

STATE OF NEW HAMPSHIRE

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

	VIM ME	Serill	
II. Name of lobbyist's pa	artnership, firm or corp	oration, if any:	
THE BE	ENSTEN SH	UR FROUP	
(Name of p	artnership, firm or corporation)	012 01201	
III. Name of Client			Date March 5 Zi
Political Contributions For each political contrib client/lobbyist and lobby		-	664 paid on behalf of the
Full name of candidate:	Sunun U (Last Name)	CHRIS (First Name)	(Middle Name/Initial)
Amount of contribution \$ _	250 (BSSN	Office Candidate is S	eeking Governor
enter an estimated value and		c to amount of contribute	on. If the actual cost is not known,
Full name of candidate:	Sununu (Last Name)	CHais (First Name)	(Middle Name/Initial)
Full name of candidate: Amount of contribution \$			(Middle Name/Initial) eeking Governor
Amount of contribution \$ _ If the contribution is an in-k	kind contribution, provide a ontribution on the line above	Office Candidate is Se	
Amount of contribution \$ _ If the contribution is an in-kactual cost of the in-kind co	kind contribution, provide a ontribution on the line above	Office Candidate is Se	or services provided, and enter the
Amount of contribution \$ _ If the contribution is an in-kactual cost of the in-kind co	kind contribution, provide a ontribution on the line above	Office Candidate is Se	or services provided, and enter the

If the contribution is an in-kind contribution, provide a de actual cost of the in-kind contribution on the line above fo	
enter an estimated value and the word "estimate."	
(If more than three contributions were made, report additional co	intributions on separate addendum C forms.)
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and he is true and complete to the best of my knowledge and	
(Signature of lobbyist)	April 25, 2018
(Print Name of lobbyist)	(=,