



STATE OF NEW HAMPSHIRE
2014 Statement of Income and Expenses
for LOBBYISTS
(RSA Chapter 15)

PLEASE PRINT

RECEIVED

I. Name of Lobbyist(s) Don Baldini

NOV 24 2014

II. Name of lobbyist's partnership, firm or corporation, if any:
Liberty Mutual Insurance
(Name of partnership, firm or corporation)

NEW HAMPSHIRE
 DEPARTMENT OF STATE

175 Berkeley St Boston, MA 02116
 Business Address: (Street) (Town/City) (State) (Zip Code)

(617) 357-9500 (617) 574-5783 e-mail donald.baldini@libertymutual.com
(Telephone) (Fax)

III. This statement covers: (Choose one – file separate reports for each client, OR you may file a separate report for reportable expense transactions which are not attributable to any one client).

All reportable transactions occurring in the months prior to the reporting date relative to the following client:
Liberty Mutual Insurance
(Full Name of Client as it appears on the Lobbyist Registration Form)

OR

All reportable transactions by the lobbyist (including the lobbyist's family), or the lobbying firm listed below which are unrelated to any particular client.

IV. Date of Report April 30, 2014 July 30, 2014
 Reports cover: activity from date of registration to 3/31/14 activity from 4/1/14 to 6/30/14
 October 29, 2014 January 28, 2015
 activity from 7/1/14 to 9/30/14 activity from 10/1/14 to 12/31/14

V. There have been no fees received and no reportable transactions made since the last report.
 If this box is checked, complete just this form and submit it to the Secretary of State's Office, State House, Room 204, Concord, NH 03301.

VI. Check if additional reports are attached:
 If you have received fees or made expenditures, you must file **Addendum A**– Fees and Expenses
 If you have paid an honorarium or reimbursed expenses, you must file **Addendum B**– Report of Honorariums or Expense Reimbursement
 If you, your firm, or your family has made political contributions, you must file **Addendum C**– Political Contributions

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.

Donald F. Baldini
 (Signature of lobbyist)

10-22-2014
 (Date)

DONALD F. BALDINI
 (Print Name of lobbyist)



Liberty Mutual Insurance

BRIAN MONTEIRO
Director, Public Affairs
175 Berkeley Street – Mail Stop J09H
Boston, MA 02116
Telephone: (617) 654-4247
Fax: (617) 574-5783
Email: brian.monteiro@libertymutual.com

October 22, 2014

Elections Division
Office of the Secretary of State
107 N. Main Street
State House, Room 204
Concord, NH 03301

Re: Q3 Statement of Income and Expenses

Dear Sir or Madam:

Enclosed please find the above referenced report for our in-house lobbyist, Donald Baldini, covering activity from 7/1/14 through 9/30/14.

Should you have any questions, or require further information, please call me at 617-654-4247.

Sincerely,

Brian Monteiro
Director of Public Affairs

Enclosure