



# STATE OF NEW HAMPSHIRE

Lobbyists Report of Political Contributions Addendum C (RSA Chapter 15:6) JUL 26 2017

NEW HAMPSHIRE DEPARTMENT OF STATE

(Name of partnership, firm or corpo	oration)	
III. Name of Client	Date	e July 13, 2017
Political Contributions For each political contribution that is reportable purs firm, indicate the following:		
Full name of candidate: Bradley (Last Name)		(Middle Name/Initial)
Amount of contribution \$ 150	Office Candidate is Se	eeking State Senate
	(First Name)	(Middle Name/Initial)
Full name of candidate: Senate GOP PAC (Last Name)	(First Name)	
Full name of candidate: Senate GOP PAC (Last Name)  Amount of contribution \$ 125  If the contribution is an in-kind contribution, provide the in-kind contribution on the line above for amoun	(First Name) Office Candidate is See a description of the goods or see	(Middle Name/Initial) eeking State Senate services provided, and enter the actual cost of
Full name of candidate: Senate GOP PAC (Last Name)  Amount of contribution \$ 125  If the contribution is an in-kind contribution, provide the in-kind contribution on the line above for amoun the word "estimate".	(First Name)  Office Candidate is So e a description of the goods or st of contribution. If the actual co	(Middle Name/Initial) eeking State Senate services provided, and enter the actual cost of state is not known, enter an estimated value ar
Full name of candidate: Senate GOP PAC (Last Name)  Amount of contribution \$ 125  If the contribution is an in-kind contribution, provide the in-kind contribution on the line above for amoun the word "estimate".  Full name of candidate: Senate Democratic PAG	(First Name)  Office Candidate is Set a description of the goods or set of contribution. If the actual contribution of the actual contribution of the actual contribution of the actual contribution.	(Middle Name/Initial) eeking State Senate services provided, and enter the actual cost ost is not known, enter an estimated value a

### 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 bel	ief.
Strat Q V rachy	July 13, 2017
(Signature of lobbyist)	(Date)
Stuart D. Trachy	
(Print Name of lobbyist)	



# STATE OF NEW HAMPSHIRE

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Date	July 13, 2017
DO 400 - 774 - 11	
iant to RSA Chapter 664 paid of	n behalf of the client/lobbyist and lobbying
(First Name)	(Middle Name/Initial)
Office Candidate is Se	eking State Senate
Davis (First Name)	(Middle Name/Initial)
(First Name)	(Middle Name/Initial) eking State Senate
(First Name)  Office Candidate is Set a description of the goods or set	,
(First Name)  Office Candidate is Set a description of the goods or set	eking State Senate ervices provided, and enter the actual cost st is not known, enter an estimated value a
	(First Name)

#### Sworn Statement/Affirmation by Lobbyist

Strate D. Vrachy	July 13, 2017
Signature of lobbyist)	(Date)
tuart D. Trachy	



# STATE OF NEW HAMPSHIRE

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

II. Name of lobbyist's partnership, firm or corpo	name in any i		
(Name of partnership, firm or corp	poration)		
III. Name of Client	Date July 13, 2017		
Political Contributions For each political contribution that is reportable pur firm, indicate the following:	rsuant to RSA Chapter 664 paid o	n behalf of the client/lobbyist and lobbyin	
Full name of candidate: Morse	Chuck		
(Last Name)	(First Name)	(Middle Name/Initial)	
Amount of contribution \$ 150	Office Candidate is Se	eking State Senate	
Full name of candidate: Carson	Sharon		
Full name of candidate: <u>Carson</u> (Last Name)	Sharon (First Name)		
Full name of candidate: Carson (Last Name)  Amount of contribution \$ 100  If the contribution is an in-kind contribution, provide the in-kind contribution on the line above for amounts.	Sharon (First Name) Office Candidate is So	(Middle Name/Initial) eeking <u>State Senate</u> ervices provided, and enter the actual cos	
Full name of candidate: Carson (Last Name)  Amount of contribution \$ 100  If the contribution is an in-kind contribution, provide in-kind contribution on the line above for amount the word "estimate".	Sharon (First Name) Office Candidate is So de a description of the goods or s nt of contribution. If the actual co	(Middle Name/Initial)  Ecking State Senate  Ervices provided, and enter the actual cost is not known, enter an estimated value	
Full name of candidate: Carson (Last Name)  Amount of contribution \$ 100  If the contribution is an in-kind contribution, provide in-kind contribution on the line above for amount the word "estimate".	Sharon (First Name) Office Candidate is So de a description of the goods or s nt of contribution. If the actual co	(Middle Name/Initial) eeking <u>State Senate</u> ervices provided, and enter the actual cos	
Full name of candidate: Carson (Last Name)  Amount of contribution \$ 100  If the contribution is an in-kind contribution, provide in-kind contribution on the line above for amounthe word "estimate".  Full name of candidate: Avard	Sharon (First Name) Office Candidate is So de a description of the goods or s nt of contribution. If the actual co	(Middle Name/Initial)  eeking State Senate  ervices provided, and enter the actual cost is not known, enter an estimated value  (Middle Name/Initial)	

#### Sworn Statement/Affirmation by Lobbyist

I have read RSA 15, RSA 15-B and RSA 664 and hereby swear is true and complete to the best of my knowledge and belief.	or affirm that the foregoing information
Shatt Vially (Signature of lobbyist)	July 13, 2017 (Date)
Stuart D. Trachy (Print Name of lobbyist)	