

2015 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

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APR 29 2015

PLEASE PRINT

NEW HAMPSHIRE DEPARTMENT OF STATE

I. Name of Lobbyist(s) Robert B	E. Dunn, Jr.; Tere	sa Rosenberger;	George Dana Bisbee; Tho	omas B. Getz
II. Name of lobbyist's partners	hip, firm or corp	ooration, if any:		
D	evine, Millimet &	Branch, PA		
	ship, firm or corpo			
15 No. Mair	Street	Concord	NH	03301
Business Address: (Street)	(Town/City)	(State)	(Zip Code)
(603)226-1000	(603)_	226-1001	e-mail rdunn@de	vinemillimet.com
(Telephone)		(Fax)		_
III. This statement covers: (Che reportable expense transactions				ay file a separate report for
☐ All reportable transactions oc	curring in the mo	onths prior to the	reporting date relative to t	he following client:
N/A				<u>_</u>
(Full Nam	e of Client as it app	pears on the Lobby	st Registration Form)	
✓ All reportable transactions by unrelated to any particular client.	the lobbyist (incl	uding the lobbyis	it's family), or the lobbyin	g firm listed below which are
IV. Date of Report April 29	, 2015 🗹		July 29, 2015 🛚	
Reports cover: activity from date	e of registration to	3/31/15 a	ctivity from 4/1/15 to 6/30/1:	5
	28, 2015		January 27, 2016	1/16
асичну јгоп	1 7/1/15 to 9/30/15	í	activity from 10/1/15 to 12/3	7/13
V. There have been no fees r If this box is checked, complete ju Concord, NII 03301.				
VI. Check if additional reports	are attached:			
☐ If you have received fees or r		s, you must file A	Addendum A- Fees and E	xpenses
☐ If you have paid an honorariu Expense Reimbursement				
If you, your firm, or your fan	nily has made pol	litical contribution	ns, you must file Addendi	ım C- Political Contributions
Sworn Statement/Affirmation to I have read RSA 15, RSA 15-B a to the best of my knowledge and	nd RSA 664 and	hereby swear or a	affirm that the foregoing in	nformation is true and complete
	7		4/29/15	
(Signature of lebbyist)			(Da	ie)
Robert E. Dunn, Jr. (Print Name of lobbyist)		_		



I. Name of lobbyist's part	mersnip, tirm or cor	poration, it any:	
	Devine, Millimet	& Branch, PA	
(Name of partr	nership, firm or corporation)		
II. Name of Client N/A			Date
Political Contributions or each political contribut lient/lobbyist and lobbying	ion that is reportable g firm, indicate the fo	pursuant to RSA Chap llowing:	ter 664 paid on behalf of the
ull name of candidate:	Kenney (Last Name)	Joseph (First Name)	D. (Middle Name/Initial)
mount of contribution \$ 100	0	Office Candidate is	s Seeking _Executive Council
ctual cost of the in-kind cont	tribution on the line abo	ve for amount of contribu	ls or services provided, and enter ution. If the actual cost is not known
ctual cost of the in-kind cont nter an estimated value and t	tribution on the line abothe word "estimate." Forrester	ve for amount of contribu	ution. If the actual cost is not known
ctual cost of the in-kind cont nter an estimated value and t	tribution on the line abo the word "estimate."	Jeanie (First Name)	(Middle Name/Initial)
ctual cost of the in-kind continter an estimated value and t	ribution on the line abothe word "estimate." Forrester (Last Name)	Jeanie (First Name)	ution. If the actual cost is not known
ctual cost of the in-kind continter an estimated value and to the full name of candidate: Amount of contribution \$ _10 If the contribution is an in-kind continuation contribution continuation contribution contribution contribution is an in-kind contribution is an in-kind contribution cont	Forrester (Last Name) nd contribution, provide tribution on the line abo	Jeanie (First Name) Office Candidate is a description of the good	(Middle Name/Initial)
Enter an estimated value and the state of candidate: Amount of contribution \$ _10 fithe contribution is an in-kir	Forrester (Last Name) nd contribution, provide tribution on the line abo	Jeanie (First Name) Office Candidate is a description of the good	(Middle Name/Initial) Seeking State Senate ds or services provided, and enter

