STATE OF NEW HAMPSHIRE

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

PLEASE PRINT

	1	2 1 . /	110.11 1-	, har
I. Name of Lobbyis	t(s)	sourcy / I	Hex Koutr	subas_
II. Name of lobbyist	t's partnership, firm (or corporation, if any	y:	
	ennehy & B			
,	ame of partnership, firm of		rd NILL 02201	
	Street)	(Town/City)	rd, NH 03301	(Zip Code)
•	28-1601		` ,	(Esp 60 00)
(Telephone)		(Fax)	e-mail	
	covers: (Choose one – transactions which ar			ay file a separate report for
All reportable tra	insactions occurring in	the months prior to th	e reporting date relative to t	he following client:
y `			etwork In	
	(Full Name of Client	as it appears on the Lobi	oyist Registration Form)	
OR All reportable trai	nsactions by the lobbyi	st (including the lobby	vist's family) or the lobbyin	g firm listed below which are
unrelated to any part	•	or (meraamg are 1000)	, ist is runningly, or the receipm	g
IV. Date of Report	April 25, 2018 ivity from date of registro		July 25, 2018 🗆	0
Reports cover: act	October 31, 2018		activity from 4/1/18 to 6/30/18 January 30, 2019	8
	activity from 7/1/18 to		activity from 10/1/18 to 12/3.	1/18
	l, complete just this for		ransactions made since s Secretary of State's Office,	
VI. Check if additio	nal reports are attach	ed:		
-	•		e Addendum A– Fees and E	•
☐ If you have paid Expense Reimbursen		bursed expenses, you	must file Addendum B-Re	eport of Honorariums or
•		ade political contribut	ions, you must file Addend	um C- Political Contributions
Sworn Statement/A	ffirmation by Lobbyis	st		
I have read RSA 15,		and RSA 664 and her	eby swear or affirm that the	foregoing information is true
and complete to the	56	and defici.	4/24/	1.0
(Signature of lobbyi	st)		(Da	ite)
Tim Bo	wley			RECEIVED
(Print Name of lobb	yist)			RECEIVED APR 2 5 2018
				NEW HAMPSHIRE
				DEPARTMENT OF STATE

P Ĺ E S E R \mathbf{N}

STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses



(RSA Chapter 15:6)

I. Name of Lobbyist(s) Fouly / Alex	Koutroubas
II. Name of lobbyist's partnership, firm or corporation, if any:	
Demely & Bouley LL (Name of partnership, film or corporation)	<u>C</u>
(Name of partnership, film or corporation) III. Name of Client Cammunity Support Network to	ic. Date 04/17/18
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 groreduced by any expenses:	that are related, directly or indirectly relations, or public relations service
a) Total of all fees received in this reporting period	a)\$/0,000
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 year)	b) \$
c) Total of all fees received to date (Add lines a and b)	0)\$ 10,000
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to repfees. Separate reports are to be filed for expenditures made relative to each of the lobbyist(s)/firm that are unrelated to any one client a separate report of the 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 exindividual expenses where the expenditure was of \$25.00 or less (for example lunch where the cost was \$25.00 or less, purchase of a pen with a value of less being lobbied, purchase of a ceremonial object given to a person being lobbied (c) an itemized statement of each individual expenditure made during this report of 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 greate 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 paid expenses; (b) the aggregate total of all le: meals purchased during a busines so than \$10 that is given to the person and with a value of \$25.00 or less); and orting period of greater than \$25.00 for the of greater than \$25, purchase of ser than \$25, but not greater than \$50 the 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) \$
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) \$
c) Total of all itemized expenditures reported in detail in section VI.	c) \$

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$
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) \$
f) Total of all expenses year to date	f) \$
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from leperiod, 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	n that the foregoing information
is true and complete to the best of my knowledge and belief.	
	4/24/18
(Signature of Jobbyist)	(Date)
Jim Bayley	
(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: Dennehy & Bouley LLC
Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any particular client): Community Support Network Inc.
Date of Report (check one):
April 25, 2018
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) (Date)
Alex Koutroubas (Print Name of lobbyist)