STATE OF NEW HAMPSHIRE

2020 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15) RECEIVED

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PLEASE PRINT

NEW HAMPSHIRE EPARTMENT OF STATE

DEPARTMENT)F 97
I. Name of Lobbyist(s) James Bouley & Michael Dennehy & Alexand	16 L
II. Name of lobbyist's partnership, firm or corporation, if any:	عمر
DENNEHY & ROULEY ILC	
(Name of partnership, firm or corporation)	
17 DEPOT ST., STE. 3 CONCORD NH 03301 Business Address: (Street) (Town/City) (State) (Zip Code)	i
(603 228-1601 () e-mail	
111. This statement covers: (Choose one - file separate reports for each client, OR you may file a separate report reportable expense transactions which are not attributable to any one client).	t for
All reportable transactions occurring in the months prior to the reporting date relative to the following client:	
Community Support Network Inc.	
(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 unrelated to any particular client.	n are
IV. Date of Report April 29, 2020 July 29, 2020	
Reports cover: activity from date of registration to 3/31/20 activity from 4/1/20 to 6/30/20	
October 28, 2020 January 27, 2021 activity from 7/1/20 to 9/30/20 activity from 10/1/20 to 12/31/20	
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, 107 North Main Street, 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	tions
Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15-B, RSA 14-C and RSA 664 and hereby swear or affirm that the foregoing information is and complete to the best of my knowledge and belief.	true
25/20	
(Signature of lobbyist) (Date)	
James Bouleu	
(Print Name of lobbyist)	

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$
f) Total of all expenses year to date	f) \$
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from l period, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
	\$
	\$
	\$
	\$
	\$
	\$
Sworn Statement/Affirmation by Lobbyist	·
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm	m that the foregoing information
is true and complete to the best of my knowledge and belief.	
_ bly	10/07/20
(Signature of lobbyist)	(Date)
James Bouley	
(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, or corporation:
Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any particular client):
Date of Report (check one):
April 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):
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. (Signature of lobbyist) (Date)
Michael Dennehu
(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, or corporation:
Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any particular client): Support Network Inc.
Date of Report (check one):
April 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):
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.
(Signature of lobbyist) (Date)
Alexander Koutroubas (Print Name of lobbyist)