



STATE OF NEW HAMPSHIRE

RECEIVED

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

OCT 21 2020

NEW HAMPSHIRE DEPARTMENT OF STATE

I. Name of Lobbyist(s) Debra Vanderbeek, Robert Clegg, Periklis Karoutas, Chris Herr

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

Legislative Solutions, L.L.C. (Name of partnership, firm or corporation)

III. Name of Client Date October 8, 2020

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: Committee to Elect House Republicans (Last Name) (First Name) (Middle Name/Initial)

Amount of contribution \$ 250.00 Office Candidate is Seeking

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."

Blank lines for in-kind contribution description



Full name of candidate: Friends of Dick Hinch (Last Name) (First Name) (Middle Name/Initial)

Amount of contribution \$ 250.00 Office Candidate is Seeking

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."

Blank lines for in-kind contribution description



Full name of candidate: NH Senate Republicans PAC (Last Name) (First Name) (Middle Name/Initial)

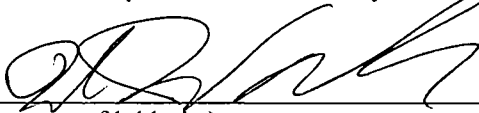
Amount of contribution \$ 250.00 Office Candidate is Seeking

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)

October 8, 2020

(Date)

Debra Vanderbeek

(Print Name of lobbyist)



STATE OF NEW HAMPSHIRE

Lobbyists Report of Political Contributions

Addendum C (RSA Chapter 15:6)

P I. Name of Lobbyist(s) Debra Vanderbeek, Robert Clegg, Periklis Karoutas, Chris Herr

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

A Legislative Solutions, L.L.C.
S (Name of partnership, firm or corporation)

E III. Name of Client Date October 8, 2020

R I Political Contributions

N 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:

T

Full name of candidate: Ricciardi Denise
(Last Name) (First Name) (Middle Name/Initial)

Amount of contribution \$ 250.00 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 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: Bradley Jeb
(Last Name) (First Name) (Middle Name/Initial)

Amount of contribution \$ 250.00 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 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: Birdsell Regina
(Last Name) (First Name) (Middle Name/Initial)


Amount of contribution \$ 250.00 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 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)

October 8, 2020

(Date)

Debra Vanderbeek

(Print Name of lobbyist)



STATE OF NEW HAMPSHIRE

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

I. Name of Lobbyist(s) Debra Vanderbeek, Robert Clegg, Periklis Karoutas, Chris Herr

II. Name of lobbyist's partnership, firm or corporation, if any: Legislative Solutions, L.L.C. (Name of partnership, firm or corporation)

III. Name of Client Date October 8, 2020

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: NH Senate Republicans PAC (Last Name) (First Name) (Middle Name/Initial)

Amount of contribution \$ 250.00 Office Candidate is Seeking

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 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 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)

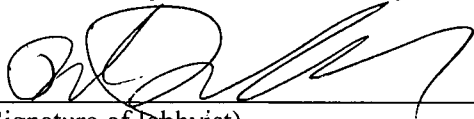
Amount of contribution \$ Office Candidate is Seeking

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(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)

October 8, 2020

(Date)

Debra Vanderbeek

(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: Legislative Solutions, L.L.C.

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, 2020 July 29, 2020 October 28, 2020 January 27, 2021


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)

October 8, 2020

(Date)

Robert Clegg

(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.

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Statement of Income and Expenses for:

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Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any particular client): _____

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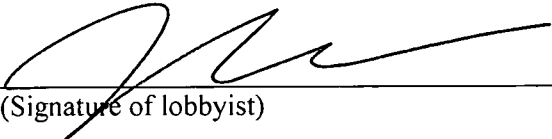
I have read RSA 15, RSA 15-B, RSA 664, the Statement of Income and Expenses described above, and the following Addendums submitted with that Statement (insert the number of Addendum forms being submitted):

_____ 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.



(Signature of lobbyist)

October 8, 2020

(Date)

Periklis Karoutas

(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: Legislative Solutions, L.L.C.

Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any particular client): _____

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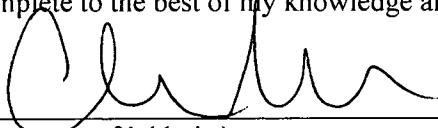
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_____ Addendum A(s).

_____ 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.



(Signature of lobbyist)

October 8, 2020
(Date)

Chris Herr
(Print Name of lobbyist)