

P L E A S E

P R I N T

STATE OF NEW HAMPSHIRE

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

JUL 2 3 2020

RECEIVED

NEW HAMPSHIRE DEPARTMENT OF STATE

I. Name of Lobbyist(s) Debra Vanderbeek, Robert Clegg, Periklis Karoutas, Chris Herr				
II. Name of lobbyist's parti	nership, firm or con	poration, if any:		
Legislative Soluti	ons, L.L.C.			
(Name of partne	rship, firm or corporation)			
III. Name of Client		Date July 17, 2020		
Political Contributions For each political contribution client/lobbyist and lobbying			oter 664 paid on behalf of the	
Full name of candidate:	Committee	to Elect House Republ		
	(Last Name)	(First Name)	(Middle Name/Initial)	
Amount of contribution § 250.	00	Office Candidate i	s Seeking	
Full name of candidate:	Morse (Last Name)	Chuck (First Name)	(Middle Name/Initial)	
500				
Amount of contribution S $\frac{500}{1}$	00	Office Candidate is	Seeking State Senator	
If the contribution is an in-kind actual cost of the in-kind contri- enter an estimated value and th	bution on the line abo	ve for amount of contrib	ds or services provided, and enter the ution. If the actual cost is not known,	
Full name of candidate:	(Last Name)	(First Name) Office Candidate is	(Middle Name/Initial)	
Amount of Controllouton 5		Cirror Candidate is		

If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter the actual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not known, enter an estimated value and the word "estimate."				
(If more than three contributions were made, report additional contributi	ons on separate addendum C forms.)			
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.				
ODAL	July 17, 2020			
(Signature of lobbyist)	(Date)			
Debra Vanderbeek				
(Print Name of lobbyist)				

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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 corpor	ration: Legislative Solutions, L.L.C.
Name of Client (leave blank if Statement is for	r the partnership, firm, or corporation and not related to any
particular client):	
Date of Report (check one):	
April 29, 2020 🗆 July 29, 2020 💆	October 28, 2020 January 27, 2021
I have read RSA 15, RSA 15-B, RSA 664, the following Addendums submitted with the submitted): Addendum A(s).	e Statement of Income and Expenses described above, and at Statement (insert the number of Addendum forms being
Addendum B(s).	
Addendum C(s).	
I hereby swear or affirm that the foregoing inf complete to the best of my knowledge and beli (Signature of lobbyist)	Formation on the Statement and each Addendum is true and lef. July 17, 2020 (Date)
Robert Clegg	
(Print Name of lobbyist)	

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, o	or corporation: Legislative Sc	olutions, L.L.C.
		rm, or corporation and not related to any
particular client):		
Date of Report (check one):		
April 29, 2020	0 💆 October 28, 2020	□ January 27, 2021 □
		ome and Expenses described above, and the number of Addendum forms being
Addendum A(s).		
Addendum B(s).		
Addendum C(s).		
I hereby swear or affirm that the foreg complete to the best of my knowledge		atement and each Addendum is true and
		July 17, 2020
(Signature of lobbyist)		(Date)
/		
Periklis Karoutas		
(Print Name of Johnvist)		

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 corpora	ation: Legislative Solutions, L.L.C.
	the partnership, firm, or corporation and not related to any
particular client):	
Date of Report (check one):	
April 29, 2020 □ July 29, 2020 ⊅	October 28, 2020 January 27, 2021 January 27, 2021
	Statement of Income and Expenses described above, and Statement (insert the number of Addendum forms being
Addendum A(s).	
Addendum B(s).	
Addendum C(s).	
I hereby swear or affirm that the foregoing info complete to the best of my knowledge and belie (Signature of lobbyist)	ormation on the Statement and each Addendum is true and ef. July 17, 2020 (Date)
(Signature of lobbyist)	(Date)
Chris Herr	
(Print Name of lobbyist)	