II. Name of lobbyist's partne	ership, firm or cor	poration, if any:	
	Devine, Millimet	& Branch, PA	
(Name of partner	ship, firm or corporation)		
III. Name of Client N/A			Date
Political Contributions For each political contributio client/lobbyist and lobbying			ter 664 paid on behalf of the
Full name of candidate:	Stiles (Last Name)	Nancy (First Name)	E(Middle Name/Initial)
Amount of contribution \$ 100		Office Candidate i	s Seeking State Senate
enter an estimated value and the	bution on the line abo e word "estimate."	ve for amount of control	ution. If the actual cost is not known
enter an estimated value and the	bution on the line abo	ve for amount of contrib	ution. If the actual cost is not known
enter an estimated value and the	e word "estimate."	Regina (First Name)	(Middle Name/Initial)
enter an estimated value and the	e word "estimate." Birdsell	Regina (First Name)	
Full name of candidate: Amount of contribution \$ 100	Birdsell (Last Name)	Regina (First Name) Office Candidate is a description of the good	(Middle Name/Initial) s Seeking <u>State Senate</u> ds or services provided, and enter th
Full name of candidate: Amount of contribution \$ 100 If the contribution is an in-kind actual cost of the in-kind contri	Birdsell (Last Name)	Regina (First Name) Office Candidate is a description of the good	(Middle Name/Initial)

II. Name of lobbyist's partn			
(Nama of norther	Devine, Millimet ship, firm or corporation)	& Branch, PA	
(Name of partner	ship, firm of corporation)		
II. Name of ClientN/A			Date
Political Contributions For each political contribution Elient/lobbyist and lobbying	on that is reportable firm, indicate the fo	pursuant to RSA Chap llowing:	ter 664 paid on behalf of the
full name of candidate:	Feltes (Last Name)	Dan (First Name)	(Middle Name/Initial)
Amount of contribution \$ 100		Office Candidate i	s Seeking State Senate
inter an estimated value and the	e word "estimate."	ve for amount of control	ution. If the actual cost is not kno
enter an estimated value and the	e word "estimate."		ution. If the actual cost is not kno
enter an estimated value and the	Soucy (Last Name)	Donna (First Name)	(Middle Name/Initial)
enter an estimated value and the	soucy	<u>Donna</u> (First Name)	
Full name of candidate: Amount of contribution \$ 100 If the contribution is an in-kind actual cost of the in-kind contri	Soucy (Last Name) contribution, provide bution on the line abo	Donna (First Name) Office Candidate is a description of the good	(Middle Name/Initial) s Seeking <u>State Senate</u> ds or services provided, and enter
Full name of candidate: Amount of contribution \$ 100	Soucy (Last Name) contribution, provide bution on the line abo	Donna (First Name) Office Candidate is a description of the good	`

	Devine, Millimet	& Branch, PA	
(Name of partners	ship, firm or corporation)		
II. Name of ClientN/A			Date
Political Contributions For each political contribution client/lobbyist and lobbying f			ter 664 paid on behalf of the
Full name of candidate:	Watters (Last Name)	David (First Name)	H (Middle Name/Initial)
Amount of contribution \$ 100		Office Candidate i	s Seeking State Senate
	Locky	Rotte	
Full name of candidate:	Lasky (Last Name)	Bette (First Name)	(Middle Name/Initial)
		(First Name)	(Middle Name/Initial) s Seeking <u>State Senate</u>
Full name of candidate: Amount of contribution \$ 100 If the contribution is an in-kind actual cost of the in-kind contributer an estimated value and the	(Last Name) contribution, provide	(First Name) Office Candidate is a description of the good	s Seeking State Senate ds or services provided, and enter the
Amount of contribution \$ 100 If the contribution is an in-kind actual cost of the in-kind contrib	(Last Name) contribution, provide	(First Name) Office Candidate is a description of the good	`

	Devine, Millimet	& Branch, PA	
(Name of partners)	hip, firm or corporation)		
III. Name of ClientN/A			Date
Political Contributions For each political contribution client/lobbyist and lobbying f	n that is reportable pirm, indicate the fo	pursuant to RSA Chap Howing:	ter 664 paid on behalf of the
Full name of candidate:	Cataldo (Last Name)	Sam (First Name)	(Middle Name/Initial)
	(Last Name)	•	•
Amount of contribution \$ 100		Office Candidate i	s Seeking State Senate
Full name of candidate:	Daniels (Last Name)	Gary (First Name)	(Middle Name/Initial)
Full name of candidate: Amount of contribution \$	Daniels (Last Name)	(First Name)	(Middle Name/Initial) Seeking State Senate
Amount of contribution \$ 100	(Last Name) contribution, provide bution on the line abo	(First Name) Office Candidate is a description of the good	s Seeking State Senate
Amount of contribution \$ 100 If the contribution is an in-kind actual cost of the in-kind contrib	(Last Name) contribution, provide bution on the line abo	(First Name) Office Candidate is a description of the good	s Seeking State Senate
Amount of contribution \$ 100 If the contribution is an in-kind actual cost of the in-kind contrib	(Last Name) contribution, provide bution on the line abo	(First Name) Office Candidate is a description of the good	

