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NEW HAMPSHIRE  
DEPARTMENT OF STATE

*State of New Hampshire*  
*Signature Form for Associated Lobbyist*  
*RSA Chapter 15*

Use this form to swear or affirm the truth and completeness of  
Income and Expense Statements and related Addendums.

**Sworn Statement/Affirmation by Lobbyist**  
**Statement of Income and Expenses for:**

Name of Lobbying partnership, firm, or corporation: Bianco Professional Association

Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any  
particular client): Burgess Bio Power, LLC.

*Date of Report (check one):*

April 24, 2019       July 31, 2019       October 30, 2019       January 29, 2020

I have read RSA 15, RSA 15-B, RSA 664, the Statement of Income and Expenses described above, and  
the following Addendums submitted with that Statement (insert the number of Addendum forms being  
submitted):

0 Addendum A(s).

\_\_\_\_\_ Addendum B(s).

\_\_\_\_\_ Addendum C(s).

I hereby swear or affirm that the foregoing information on the Statement and each Addendum is true and  
complete to the best of my knowledge and belief.

Thomas Colantuono  
(Signature of lobbyist)

1/29/2020  
(Date)

Thomas Colantuono  
(Print Name of lobbyist)