



STATE OF NEW HAMPSHIRE

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

RECEIVED

APR 16 2013

NEW HAMPSHIRE DEPARTMENT OF STATE

I. Name of Lobbyist(s) Robert E. Clegg, Debra J. Vanderbeek, Abigail Karoutas, Kaitlyn Smith, Leann Moccia

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

Legislative Solutions, L.L.C.

(Name of partnership, firm or corporation)

III. Name of Client Date 4/16/13

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: NH Senate Democratic Caucus (Last Name) (First Name) (Middle Name/Initial)

Amount of contribution \$ 250.00 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: Kelly Molly (Last Name) (First Name) (Middle Name/Initial)

Amount of contribution \$ 250.00

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: David Pierce (Last Name) (First Name) (Middle Name/Initial)

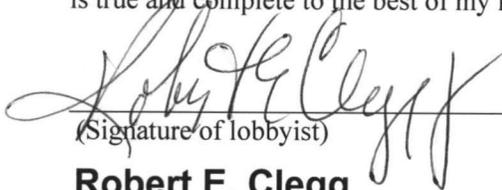
Amount of contribution \$ 250.00

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."

(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)

4/16/13

(Date)

Robert E. Clegg

(Print Name of lobbyist)



STATE OF NEW HAMPSHIRE

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

P I. Name of Lobbyist(s) Robert E. Clegg, Debra J. Vanderbeek, Abigail Karoutas, Kaitlyn Smith, Leann Moccia

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

Legislative Solutions, L.L.C.

(Name of partnership, firm or corporation)

P III. Name of Client Date 4/16/13

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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 Russell
(Last Name) (First Name) (Middle Name/Initial)

Amount of contribution \$ 500.00 Office Candidate is Seeking 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: Fuller Clark Martha
(Last Name) (First Name) (Middle Name/Initial)

Amount of contribution \$ 250.00

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: Lasky Bette
(Last Name) (First Name) (Middle Name/Initial)

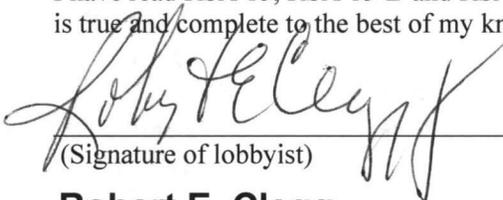
Amount of contribution \$ 500.00

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."

(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)

4/14/13

(Date)

Robert E. Clegg

(Print Name of lobbyist)



STATE OF NEW HAMPSHIRE

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

I. Name of Lobbyist(s) Robert E. Clegg, Debra J. Vanderbeek, Abigail Karoutas, Kaitlyn Smith, Leann Moccia

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

Legislative Solutions, L.L.C.

(Name of partnership, firm or corporation)

III. Name of Client Date 4/16/13

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: Gilmour Peggy (Last Name) (First Name) (Middle Name/Initial)

Amount of contribution \$ 500.00 Office Candidate is Seeking 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: Soucy Donna (Last Name) (First Name) (Middle Name/Initial)

Amount of contribution \$ 500.00

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: Watters David (Last Name) (First Name) (Middle Name/Initial)

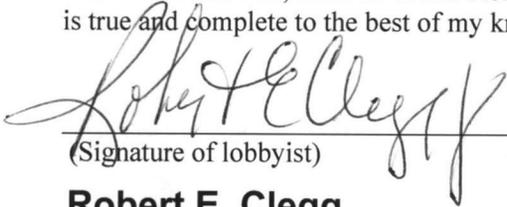
Amount of contribution \$ 250.00

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."

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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)

4/16/13

(Date)

Robert E. Clegg

(Print Name of lobbyist)



STATE OF NEW HAMPSHIRE

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

P I. Name of Lobbyist(s) Robert E. Clegg, Debra J. Vanderbeek, Abigail Karoutas, Kaitlyn Smith, Leann Moccia

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

Legislative Solutions, L.L.C.

