

STATE OF NEW HAMPSHIRE
2017 Statement of Income and Expenses
for LOBBYISTS
(RSA Chapter 15)

RECEIVED

JUL 26 2017

NEW HAMPSHIRE
DEPARTMENT OF STATE

PLEASE PRINT

I. Name of Lobbyist(s):

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

gcgLaw Realty, LLC
214 North Main Street, Concord, NH 03301

603-228-1181
(Telephone)

603-226-3477
(Fax)

elliott@gcglaw.com
(Email)

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 month prior to the reporting date relative to the following client.

(Full Name of Client as it appears on the Lobbyist Registration Form)

OR

[X] 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 26, 2017 [ ]

July 26, 2017 [X]

Reports cover: activity from date of registration to 3/31/17

activity from 4/1/17 to 6/30/17

October 25, 2017 [ ]

January 24, 2018 [ ]

activity from 7/1/17 to 9/30/17

activity from 10/1/17 to 12/31/17

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

[X] If you, your firm, or your family has made political contributions, you must file Addendum C - Political Contributions

Sworn Statement/Affirmation by Lobbyist LOBBYING FIRM

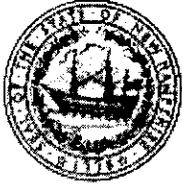
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm that the foregoing information is true and complete to the best of my knowledge and belief.

GCGLAW REALTY, LLC

[Signature]
(Signature of Lobbyist)

7/17/17
(Date)

By: Samantha D. Elliott, Managing Member
(Print Name of lobbyist)



**STATE OF NEW HAMPSHIRE**  
**Lobbyists Report of**  
**Political Contributions**  
**Addendum C**

**(RSA Chapter 15:6)**

**I. Name of Lobbyist(s)** \_\_\_\_\_

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

gcgLaw Realty, LLC

(Name of partnership, firm or corporation)

**III. Name of Client** \_\_\_\_\_ **Date** July 26, 2017

**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: \_\_\_\_\_  
 Political Action Committee: FRIENDS OF GARY DANIELS  
DANIELS GARY  
 (Last Name) (First Name) (Middle Name/Initial)

Amount of Contribution \$250.00 Office Candidate is Seeking SENATE

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: \_\_\_\_\_  
 Political Action Committee: FRIENDS OF SHARON CARSON  
CARSON SHARON  
 (Last Name) (First Name) (Middle Name/Initial)

Amount of Contribution \$250.00 Office Candidate is Seeking SENATE

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: \_\_\_\_\_  
 Political Action Committee: SENATE REPUBLICAN MAJORITY PAC  
 \_\_\_\_\_  
 (Last Name) (First Name) (Middle Name/Initial)

Amount of Contribution \$250.00 Office Candidate is Seeking SENATE

(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."

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(If more than three contributions were made, report additional contributions on separate addendum C forms.)

**Sworn Statement/Affirmation by Lobbyist LOBBYING FIRM**

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.

GCGLAW REALTY, LLC

By:   
(Signature of lobbyist)

7/17/17  
(Date)

By: Samantha D. Elliott, Managing Member  
(Print Name of Lobbyist)



**STATE OF NEW HAMPSHIRE**  
**Lobbyists Report of**  
**Political Contributions**  
**Addendum C**

**(RSA Chapter 15:6)**

**I. Name of Lobbyist(s)** \_\_\_\_\_

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

gcgLaw Realty, LLC

(Name of partnership, firm or corporation)

**III. Name of Client** \_\_\_\_\_ **Date** July 26, 2017

**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: \_\_\_\_\_  
 Political Action Committee: FRIENDS OF CHRIS SUNUNU  
SUNUNU CHRIS  
 (Last Name) (First Name) (Middle Name/Initial)

Amount of Contribution \$ 1,000.00 Office Candidate is Seeking GOVERNOR

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: \_\_\_\_\_  
 Political Action Committee: DAVID BOUTIN FOR STATE SENATE  
BOUTIN DAVID  
 (Last Name) (First Name) (Middle Name/Initial)

Amount of Contribution \$ 500.00 Office Candidate is Seeking SENATE

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: \_\_\_\_\_  
 Political Action Committee: FRIENDS OF CHRIS SUNUNU  
SUNUNU CHRIS  
 (Last Name) (First Name) (Middle Name/Initial)

Amount of Contribution \$ 500.00 Office Candidate is Seeking GOVERNOR

(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."

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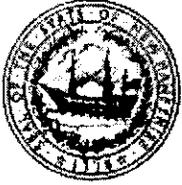
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GCGLAW REALTY, LLC

By: SD Elliott  
(Signature of lobbyist)

7/17/17  
(Date)

By: Samantha D. Elliott, Managing Member  
(Print Name of Lobbyist)



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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: Political Action Committee: VOLINSKY FOR EXECUTIVE COUNCIL  
VOLINSKY ANDRU  
 (Last Name) (First Name) (Middle Name/Initial)

Amount of Contribution \$250.00 Office Candidate is Seeking EXECUTIVE COUNCIL

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: Political Action Committee: FRIENDS OF KRIS SCHULTZ  
SCHULTZ KRIS  
 (Last Name) (First Name) (Middle Name/Initial)

Amount of Contribution \$ 50.00 Office Candidate is Seeking HOUSE

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: Political Action Committee: FRIENDS OF JEB BRADLEY  
BRADLEY JEB  
 (Last Name) (First Name) (Middle Name/Initial)

Amount of Contribution \$ 250.00 Office Candidate is Seeking SENATE

(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."

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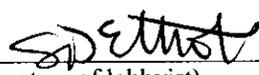
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(Date)

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(Print Name of Lobbyist)



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Political Action Committee: NH SENATE DEMOCRATIC CAUCUS

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

Amount of Contribution \$ 250.00 Office Candidate is Seeking SENATE

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."

Political Action Committee: COMMITTEE TO ELECT HOUSE DEMOCRATS

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

Amount of Contribution \$ 250.00 Office Candidate is Seeking HOUSE

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."

Political Action Committee: NH STATE BANK PAC

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

Amount of Contribution \$ 500.00 Office Candidate is Seeking \_\_\_\_\_

(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."

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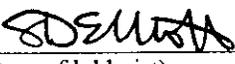
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