



STATE OF NEW HAMPSHIRE  
2014 Statement of Income and Expenses  
for LOBBYISTS  
(RSA Chapter 15)

RECEIVED

MAY 01 2014

NEW HAMPSHIRE  
DEPARTMENT OF STATE

PLEASE PRINT

I. Name of Lobbyist(s) George W. Roussos; Susan S. Geiger; Douglas L. Patch

II. Name of lobbyist's partnership, firm or corporation, if any:

Orr & Reno, P.A.

(Name of partnership, firm or corporation)

45 South Main Street Concord NH 03301  
Business Address: (Street) (Town/City) (State) (Zip Code)  
(603) 224-2381 (603) 224-2318 e-mail groussos@orr-reno.com  
(Telephone) (Fax)

III. This statement covers: (Choose one – file separate reports for each client, OR you may file a separate report for reportable expense transactions which are not attributable to any one client).

☒ All reportable transactions occurring in the months prior to the reporting date relative to the following client:

N/A

(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 are unrelated to any particular client.

IV. Date of Report April 30, 2014 ☒

July 30, 2014 ☐

Reports cover: activity from date of registration to 3/31/14

activity from 4/1/14 to 6/30/14

October 29, 2014 ☐

January 28, 2015 ☐

activity from 7/1/14 to 9/30/14

activity from 10/1/14 to 12/31/14

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, 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**

**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.

George W. Roussos  
(Signature of lobbyist)

April 30, 2014

(Date)

George W. Roussos

(Print Name of lobbyist)



# STATE OF NEW HAMPSHIRE

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

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NEW HAMPSHIRE  
DEPARTMENT OF STATE

P I. Name of Lobbyist(s) George W. Roussos Susan S. Geiger and Douglas L. Patch

L

E II. Name of lobbyist's partnership, firm or corporation, if any:

A

S Orr & Reno, P.A.

E

(Name of partnership, firm or corporation)

P III. Name of Client

N/A

Date April 2014

R

### I Political Contributions

N For each political contribution that is reportable pursuant to RSA Chapter 664 paid on behalf of the  
T client/lobbyist and lobbying firm, indicate the following:

Full name of candidate: D'Allesandro Lou  
(Last Name) (First Name) (Middle Name/Initial)

Amount of contribution \$ 500.00 Office Candidate is Seeking Senator

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."

Full name of candidate: Gilmore Peggy  
(Last Name) (First Name) (Middle Name/Initial)

Amount of contribution \$ 350.00

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."

Full name of candidate: Bragdon Peter  
(Last Name) (First Name) (Middle Name/Initial)

Amount of contribution \$ 250.00

(turn over to continue →)



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L

E II. Name of lobbyist's partnership, firm or corporation, if any:

A

S Orr & Reno, P.A.

E

(Name of partnership, firm or corporation)

P III. Name of Client N/A Date April 2014

R

#### I Political Contributions

N For each political contribution that is reportable pursuant to RSA Chapter 664 paid on behalf of the  
T client/lobbyist and lobbying firm, indicate the following:

Full name of candidate: Carson Sharon  
(Last Name) (First Name) (Middle Name/Initial)

Amount of contribution \$ 250.00 Office Candidate is Seeking Senator

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."

Full name of candidate: Fuller-Clark Martha  
(Last Name) (First Name) (Middle Name/Initial)

Amount of contribution \$ 250.00

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."

Full name of candidate: Watters David  
(Last Name) (First Name) (Middle Name/Initial)

Amount of contribution \$ 250.00

(turn over to continue →)



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L

E II. Name of lobbyist's partnership, firm or corporation, if any:

A

S Orr & Reno, P.A.

E

(Name of partnership, firm or corporation)

N/A

P III. Name of Client N/A Date April 2014

R

### I Political Contributions

N For each political contribution that is reportable pursuant to RSA Chapter 664 paid on behalf of the  
T client/lobbyist and lobbying firm, indicate the following:

Full name of candidate: Larson Sylvia  
(Last Name) (First Name) (Middle Name/Initial)

Amount of contribution \$ 250.00 Office Candidate is Seeking Senator

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."

Full name of candidate: Morse Chuck  
(Last Name) (First Name) (Middle Name/Initial)

Amount of contribution \$ 500.00

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."

Full name of candidate: Hosmer Andrew  
(Last Name) (First Name) (Middle Name/Initial)

Amount of contribution \$ 500.00

(turn over to continue →)



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L

E II. Name of lobbyist's partnership, firm or corporation, if any:

A

S

E

Orr & Reno, P.A.