(Name of partnership, firm or corporation)

P III. Name of Client Date 4/16/13

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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: Hosmer Andrew (Last Name) (First Name) (Middle Name/Initial)

Amount of contribution \$ 250.00 Office Candidate is Seeking 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: Stiles Nancy (Last Name) (First Name) (Middle Name/Initial)

Amount of contribution \$ 1000.00

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: Cataldo Sam (Last Name) (First Name) (Middle Name/Initial)

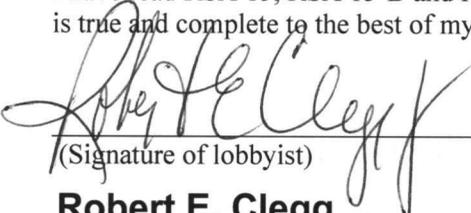
Amount of contribution \$ 500.00

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."

(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)

4/16/13

(Date)

Robert E. Clegg

(Print Name of lobbyist)



STATE OF NEW HAMPSHIRE

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

P I. Name of Lobbyist(s) Robert E. Clegg, Debra J. Vanderbeek, Abigail Karoutas, Kaitlyn Smith, Leann Moccia

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

A Legislative Solutions, L.L.C.

S (Name of partnership, firm or corporation)

P III. Name of Client Date 4/16/13

R Political Contributions

I 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: Reagan John (Last Name) (First Name) (Middle Name/Initial)

Amount of contribution \$ 500.00 Office Candidate is Seeking 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: Carson Sharon (Last Name) (First Name) (Middle Name/Initial)

Amount of contribution \$ 1000.00

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: Morse Chuck (Last Name) (First Name) (Middle Name/Initial)

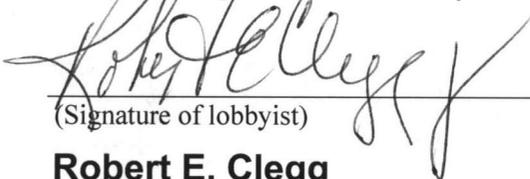
Amount of contribution \$ 1000.00

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."

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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)

4/14/13

(Date)

Robert E. Clegg

(Print Name of lobbyist)



STATE OF NEW HAMPSHIRE

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I. Name of Lobbyist(s) Robert E. Clegg, Debra J. Vanderbeek, Abigail Karoutas, Kaitlyn Smith, Leann Moccia

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

Legislative Solutions, L.L.C.

(Name of partnership, firm or corporation)

III. Name of Client Date 4/16/13

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 Jeannie (Last Name) (First Name) (Middle Name/Initial)

Amount of contribution \$ 250.00 Office Candidate is Seeking 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: D'Allesandro Lou (Last Name) (First Name) (Middle Name/Initial)

Amount of contribution \$ 500.00

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: Odell Bob (Last Name) (First Name) (Middle Name/Initial)

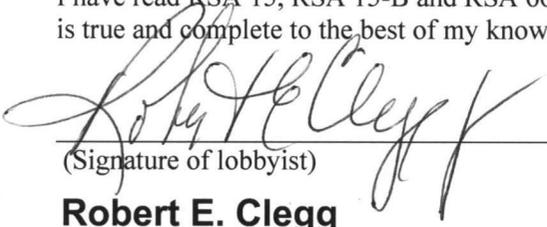
Amount of contribution \$ 250.00

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."

(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)

4/14/13

(Date)

Robert E. Clegg

(Print Name of lobbyist)



STATE OF NEW HAMPSHIRE

Lobbyists Report of Political Contributions

Addendum C (RSA Chapter 15:6)

P I. Name of Lobbyist(s) Robert E. Clegg, Debra J. Vanderbeek, Abigail Karoutas, Kaitlyn Smith, Leann Moccia

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

A Legislative Solutions, L.L.C.
S (Name of partnership, firm or corporation)

P III. Name of Client Date 4/10/13

R I Political Contributions

N 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: Larsen Sylvia
(Last Name) (First Name) (Middle Name/Initial)

Amount of contribution \$ 500.00 Office Candidate is Seeking 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: Committee to Elect House Democrats
(Last Name) (First Name) (Middle Name/Initial)

Amount of contribution \$ 250.00

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:
(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."

