

2014 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

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MAY 01 2014

I. Name of Lobbyist(s) George W. Rous	ssos; Susan S.	Geiger; Douglas L.	Patch
II. Name of lobbyist's partnership, firm or	corporation, if any	7:	
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	a mail grousso	s@orr-reno.com
(Telephone)	(Fax)	e-man 5-0-0-0	
III. This statement covers: (Choose one – fireportable expense transactions which are☑ All reportable transactions occurring in the	not attributable to	any one client).	
N/A			Ç
(Full Name of Client as	it appears on the Lobb	yist Registration Form)	·
<u>OR</u>			
All reportable transactions by the lobbyist unrelated to any particular client.	(including the lobby	rist's family), or the lobbying	firm listed below which are
IV. Date of Report April 30, 2014 Reports cover: activity from date of registration	on to 3/31/14	July 30, 2014 activity from 4/1/14 to 6/30/14	
October 29, 2014		January 28, 2015	
activity from 7/1/14 to 9/3	30/14	activity from 10/1/14 to 12/31/	/14
V. There have been no fees received and If this box is checked, complete just this form a Concord, NH 03301.			
VI. Check if additional reports are attached	1:		
☐ If you have received fees or made expend	itures, you must file	Addendum A- Fees and Ex	rpenses
☐ If you have paid an honorarium or reimbu Expense Reimbursement	irsed expenses, you	must file Addendum B – Rep	oort of Honorariums or
If you, your firm, or your family has made	e political contributi	ons, you must file Addendu	m C- Political Contributions
Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15-B and RSA 664 to the best of my knowledge and belief.	and hereby swear or	r affirm that the foregoing in	formation is true and complet
/ Man // n		April 30, 2014	
(Signature of lobbyist)		(Dat	e)
George W. Roussos			
(Print Name of lobbyist)			

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STATE OF NEW HAMPSHIRE

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

MAY 0 1 2014

Orr & Reno, P.A.		
(Name of partnership, firm or corporation	n)	
III. Name of Client		Date April 2014
Political Contributions For each political contribution that is reportabl client/lobbyist and lobbying firm, indicate the	e pursuant to RSA Chap following:	oter 664 paid on behalf of the
Full name of candidate: D'Allesandro	Lou	
(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$ 500.00	Office Candidate i	s Seeking Senator
actual cost of the in-kind contribution on the line ab	ove for amount of contrib	ution. If the actual cost is not known
If the contribution is an in-kind contribution, provid actual cost of the in-kind contribution on the line ab enter an estimated value and the word "estimate."	ove for amount of contrib	ution. If the actual cost is not known
actual cost of the in-kind contribution on the line ab enter an estimated value and the word "estimate."	Peggy	ution. If the actual cost is not known
actual cost of the in-kind contribution on the line ab enter an estimated value and the word "estimate."	ove for amount of contrib	(Middle Name/Initial)
actual cost of the in-kind contribution on the line ab enter an estimated value and the word "estimate." Full name of candidate: Gilmore	Peggy	ution. If the actual cost is not known
Full name of candidate: Gilmore (Last Name) Amount of contribution is an in-kind contribution, providactual cost of the in-kind contribution on the line above.	Peggy (First Name) e a description of the good	(Middle Name/Initial)
Full name of candidate: Gilmore (Last Name) Amount of contribution \$ 350.00 If the contribution is an in-kind contribution, providactual cost of the in-kind contribution on the line abenter an estimated value and the word "estimate."	Peggy (First Name) e a description of the good ove for amount of contribution	(Middle Name/Initial)
Full name of candidate: Gilmore (Last Name) Amount of contribution is an in-kind contribution, providactual cost of the in-kind contribution on the line above.	Peggy (First Name) e a description of the good	(Middle Name/Initial)



