STATE OF NEW HAMPSHIRE

2018 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

PLEASE PRINT

| I. Name of Lobbyist(s) James J. Bia | nco, Jr.; Adam Schmidt; | Karen Soucy | |
|---|-----------------------------------|---------------------------------|-------------------------------------|
| II. Name of lobbyist's partnership, fir | m or corporation, if any: | | |
| Bianco Profession | al Association | | |
| (Name of partnership, fi | rm or corporation) | | |
| 18 Centre Street | Concord | NH | 03301 |
| Business Address: (Street) | (Town/City) | (State) | (Zip Code) |
| (603) <u>225-7170</u> | (603) <u>226-0165</u> | e-mail attys@bia | ancopa.com |
| (Telephone) | (Fax) | | |
| III. This statement covers: (Choose or reportable expense transactions which | | | file a separate report for |
| X All reportable transactions occurring | g in the months prior to the re | porting date relative to the | following client: |
| | Cubic Corporation | | |
| | ent as it appears on the Lobbyist | Registration Form) | |
| <u>OR</u> | | | |
| All reportable transactions by the lo unrelated to any particular client. | bbyist (including the lobbyist | 's family), or the lobbying | firm listed below which are |
| IV. Date of Report April 25, 2018 Reports cover: activity from date of reg | | July 25, 2018 | |
| October 31, 20 | _ | January 30, 2019 | |
| activity from 7/1/18 | | ivity from 10/1/18 to 12/31/1 | 8 |
| V. There have been no fees receive If this box is checked, complete just this Concord, NH 03301. | | | |
| VI. Check if additional reports are at | tached: | | |
| If you have received fees or made e | xpenditures, you must file Ad | dendum A- Fees and Exp | penses |
| If you have paid an honorarium or r Expense Reimbursement | eimbursed expenses, you mus | t file Addendum B – Repo | ort of Honorariums or |
| ☐ If you, your firm, or your family ha | s made political contributions | , you must file Addendum | C- Political Contributions |
| Sworn Statement/Affirmation by Lob I have read RSA 15, RSA 15-B, RSA 1 and complete to the best of my knowled | 1-C and RSA 664 and hereby | swear or affirm that the fo | regoing information is true |
| X | | April 25, 2018 | |
| (Signature of lobbyist) | | (Date |) |
| James J. Bianco, Jr. | | _ | - SEWED |
| (Print Name of lobbyist) | | | RECEIVED APR 25 2018 |
| | | | APR 25 2018 |
| | | | NEW HAMPSHIRE DEPARTMENT OF STAT |

LEASE PRINT

STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

| II. Name of lobbyist's partnership, firm or corporation, if any: | |
|---|--|
| Bianco Professional Association | |
| (Name of partnership, firm or corporation) | |
| III. Name of Client Cubic Corporation | Date 04/25/2018 |
| IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The greduced by any expenses: | t relations, or public relations service |
| a) Total of all fees received in this reporting period | a) \$ 3,200 |
| b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar y | b) \$ <u>0</u> ear) |
| c) Total of all fees received to date (Add lines a and b) | c) \$ 3,200 |
| d) Indicate the amount of any such fees that are due, but have not yet been paid | d) \$ 6,520 |
| V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to refees. Separate reports are to be filed for expenditures made relative to each the lobbyist(s)/firm that are unrelated to any one client a separate report of Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office expenditure was of \$25.00 or less (for examp lunch where the cost was \$25.00 or less, purchase of a pen with a value of lebeing lobbied, purchase of a ceremonial object given to a person being lobbied (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greater restaurant expenses for a legislative reception). Expenses for honorariums contributions will be reported on separate addendums and should not be reported. | client and if expenditures are made by may be filed for the lobbyist(s)/firm e aggregate total of all expenses pair expenses; (b) the aggregate total of all expenses; (b) the aggregate total of all ele: meals purchased during a business st than \$10 that is given to the person ed with a value of \$25.00 or less); and orting period of greater than \$25.00 four of greater than \$25, purchase of the er than \$25, but not greater than \$50, expense reimbursement, or political |
| a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying. | a) \$ 9,720 |
| b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less. | b) \$ 0 |
| c) Total of all itemized expenditures reported in detail in section VI. | c) \$ <u>0</u> |

| d) Total expenses for this reporting period (Add lines a, b and c) | d) \$ 9,720 |
|--|------------------------------------|
| e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report) | e) \$ <u>0</u> |
| f) Total of all expenses year to date | f) \$ 9,720 |
| VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from period, including by whom paid or to whom charged. | obbying fees during this reporting |
| Paid to: | Amount: |
| | \$ |
| | \$ |
| | \$ |
| | \$ |
| | \$ |
| | \$ |
| | |
| | |
| | |
| Sworn Statement/Affirmation by Lobbyist | |
| I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm is true and complete to the best of my knowledge and belief. | n that the foregoing information |
| \mathcal{M} | 04/25/2018 |
| (Signature of lobbyist) | (Date) |
| James J. Bianco, 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 partnership Name of Client (leave blank if particular client): _Cubic Corp | Statement is for | | onal Association corporation and not related to any |
|---|------------------|--------------------|--|
| particular eliciti)euote eorj | 0141011 | | |
| Date of Report (check one): | | | |
| April 25, 2018 🛛 July 2 | 25, 2018 🗆 | October 31, 2018 □ | January 30, 2019 □ |
| | | | d Expenses described above, and mber of Addendum forms being |
| Addendum A(s). | | | |
| Addendum B(s). | | | |
| Addendum C(s). | | | |
| I hereby swear or affirm that the complete to the best of my knot (Signature of lobbyist) | | ef. | april 25, 2018 (Date) |
| | | | · |
| Adam Schmidt | | | |
| (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 par | tnership, firm, or corpo | oration: Bianco Professi | onal Association |
|---|--------------------------|------------------------------|---|
| Name of Client (leave | blank if Statement is fo | or the partnership, firm, or | corporation and not related to an |
| particular client): Cul | oic Corporation | | |
| | | | |
| Date of Report (check | one): | | |
| April 25, 2018 ⊠ | July 25, 2018 □ | October 31, 2018 □ | January 30, 2019 □ |
| | | | nd Expenses described above, an umber of Addendum forms bein |
| Addendum A(s | s). | | |
| Addendum B(s | s). | | |
| Addendum C(s | s). | | |
| I hereby swear or affir complete to the best of | | lief. | nt and each Addendum is true an |
| (Signature of lobbyist) | | | (Date) |
| | | | , |
| Karen Soucy | | | |
| (Print Name of lobbyis | t) | | |