(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)

4/10/13

(Date)

Robert E. Clegg

(Print Name of lobbyist)

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.

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

Name of Lobbying partnership, firm, or corporation: Legislative Solutions, L.L.C.

Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any particular client): _____

Date of Report (check one):

April 25, 2012 July 25, 2012 October 31, 2012 January 30, 2013

I have read RSA 15, RSA 15-B, RSA 664, the Statement of Income and Expenses described above, and the following Addendums submitted with that Statement (insert the number of Addendum forms being submitted):

_____ Addendum A(s).

_____ Addendum B(s).

_____ Addendum C(s).

I hereby swear or affirm that the foregoing information on the Statement and each Addendum is true and complete to the best of my knowledge and belief.



(Signature of lobbyist)

4/16/13

(Date)

Debra J. Vanderbeek

(Print Name of lobbyist)

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.

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

Name of Lobbying partnership, firm, or corporation: Legislative Solutions, L.L.C.

Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any
particular client): _____

Date of Report (check one):

April 25, 2012 July 25, 2012 October 31, 2012 January 30, 2013

I have read RSA 15, RSA 15-B, RSA 664, the Statement of Income and Expenses described above, and
the following Addendums submitted with that Statement (insert the number of Addendum forms being
submitted):

_____ Addendum A(s).

_____ Addendum B(s).

_____ Addendum C(s).

I hereby swear or affirm that the foregoing information on the Statement and each Addendum is true and
complete to the best of my knowledge and belief.

Abigail Karoutas
(Signature of lobbyist)

Apr 16 2013
(Date)

Abigail Karoutas
(Print Name of lobbyist)

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.

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

Name of Lobbying partnership, firm, or corporation: Legislative Solutions, L.L.C.

Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any
particular client): _____

Date of Report (check one):

April 25, 2012 July 25, 2012 October 31, 2012 January 30, 2013

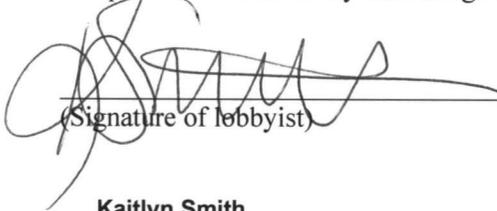
I have read RSA 15, RSA 15-B, RSA 664, the Statement of Income and Expenses described above, and
the following Addendums submitted with that Statement (insert the number of Addendum forms being
submitted):

_____ Addendum A(s).

_____ Addendum B(s).

_____ Addendum C(s).

I hereby swear or affirm that the foregoing information on the Statement and each Addendum is true and
complete to the best of my knowledge and belief.



(Signature of lobbyist)

4/16/13

(Date)

Kaitlyn Smith

(Print Name of lobbyist)

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.

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

Name of Lobbying partnership, firm, or corporation: Legislative Solutions, L.L.C.

Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any
particular client): _____

Date of Report (check one):

April 25, 2012 July 25, 2012 October 31, 2012 January 30, 2013

I have read RSA 15, RSA 15-B, RSA 664, the Statement of Income and Expenses described above, and
the following Addendums submitted with that Statement (insert the number of Addendum forms being
submitted):

_____ Addendum A(s).

_____ Addendum B(s).

_____ Addendum C(s).

I hereby swear or affirm that the foregoing information on the Statement and each Addendum is true and
complete to the best of my knowledge and belief.

Leann Moccia
(Signature of lobbyist)

16 April 2013
(Date)

Leann Moccia
(Print Name of lobbyist)