



STATE OF NEW HAMPSHIRE

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

P I. Name of Lobbyist(s) Geoffrey A. Gallo

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

E AstraZeneca Pharmaceuticals, LP (Name of partnership, firm or corporation)

A III. Name of Client AstraZeneca Pharmaceuticals, LP Date 10/13/2015

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: Bradley Jeb (Last Name) (First Name) (Middle Name/Initial)

Amount of contribution \$ 750 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: Morse Chuck (Last Name) (First Name) (Middle Name/Initial)

Amount of contribution \$ 1,000 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: Hassan Maggie (Last Name) (First Name) (Middle Name/Initial)

Amount of contribution \$ 500 Office Candidate is Seeking Governor



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E AstraZeneca Pharmaceuticals, LP (Name of partnership, firm or corporation)

A III. Name of Client AstraZeneca Pharmaceuticals, LP Date 10/13/2015

R Political Contributions

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Full name of candidate: Sanborn Andy (Last Name) (First Name) (Middle Name/Initial)

Amount of contribution \$ 250 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 \$ 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: (Last Name) (First Name) (Middle Name/Initial)

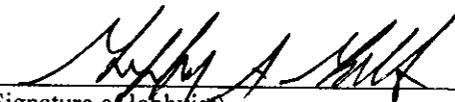
Amount of contribution \$ Office Candidate is Seeking

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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)

22 Oct 2015
(Date)

Geoffrey A. Gallo

(Print Name of lobbyist)