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I. Name of Lobbyist(s) George W. R	oussos Su	ısan S. Geiger	r and Douglas L. Patch
II. Name of lobbyist's partnership, fi	rm or corpo	oration, if any:	
Orr & Reno, P.A.		•	
(Name of partnership, firm or	corporation)		
III. Name of Client N/A			DateApril 2014
Political Contributions For each political contribution that is r client/lobbyist and lobbying firm, indi	eportable pu cate the follo	rsuant to RSA Cha	apter 664 paid on behalf of the
Full name of candidate: Carson		Sharon	
(Last N	lame)	(First Name)	(Middle Name/Initial)
Amount of contribution \$ 250.00		Office Candidate	e is Seeking Senator
Full name of candidate: $\frac{\text{Fuller-Cla}}{\text{(Last N)}}$	rk	Martha	
	ame)	(First Name)	(Middle Name/Initial)
Amount of contribution \$ 250.00 If the contribution is an in-kind contribution actual cost of the in-kind contribution on the enter an estimated value and the word "esti	ne line above f	escription of the goo for amount of contrib	ods or services provided, and enter the bution. If the actual cost is not known,
Full name of candidate: Watters		David	
(Last Na	ame)	(First Name)	(Middle Name/Initial)
Amount of contribution \$ 250.00		_	
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I. Name of Lobbyist(s) George W. Rousso	os susan s. Geiger a	and Douglas L. Patch
II. Name of lobbyist's partnership, firm or	corporation, if any:	
Orr & Reno, P.A.	1	
(Name of partnership, firm or corpora	tion)	
III. Name of ClientN/A		DateApril 2014
Political Contributions		
For each political contribution that is reporta	able pursuant to RSA Chapt	er 664 paid on behalf of the
client/lobbyist and lobbying firm, indicate the	ne 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, pro- actual cost of the in-kind contribution on the line	vide a description of the goods	s or services provided, and enter the
enter an estimated value and the word "estimate."	"	non. If the actual cost is not known,
Full name of condidate: Morse	Chuck	
Full name of candidate: Morse (Last Name)	Chuck (First Name)	(Middle Name/Initial)
Full name of candidate: Morse (Last Name) Amount of contribution \$ 500.00	Chuck (First Name)	(Middle Name/Initial)
(Last Name)	(First Name) vide a description of the goods above for amount of contribut	or services provided, and enter the
(Last Name) Amount of contribution \$ 500.00 If the contribution is an in-kind contribution, provactual cost of the in-kind contribution on the line	(First Name) vide a description of the goods above for amount of contribut	or services provided, and enter the
(Last Name) Amount of contribution \$ 500.00 If the contribution is an in-kind contribution, provactual cost of the in-kind contribution on the line	(First Name) vide a description of the goods above for amount of contribut	or services provided, and enter the
(Last Name) Amount of contribution \$ 500.00 If the contribution is an in-kind contribution, provactual cost of the in-kind contribution on the line	(First Name) vide a description of the goods above for amount of contribut	or services provided, and enter the
(Last Name) Amount of contribution \$ 500.00 If the contribution is an in-kind contribution, provactual cost of the in-kind contribution on the line	(First Name) vide a description of the goods above for amount of contribut	or services provided, and enter the
(Last Name) Amount of contribution \$ 500.00 If the contribution is an in-kind contribution, provactual cost of the in-kind contribution on the line enter an estimated value and the word "estimate." Full name of candidate:	(First Name) vide a description of the goods above for amount of contribut,	or services provided, and enter the ion. If the actual cost is not known,
(Last Name) Amount of contribution \$ 500.00 If the contribution is an in-kind contribution, provactual cost of the in-kind contribution on the line enter an estimated value and the word "estimate."	(First Name) wide a description of the goods above for amount of contribut,	or services provided, and enter the
(Last Name) Amount of contribution \$ 500.00 If the contribution is an in-kind contribution, provactual cost of the in-kind contribution on the line enter an estimated value and the word "estimate." Full name of candidate:	(First Name) vide a description of the goods above for amount of contribut,	or services provided, and enter the ion. If the actual cost is not known,

