



STATE OF NEW HAMPSHIRE

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

P I. Name of Lobbyist(s) Paula Rogers

L II. Name of lobbyist's partnership, firm or corporation, if any: Anthem Health Plans of New Hampshire

E III. Name of Client Anthem Health Plans of New Hampshire Date 07/16/2014

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:

Full name of candidate: Sanborn Andy (Last Name) (First Name) (Middle Name/Initial) Amount of contribution \$ 250.00 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: Sununu Chris (Last Name) (First Name) (Middle Name/Initial) Amount of contribution \$ 250.00 Office Candidate is Seeking NH Executive Council

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: Bradley Jeb (Last Name) (First Name) (Middle Name/Initial) Amount of contribution \$ 250.00 Office Candidate is Seeking State Senate

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STATE OF NEW HAMPSHIRE

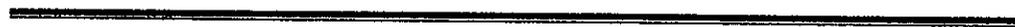
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Full name of candidate: Pappas Chris (Last Name) (First Name) (Middle Name/Initial) Amount of contribution \$ 250.00 Office Candidate is Seeking NH Executive Council

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Full name of candidate: Committee to Elect House Democrats (Last Name) (First Name) (Middle Name/Initial) Amount of contribution \$ 250.00 Office Candidate is Seeking State House

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

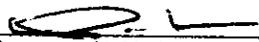
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(If more than three contributions were made, report additional contributions on separate addendum C forms.)

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)

Paula Rogers

(Print Name of lobbyist)

July 16 2014

(Date)