

STATE OF NEW HAMPSHIRE 2020 Statement of Income and Expenses for LOBBYISTS

(RSA Chapter 15)

RECEIVED OCT 28 2020 NEW HAMPSHIRE DEPARTMENT OF STATE

PLEASE PRINT

| I. Name of Lobbyist(s) James J. Bianco, Jr. | | | | | | |
|---|---|--|---|--|--|--|
| II. Name of lobbyist | 's partnership, firm or corporation, i | if any: | | | | |
| Bianco Professional | Association | | | | | |
| (Na | me of partnership, firm or corporation) | | | | | |
| 18 Centre Street | Concord | NH | 03301 | | | |
| Business Address: (S | Street) (Town/City) | (State) | (Zip Code) | | | |
| (603) <u>225-7170</u> (Telephone) | (603) <u>226-0165</u> | e-mail attys@ | biancopa.com_ | | | |
| reportable expense | covers: (Choose one – file separate re transactions which are not attributab insactions occurring in the months prior | ole to any one client). | | | | |
| | (Full Name of Client as it appears on the | | | | | |
| OR ⊠ All reportable training unrelated to any part | nsactions by the lobbyist (including the icular client. | lobbyist's family), or the lobbyi | ng firm listed below which are | | | |
| IV. Date of Report Reports cover: act | April 29, 2020 ivity from date of registration to 3/31/20 | July 29, 2020 [] activity from 4/1/20 to 6/30/ | 20 | | | |
| | October 28, 2020 🛭 activity from 7/1/20 to 9/30/20 | January 27, 2021 activity from 10/1/20 to 12/ | | | | |
| If this box is checked | en no fees received and no reporta I, complete just this form and submit it t 104, Concord, NH 03301. | ble transactions made since to the Secretary of State's Office, | the last report. 107 North Main Street, | | | |
| VI Check if addition | onal reports are attached: | | | | | |
| | ived fees or made expenditures, you mu | ist file Addendum A- Fees and | Expenses | | | |
| | an honorarium or reimbursed expenses | | | | | |
| ☑ If you, your firm | n, or your family has made political con | tributions, you must file Addend | dum C- Political Contribution | | | |
| I have read RSA/15, | firmation by Lobbyist RSA 35-B, RSA 14-C and RSA 664 ar best of my knowledge and belief. | nd hereby swear or affirm that th | e foregoing information is true | | | |
| X/. | | 10.28.2020 | | | | |
| (Signature of Jobby | st) | (0 | Date) | | | |
| James J. Bianco | , Jr | | | | | |
| (Print Name of lobb | yist) | | | | | |

STATE OF NEW HAMPSHIRE

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

| I. Name of Lobbyist(s) | James J. Bianco, Jr. | | | | |
|---|-----------------------------------|---|--|--|--|
| II. Name of lobbyist's p | partnership, firm or cor | poration, if any: | | | |
| Bianco Professiona | I Association | | | | |
| • | partnership, firm or corporation) | | | | |
| | | | Date 10.28.2020 | | |
| III. Name of Client | | | Date | | |
| Political Contribution | s | | | | |
| 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: | | | | | |
| | | | | | |
| | | | | | |
| Tull same of sandidata | Committee to Elect | House Representa | atives | | |
| Full name of candidate | (Last Name) | (First Name) | (Middle Name/Initial) | | |
| | | - | • | | |
| Amount of contribution \$ | 200.00 | Office Candidate is | s Seeking House Representativ | | |
| enter an estimated value a | | | ution. If the actual cost is not known, | | |
| Full name of candidate | :(Last Name) | (First Name) | (Middle Name/Initial) | | |
| | | | • | | |
| Amount of contribution \$ | | Office Candidate is | s Seeking | | |
| If the contribution is an in actual cost of the in-kind enter an estimated value and the contribution is an in actual cost of the in-kind enter an estimated value and in actual cost of the contribution is an in actual cost of the in-kind enter an estimated value and in actual cost of the in-kind enter an estimated value and in actual cost of the in-kind enter an estimated value and in actual cost of the in-kind enter an estimated value and in actual cost of the in-kind enter an estimated value and in actual cost of the in-kind enter an estimated value and in actual cost of the in-kind enter an estimated value and in actual cost of the in-kind enter an estimated value and in actual cost of the in-kind enter an estimated value and in actual cost of the in-kind enter an estimated value and in actual cost of the in-kind enter an estimated value and in actual cost of the in-kind enter an estimated value and in actual cost of the in-kind enter an estimated value and in actual cost of the in-kind enter an estimated value and estimated value | contribution on the line abo | a description of the good ve for amount of contrib | ds or services provided, and enter the ution. If the actual cost is not known, | | |
| Full name of candidate | | | | | |
| | (Last Name) | (First Name) | (Middle Name/Initial) | | |

| If the contribution is an in-kind contribution, provide a des | scription of the goods or services provided, and enter the | | | |
|--|--|--|--|--|
| actual cost of the in-kind contribution on the line above fo enter an estimated value and the word "estimate." | r amount of contribution. If the actual cost is not known, | | | |
| enter an estimated value and the word estimate. | | | | |
| | | | | |
| | | | | |
| | | | | |
| and the state of t | at the tions on senorate addendum (forms) | | | |
| (If more than three contributions were made, report additional co | mirroutions on separate addendant & forms.) | | | |
| Sworn Statement/Affirmation by Lobbyist | | | | |
| I have read RSA 15, RSA 15-B and RSA 664 and he | ereby swear or affirm that the foregoing information | | | |
| is true and complete to the best of my knowledge and | | | | |
| | | | | |
| | 10.28.2020 | | | |
| (Signature of Jabbyist) | (Date) | | | |
| James J. Bianco, Jr. | | | | |
| (Print Name of lobbyist) | | | | |