

STATE OF NEW HAMPSHIRE

2018 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

PLEASE PRINT

1. Name of Lobbyist	t(s)	ance l	Vallone	<u>د</u>		· · · · · · · · · · · · · · · · · · ·	
II. Name of lobbyist	t's partnership, fi	rm or corpo	ration, if any	/ :			
_	And His	-	•		ire		
Business Address: (S						NH	03301
Business Address: (S	Street)	(T)	own/City)		(State)		(Zip Code)
(401) 715 (Telephone)	- 9696	()	(Fax)		e-mail dang	greau	<u>hước his</u> hornh.
III. This statement or reportable expense						ay file a s	eparate report for
	ansactions occurrin	g in the mon	ths prior to th	e reportir	ng date relative to the	he followi	ng client:
OR	(Full Name of Cl	lient as it appe	ars on the Lobl	oyist Regis	stration Form)		
☐ All reportable tranunrelated to any parti		bbyist (inclu	ding the lobby	yist's fam	ily), or the lobbyin	g firm list	ed below which are
IV. Date of Report	April 25, 2018	April 25, 2018		July 25, 2018 □			
Reports cover: acti	vity from date of registration to 3/31/18						
	October 31, 2018 activity from 7/1/18 to 9/30/18			January 30, 2019 (A) activity from 10/1/18 to 12/31/18			
V. There have bee If this box is checked Concord, NH 03301.	l, complete just this						
VI. Check if additio	onal reports are a	ttached:					
	-		, you must file	e Addeno	lum A— Fees and E	Expenses	
☐ If you have paid Expense Reimbursen		reimbursed e	expenses, you	must file	Addendum B- Ro	eport of H	onorariums or
☐ If you, your firm	ı, or your family ha	as made polit	cical contribut	ions, you	must file Addend	um C– Po	litical Contributions
Sworn Statement/A I have read RSA 15, and complete to the b	RSA 15-B, RSA 1	4-C and RSA		eby swea	r or affirm that the	foregoing	information is true
Bis Va					12/	lo	
(Signature of lobbyi	st)		_	_	<u>ゆ/は/</u> (Da	ite)	
	Vallora						
(Print Name of lobb	yist)						