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Lobbyists Report of Political Contributions Addendum C

(RSA Chapter 15:6)

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II. Name of lobbyist's partner	ship, firm or corn	oration, if any:	
Orr & Reno, P.A.			
	o, firm or corporation)		
III. Name of Client N/A			DateApril 2014
Political Contributions For each political contribution to client/lobbyist and lobbying fire	hat is reportable p	ursuant to RSA Chap	
Full name of candidate: Lasky		Bette	
	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$)	Office Candidate i	is Seeking
enter an estimated value and the wo			
onter an estimated value and the wo			
		Donna	
Full name of candidate: _Souc		Donna (First Name)	(Middle Name/Initial)
	(Last Name)		(Middle Name/Initial)
Full name of candidate: _Souch Amount of contribution \$ 250.00 f the contribution is an in-kind conctual cost of the in-kind contributi	(Last Name) outribution, provide a on on the line above	(First Name) description of the good	(Middle Name/Initial) ds or services provided, and enter the ution. If the actual cost is not know
Full name of candidate: Souch Amount of contribution \$ 250.00 of the contribution is an in-kind contribution contribution and the work of the in-kind contribution is an estimated value and the work of the in-kind contribution is an estimated value and the work of the in-kind contribution is an in-kind contribution in the in-kind contribution in th	(Last Name) outribution, provide a conton on the line above ord "estimate."	(First Name) description of the good for amount of contribution	ds or services provided, and enter the
Full name of candidate: _Souch Amount of contribution \$ 250.00 f the contribution is an in-kind contribution contribution contribution.	(Last Name) outribution, provide a cont on the line above ord "estimate."	(First Name) description of the good	ds or services provided, and enter the

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

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I. Name of Lobbyist(s) Geor	ge W. Roussos	Susan S. Geiger	
II. Name of lobbyist's partr	nership, firm or corp	ooration, if any:	
Orr & Reno, P.A.	ership, firm or corporation)		
III. Name of ClientN/A	A	, 0	DateApril 2014
Political Contributions For each political contribution client/lobbyist and lobbying			ter 664 paid on behalf of the
Full name of candidate: Wo	odburn	Jeff	
run name of candidate.	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$	0.00	Office Candidate is	s Seeking Senator
actual cost of the in-kind contri enter an estimated value and th	e word "estimate."		
enter an estimated value and th		Russell	
		Russell (First Name)	(Middle Name/Initial)
enter an estimated value and th	escott (Last Name)		(Middle Name/Initial)
Full name of candidate: Pre Amount of contribution \$ 250	(Last Name) 0.00 contribution, provide a libution on the line above	(First Name) description of the good	(Middle Name/Initial) Is or services provided, and enter thation. If the actual cost is not know
Full name of candidate: Pre Amount of contribution \$ _250 If the contribution is an in-kind actual cost of the in-kind contrienter an estimated value and the	(Last Name) 0.00 contribution, provide a bution on the line above word "estimate."	(First Name) description of the good e for amount of contribu	ls or services provided, and enter the actual cost is not known. If the actual cost is not known.
Full name of candidate: Pre Amount of contribution \$ 250 If the contribution is an in-kind actual cost of the in-kind contri	(Last Name) 1.00 1 contribution, provide a bution on the line above word "estimate."	(First Name) description of the good e for amount of contribution (First Name)	ls or services provided, and enter th

(turn over to continue \rightarrow)

If the contribution is an in-kind contribution, provide a descr actual cost of the in-kind contribution on the line above for a enter an estimated value and the word "estimate."	mount of contribution. If the actual cost is no
(If more than three contributions were made, report additional contr	ibutions on separate addendum (C. Forms.)
	rounding on separate addendam C forms.)
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and herebis true and complete to the best of my knowledge and b	
h all man	April 20 201/
(Signature of lobbyist)	April 30, 2014 (Date)
George W. Roussos	
(Print Name of lobbyist)	
(Signature or lobbyist)	April 30, 2014 (Date)
Susan S. Geiger (Print Name of lobbyist)	
J. hu	April 30, 2014
(Signature of lobbyist)	(Date)
Douglas L. Patch	
(Print Name of lobbyist)	RECEIVE
	MAY 0120
	NEW HAMPSH DEPARTMENT OF

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.

