STATE OF NEW HAMPSHIRE
Lobbyists Report of
Political Contributions
Addendum C
(RSA Chapter 15:6)

P
I. Name of Lobbyist(s) ____________________________

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

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III. Name of Client ____________________________ Date _______________________

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: __________________________

(Last Name) __________________________

(First Name) __________________________

(Middle Name/Initial) _______________________

Amount of contribution $ __________________________

Office Candidate is Seeking __________________________

N.H. Senate, 18th District

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 __________________________

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 __________________________

(turn over to continue → )
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]

Lucas Meyer
(Print Name of lobbyist)

April 23, 2020
(Date)