	Davida a \$400as -4.0	Dranch DA	
(Name of	Devine, Millimet & partnership, firm or corporation)	Branch, PA	•
III. Name of Client	N/A		Date
	=		ter 664 paid on behalf of the
Full name of candidate:		Kevin	
	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$	100	Office Candidate is	Seeking State Senate
		ve for amount of contribu	ition. If the actual cost is not know
			ition. If the actual cost is not know
enter an estimated value an	nd the word "estimate." Sanborn	Andy	
enter an estimated value an	Sanborn (Last Name)	Andy (First Name)	(Middle Name/Initial) Seeking State Senate
Full name of candidate: Amount of contribution \$ If the contribution is an inactual cost of the in-kind cost.	Sanborn (Last Name) 100 -kind contribution, provide contribution on the line abo	Andy (First Name) Office Candidate is a description of the good	(Middle Name/Initial)
Full name of candidate: Amount of contribution \$ If the contribution is an in-	Sanborn (Last Name) 100 -kind contribution, provide contribution on the line abo	Andy (First Name) Office Candidate is a description of the good	(Middle Name/Initial) SeekingState Senate s or services provided, and enter tl

Political Contributions For each political contribution that is reportable pursuant to RSA Chapter 664 paid on behalf of the client/lobbyist and lobbying firm, indicate the following: Full name of candidate: Hosmer Andrew (Last Name) (First Name) (Middle Name/Initial) Amount of contribution \$ 100 Office Candidate is Seeking State Senate If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter tactual 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." Full name of candidate: Morse Chuck (First Name) (Middle Name/Initial) Amount of contributions \$ 250 Office Candidate is Seeking State Senate If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter 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." Full name of candidate: Kelly Molly M.			Devine, Millimet	& Branch, PA	
Political Contributions For each political contribution that is reportable pursuant to RSA Chapter 664 paid on behalf of the client/lobbyist and lobbying firm, indicate the following: Full name of candidate: Hosmer Andrew (Last Name) (First Name) (Middle Name/Initial) Amount of contribution \$ 100 Office Candidate is Seeking State Senate If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter tactual 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." Full name of candidate: Morse Chuck (Eirst Name) (Middle Name/Initial) Amount of contribution \$ 250 Office Candidate is Seeking State Senate If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter 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." Full name of candidate: Kelly Molly M.	(Nan	ne of partnersh	nip, firm or corporation)		
Full name of candidate: Hosmer	III. Name of Client _	N/A			Date
Amount of contribution \$ 100	For each political co	ontribution	that is reportable rm, indicate the fo	pursuant to RSA Chap llowing:	oter 664 paid on behalf of the
If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter to 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." Full name of candidate: Morse Chuck (Last Name) (First Name) (Middle Name/Initial) Amount of contribution \$ 250 Office Candidate is Seeking State Senate If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter 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." Full name of candidate: Kelly Molly M.	Full name of candid	late:			(Middle Name/Initial)
If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter to 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." Full name of candidate: Morse Chuck (Last Name) (First Name) (Middle Name/Initial) Amount of contribution \$ 250 Office Candidate is Seeking State Senate If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter 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." Full name of candidate: Kelly Molly M.	Amount of contribution	on \$ 100	,	Office Candidate i	is Seeking State Senate
(Last Name) (First Name) (Middle Name/Initial) Amount of contribution \$ 250 Office Candidate is Seeking State Senate If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter actual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not kno enter an estimated value and the word "estimate." Full name of candidate: Kelly Molly M.					
Amount of contribution \$ 250					
enter an estimated value and the word "estimate." Full name of candidate: Kelly Molly M.	Full name of candid	date:			(Middle Name/Initial)
run name of candidate.				(First Name)	
rull hame of candidate.	Amount of contribution is a actual cost of the in-k	on \$ <u>250</u> an in-kind c	(Last Name) contribution, provide ution on the line abo	(First Name) Office Candidate i a description of the goo	s Seeking State Senate ds or services provided, and enter the
	Amount of contribution is a actual cost of the in-k enter an estimated val	on \$ 250 an in-kind c kind contrib lue and the	(Last Name) contribution, provide ution on the line abo word "estimate."	(First Name) Office Candidate i a description of the goo we for amount of contrib	s Seeking State Senate ods or services provided, and enter the oution. If the actual cost is not know
Amount of contribution \$ 100 Office Candidate is Seeking State Senate	Amount of contribution is a actual cost of the in-k enter an estimated val	on \$ 250 an in-kind c kind contrib lue and the	(Last Name) contribution, provide ution on the line abo word "estimate."	(First Name) Office Candidate i a description of the goo we for amount of contrib Molly (First Name)	s Seeking State Senate ods or services provided, and enter toution. If the actual cost is not known to the services of the services provided, and enter toution. If the actual cost is not known to the services of the servi