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. April 30, 2014 (Signature of lobbyist) George W. Roussos	Sworn Statement/Affirmation by Lobbyi	ist
Name of Lobbying partnership, firm, or corporation: 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. April 30, 2014 (Signature of lobbyist) April 30, 2014 (Date)	Statement of Income and Expenses for:	George W Poussos, Susan S Caigar.
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	Name of Lobbying partnership, firm, or corpora	
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. April 30, 2014 (Signature of lobbyist) George W. Roussos		
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. April 30, 2014 (Date) George W. Roussos	particular client):	
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. April 30, 2014 (Date) George W. Roussos	Date of Report (check one):	
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. April 30, 2014 (Signature of lobbyist) (Date)		
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. April 30, 2014 (Signature of lobbyist) George W. Roussos	April 30, 2014 ☑ July 30, 2014 □	October 29, 2014 □ January 28, 2015 □
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. April 30, 2014 (Signature of lobbyist) George W. Roussos		
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. April 30, 2014 (Signature of lobbyist) (Date)	I have read RSA 15, RSA 15-B, RSA 664, the the following Addendums submitted with that submitted):	e Statement of Income and Expenses described above, and statement (insert the number of Addendum forms being
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. April 30, 2014 (Date) George W. Roussos	Addendum A(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. April 30, 2014 (Signature of lobbyist) George W. Roussos	Addendum B(s).	,
Complete to the best of my knowledge and belief. April 30, 2014 (Signature of lobbyist) George W. Roussos	X Addendum C(s).	
Complete to the best of my knowledge and belief. April 30, 2014 (Signature of lobbyist) George W. Roussos		
(Signature of lobbyist) (Date) George W. Roussos		
(Signature of lobbyist) (Date) George W. Roussos	Mr. Morring	April 30, 2014
	(Signature of lobbyist)	
	George W. Roussos	
[Color of the col	(Print Name of lobbyist)	RECEIVED
MAY 0.1.2014		MAY 0.1.2014

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:	George W. Roussos; Susan S. Geiger;
Name of Lobbying partnership, firm, or corporati	
	ne 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 Sthe following Addendums submitted with that Stubmitted:	Statement of Income and Expenses described above, and statement (insert the number of Addendum forms being
Addendum A(s).	
Addendum B(s).	
X Addendum C(s).	
I hereby swear or affirm that the foregoing inforcomplete to the best of my knowledge and belief.	mation on the Statement and each Addendum is true and
A stice	April 30, 2014
(Signature of lobbyist)	(Date)
Susan S. Geiger	DEOEN/ED
(Print Name of lobbyist)	RECEIVED

NEW HAMPSHIRE
DEPARTMENT OF STATE

MAY 0 1 2014

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:	George W. Roussos; Susan S. Geiger;
Name of Lobbying partnership, firm, or corporation:	
	partnership, firm, or corporation and not related to any
particular client):	
Date of Report (check one):	
April 30, 2014 ☐ July 30, 2014 ☐ Oct	ober 29, 2014 □ January 28, 2015 □
	ement of Income and Expenses described above, and ement (insert the number of Addendum forms being
Addendum A(s).	
Addendum B(s).	
X Addendum C(s).	
I hereby swear or affirm that the foregoing informatic complete to the best of my knowledge and belief. (Signature of lobbyist)	April 30, 2014 (Date)
Douglas L. Patch	
(Print Name of lobbyist)	RECEIVED
	MAY 0 1 2014