STATE OF NEW HAMPSHIRE

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

PLEASE PRINT

		NIII C	LOIN GALLO
I. Name of Lobbyist(s)	KILA /VEWmo	in - IV IT GOVERN	ment Solutions Group, LLC
II. Name of lobbyist's	partnership, firm or corporati	on, if any:	
•	of partnership, firm or corporation		. 1111 222
	Main Street - So. (Town		
(603) 225-5 (Telephone)	134 (603) 224	$\frac{4-5724}{(Fax)}$ e-mail 1	rich Crich Newman com
	vers: (Choose one – file separa insactions which are not attrib		R you may file a separate report for
All reportable transa	actions occurring in the months	prior to the reporting date rela	ative to the following client:
Title (CASH OF ME (Full Name of Client as it appears	A Pro Conjector the Lobbyist Registration Form	LoBBying Foll
<u>OR</u>			
☐ All reportable transa unrelated to any particu		g the lobbyist's family), or the	lobbying firm listed below which are
IV. Date of Report	April 25, 2018 □	July 25, 201	8 🗆
Reports cover: activit	y from date of registration to 3/31/		
	October 31, 2018 2	January 30, 1 activity from 10/1/1	
) .	ctivity from // 1/10 to 9/30/10	uctivity from 10/1/2	
V. There have been If this box is checked, c Concord, NH 03301.	no fees received and no rep omplete just this form and subm	ortable transactions mad uit it to the Secretary of State's	e since the last report.
VI. Check if additions	al reports are attached:		
•	ed fees or made expenditures, yo		
Expense Reimburseme	nt		m B- Report of Honorariums or
☐ If you, your firm, o	or your family has made politica	l contributions, you must file	Addendum C- Political Contributions
(Signature of lobbyist)	SA 15-B, RSA 14-C and RSA 6 st of my knowledge and belief. Newman	64 and hereby swear or affirm	or that the foregoing information is true 15 18