount of contribution $ 150.00 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: N.H. SENATE DEMOCRATIC CAUCUS
(Last Name) (First Name) (Middle Name/Initial)

Amount of contribution $ 500.00 / 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: WHITE RAY
(Last Name) (First Name) (Middle Name/Initial)

Amount of contribution $ 100.00 / STATE SENATE

(turn over to continue →)

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."

_____

_____

(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 lobbyist) _____ (Date) 4-26-4

Robert J. Saulley
(Print Name of lobbyist)

STATE OF NEW HAMPSHIRE

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

PLEASE PRINT

I. Name of Lobbyist(s) ROBERT J. SCULLEY

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

N.H. MOTOR TRANSPORT ASSOCIATION
(Name of partnership, firm or corporation)

III. Name of Client N.H. MOTOR TRANSPORT ASSN Date 4-26-4

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: PRESCOTT (Last Name) RUSSELL (First Name) (Middle Name/Initial)

Amount of contribution $ 100.00 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: FORSYTHE (Last Name) JIM (First Name) (Middle Name/Initial)

Amount of contribution $ 150.00

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: GROEN (Last Name) FENTON (First Name) (Middle Name/Initial)

Amount of contribution $ 100.00 / STATE SENATE

(turn over to continue →)

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."

_____

_____

(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 lobbyist) 4-26-11 (Date)

Robert J. Saulley
(Print Name of lobbyist)

STATE OF NEW HAMPSHIRE

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

PLEASE PRINT

I. Name of Lobbyist(s) ROBERT J. SCULLY

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

N.H. MOTOR TRANSPORT ASSOCIATION
(Name of partnership, firm or corporation)

III. Name of Client N.H. MOTOR TRANSPORT ASSN Date 4-26-4

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: REPUBLICAN SENATE MAJORITY
(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: _____
(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: _____
(Last Name) (First Name) (Middle Name/Initial)

Amount of contribution $ _____

(turn over to continue →)

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."

_____

_____

(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 lobbyist) 4-20-11 (Date)

Robert J. Scalley
(Print Name of lobbyist)