	Devine, Millimet	& Branch, PA	
(Name of partn	ership, firm or corporation)		
III. Name of ClientN/A			Date
Political Contributions For each political contribut client/lobbyist and lobbying			ter 664 paid on behalf of the
Full name of candidate:	Bradley (Last Name)	Jeb (First Name)	(Middle Name/Initial)
Amount of contribution \$ 250)	Office Candidate is	Seeking State Senate
actual cost of the in-kind cont enter an estimated value and t	he word "estimate."	ve for amount of contribu	ition. If the actual cost is not know
actual cost of the in-kind cont enter an estimated value and t	he word "estimate."	ve for amount of contribu	ation. If the actual cost is not know
Full name of candidate:	Carson (Last Name)	Sharon (First Name)	M. (Middle Name/Initial)
enter an estimated value and t	Carson (Last Name)	Sharon (First Name)	M.
Full name of candidate: Amount of contribution \$ _10	Carson (Last Name) O d contribution, provide ribution on the line abo	Sharon (First Name) Office Candidate is	M. (Middle Name/Initial) Seeking <u>State Senate</u> Is or services provided, and enter th
Full name of candidate: Amount of contribution \$ 10 If the contribution is an in-kin actual cost of the in-kind cont	Carson (Last Name) O d contribution, provide ribution on the line abo	Sharon (First Name) Office Candidate is	(Middle Name/Initial)

I. Name of Lobbyist(s) Rober	t E. D <u>unn, Jr.; Teresa F</u>	R. Rosenberger; George	Dana Bisbee;	Thomas B. Getz
II. Name of lobbyist's parti	nership, firm or cor	noration, if any:		
11. Maine of lobbyist 5 parti	iciship, iiini oi coi	poracion, ir any .		
D	evine, Millimet & Branc	h, PA		
(Name of partne	ership, firm or corporation)			
III. Name of Client N/A			Date	April 29, 2015
Delitical Contributions				
Political Contributions For each political contributi	on that is reportable:	oursuant to RSA Chap	ter 664 paid o	on behalf of the
client/lobbyist and lobbying	firm, indicate the fo	llowing:	vo. vo. p	
	,,			
Full name of candidate:		ect House Republicans		
	(Last Name)	(First Name)	(Middle	Name/Initial)
Amount of contribution \$ 250	0	Office Candidate is	s Seeking	
Amount of contribution \$				
Full name of candidate:		(First Name)	(Middle	Name/Initial)
Amount of contribution \$		Office Candidate is	Seeking	
If the contribution is an in-kin actual cost of the in-kind contrenter an estimated value and the	ribution on the line abo	a description of the good ve for amount of contribu	ds or services pution. If the ad	provided, and enter the ctual cost is not known
Full name of candidate:				<u> </u>
	(Last Name)	(First Name)	(Middle	: Name/Initial)
	(Last Name)	(First Name) Office Candidate is	`	· Name/Initial)

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 contributions 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. (Signature of lobbyist) (Date)
Robert E. Dunn, Jr. (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 partr	nership, firm, or corpor	ration: Devine, Millimet	& Branch, PA
Name of Client (leave b	lank if Statement is for	r the partnership, firm, or	corporation and not related to any
particular client):			
Date of Report (check o	ne):		
April 29, 2015 🗹	July 29, 2015 🗆	October 28, 2015 □	January 27, 2016 □
			d Expenses described above, and umber of Addendum forms being
Addendum A(s)	•		
Addendum B(s)	•		
l_ Addendum C(s)			
(Signature of loboyist)	ny knowledge and beli		and each Addendum is true and Uzzz// (Date)
Teresa R. Rosenber			
(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: Devine, Millimet & Branch, PA
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, 2015
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).
1 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) George Dana Bisbee
(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	Staten	nent/Af	firma	ation	by	Lobbyi	st
Statem	ent of	Income	and	Expe	ense	es for:	

Name of Lobbying partnership, firm, or corporation:							
Date of Report (check one):							
April 29, 2015	July 29, 2015 🗆	October 28, 2015 □	January 27, 2016 □				
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. $4 - 23 - 17$							
(Signature of lobbyist)	00		(Date)				
Thomas B. Getz							
(Print Name of lobbyist))						