STATE OF NEW HAMPSHIRE

2016 Statement of Income and Expenses for LOBBYISTS

(RSA Chapter 15)

PLEASE PRINT

I. Name of Lobbyi	st(s) <u>Q</u>	hard	Box	lux		
II. Name of lobbyi	st's partnership, firm or co			ď		
D	ennehy (Boul	ey, 1	LLC	11.0	
Business Address:	Depot St	Con((Town/City)		N H (State)	033	(Zip Code)
() 228 (Telephone	()	228-4 (Fa:	x)	_ e-mail		
III. This statement reportable expense	covers: (Choose one – file stransactions which are not	scparate repo t attributable	orts for each	ı client, OR you client).	may file a	separate report for
All reportable tr	ansactions occurring in the n	nonths prior to	the reportin	ng date relative t	to the follow	ing client:
	Whi	H Mr	nnta	en Bi	o Dres	Q
OR	(Full Name of Client as it a	ppears on the L	obbyist Regis	tration Form)		
	nsactions by the lobbyist (incicular client.	cluding the lo	bbyist's fam	ily), or the lobb	ying firm lis	led below which are
IV. Date of Report Reports cover: act	April 27, 2016 (ivity from date of registration t	o 3/31/16		ly 27, 2016 []	0/16	
	October 27, 2016 activity from 7/1/16 to 9/30/1	6	Jai <i>activity fi</i>	nuary 25, 2017 rom 10/1/16 to 12	X 2/31/16	
V. There have been fithis box is checked Concord, NH 03301.	en no fees received and n l, complete just this form and	o reportable submit it to to	e transaction the Secretary	ons made since of State's Office	e the last r e, State Hou.	eport. Se, Room 204.
VI. Check if addition	nal reports are attached:					
☐ If you have recei	ved fees or made expenditur	es, you must t	file Addend i	um A- Fees and	d Expenses	
Expense Reimbursen						
I If you, your firm	, or your family has made po	llitical contrib	utions, you r	must file Adden	idum C – Po	litical Contributions
I have read RSA 15,	ffirmation by Lobbyist RSA 15-B, RSA 14-C and R sest of my knowledge and be	SA 664 and h lief.	ereby swear	or affirm that th	ne foregoing	information is true
(Signature of lobbyis	st)			([Date)	
Richard	Bonley					RECEIVED
(Print Name of lobby	/ISU)					JAN 25 2017

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 part	nership, firm, or corpo	oration: Dennet	ng & Borly
Name of Client (leave b	olank if Statement is fo	or the partnership, firm, or	corporation and not related to any
particular client):	White MH	- BIODUSE	?
Date of Report (check o	one):		
April 27, 2016 □	July 27, 2016 🗆	October 27, 2016 🗆	January 25, 2017
			nd Expenses described above, and umber of Addendum forms being
Addendum A(s).		
Addendum B(s)).		
Addendum C(s)) .		
I hereby swear or affirm complete to the best of			nt and each Addendum is true and
(Signature of lobbyist)	6		(Date)
ture (lark		
(Print Name of lobbyist			