



STATE OF NEW HAMPSHIRE
Lobbyists Report of
Political Contributions
Addendum C
(RSA Chapter 15:6)

RECEIVED

APR 11 2013

NEW HAMPSHIRE
DEPARTMENT OF STATE

P I. Name of Lobbyist(s) Stuart D. Trachy

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

(Name of partnership, firm or corporation)

E III. Name of Client _____ Date April 8, 2013

A **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:

S

Full name of candidate: Hosmer Andrew
(Last Name) (First Name) (Middle Name/Initial)

Amount of contribution \$ 100. 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: Stiles Nancy
(Last Name) (First Name) (Middle Name/Initial)

Amount of contribution \$ 100 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: D'Allesandro Lou
(Last Name) (First Name) (Middle Name/Initial)

Amount of contribution \$ 100 Office Candidate is Seeking state senate

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(If more than three contributions were made, report additional contributions on separate addendum C forms.)



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 (Name of partnership, firm or corporation)

III. Name of Client _____ Date April 8, 2013

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Full name of candidate: Woodburn Jeff
 (Last Name) (First Name) (Middle Name/Initial)

Amount of contribution \$ 100. 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: Sanborn Andy
 (Last Name) (First Name) (Middle Name/Initial)

Amount of contribution \$ 100 Office Candidate is Seeking state senate

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Full name of candidate: Soucy Donna
 (Last Name) (First Name) (Middle Name/Initial)

Amount of contribution \$ 100 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".

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N firm, indicate the following:
T _____

Full name of candidate: Larsen Sylvia
(Last Name) (First Name) (Middle Name/Initial)

Amount of contribution \$ 100. 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: Merrifield Ken
(Last Name) (First Name) (Middle Name/Initial)

Amount of contribution \$ 100 Office Candidate is Seeking Mayor

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 \$ _____ 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".

(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.

Stuart D. Trachy
(Signature of lobbyist)

April 8, 2013
(Date)

Stuart D. Trachy
(Print Name of lobbyist)

State of New Hampshire
County of _____

Signed and sworn to (or affirmed) before me on _____ by _____

(Signature of notarial officer)

seal

My commission expires: _____