(Name of partnership, firm or corporation)

N/A

P III. Name of Client N/A Date April 2014

R

I

### Political Contributions

N

T

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: Lasky Bette  
(Last Name) (First Name) (Middle Name/Initial)

Amount of contribution \$ 250.00 Office Candidate is Seeking Senator

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."

Full name of candidate: Soucy Donna  
(Last Name) (First Name) (Middle Name/Initial)

Amount of contribution \$ 250.00

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."

Full name of candidate: Pierce David  
(Last Name) (First Name) (Middle Name/Initial)

Amount of contribution \$ 500.00

(turn over to continue →)



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L

E II. Name of lobbyist's partnership, firm or corporation, if any:

A

S Orr & Reno, P.A.

E

(Name of partnership, firm or corporation)

N/A

P III. Name of Client N/A Date April 2014

R

### I Political Contributions

N For each political contribution that is reportable pursuant to RSA Chapter 664 paid on behalf of the  
T client/lobbyist and lobbying firm, indicate the following:

Full name of candidate: Woodburn Jeff  
(Last Name) (First Name) (Middle Name/Initial)

Amount of contribution \$ 200.00 Office Candidate is Seeking Senator

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."

Full name of candidate: Prescott Russell  
(Last Name) (First Name) (Middle Name/Initial)

Amount of contribution \$ 250.00

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."

Full name of candidate: \_\_\_\_\_  
(Last Name) (First Name) (Middle Name/Initial)

Amount of contribution \$ \_\_\_\_\_

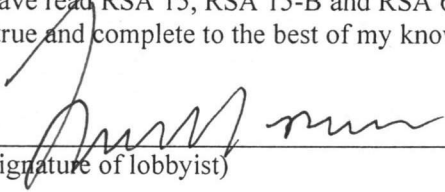
(turn over to continue →)

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.

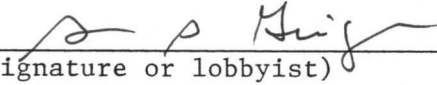
  
(Signature of lobbyist)

April 30, 2014

(Date)

George W. Roussos

(Print Name of lobbyist)

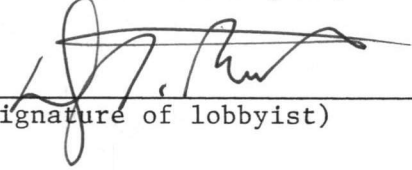
  
(Signature of lobbyist)

April 30, 2014

(Date)

Susan S. Geiger

(Print Name of lobbyist)

  
(Signature of lobbyist)

April 30, 2014

(Date)

Douglas L. Patch

(Print Name of lobbyist)

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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 partnership, firm, or corporation: George W. Roussos; Susan S. Geiger;  
and Douglas L. Patch

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 30, 2014 ☒

July 30, 2014 ☐

October 29, 2014 ☐

January 28, 2015 ☐

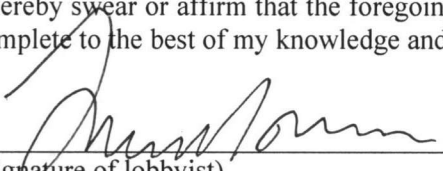
I have read RSA 15, RSA 15-B, RSA 664, the Statement of Income and Expenses described above, and  
the following Addendums submitted with that Statement (insert the number of Addendum forms being  
submitted):

\_\_\_\_\_ Addendum A(s).

\_\_\_\_\_ Addendum B(s).

  X   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)

April 30, 2014

(Date)

George W. Roussos

(Print Name of lobbyist)

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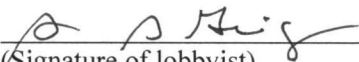
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  X   Addendum C(s).

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(Signature of lobbyist)

April 30, 2014  
(Date)

Susan S. Geiger  
(Print Name of lobbyist)

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DEPARTMENT OF STATE

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*Signature Form for Associated Lobbyist*  
*RSA Chapter 15*

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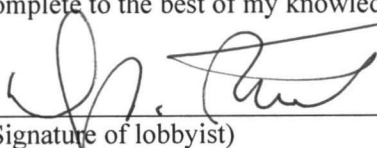
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  X   Addendum C(s).

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\_\_\_\_\_  
(Signature of lobbyist)

April 30, 2014  
(Date)

Douglas L. Patch  
(Print Name of lobbyist)

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