STATE OF NEW HAMPSHIRE

2017 Statement of Income and Expenses for LOBBYISTS

(RSA Chapter 15)

PLEASE PRINT

I. Name of Lobbyist(s) Dik Bonly	i f	the Ko	itribas
II. Name of lobbyist's partnership, firm or corporation, if a			
Dennehy & Bowley (Name of partnership, firm or corporation)	LLC		
Business Address: (Street) Cor (Town/City)	rund	NH	03301 (Zip Code)
•		(State)	(Zip Code)
(Telephone) (Telephone) (Fax)	e-	mail	
III. This statement covers: (Choose one – file separate repor reportable expense transactions which are not attributable to			file a separate report for
All reportable transactions occurring in the months prior to	the reporting d	ate relative to the	following client:
NH Nutntin Ne (Full Name of Client as it appears on the Lo	twwk	, ,	
· · · · · · · · · · · · · · · · · · ·	bbyist Registrat	ion Form)	
OR All reportable transactions by the lobbyist (including the lob unrelated to any particular client.	byist's family)	, or the lobbying f	irm listed below which are
1V. Date of Report April 26, 2017 X Reports cover: activity from date of registration to 3/31/17		26, 2017 [] 4/1/17 to 6/30/17	
October 25, 2017 [] activity from 7/1/17 to 9/30/17		ary 31, 2018 🗌 1 10/1/17 to 12/31/17	7
V. There have been no fees received and no reportable If this box is checked, complete just this form and submit it to the Concord, NH 03301.			
VI. Check if additional reports are attached:			
If you have received fees or made expenditures, you must fe		•	
If you have paid an honorarium or reimbursed expenses, yo Expense Reimbursement	u must file Ad	dendum B Repo	rt of Honorariums or
If you, your firm, or your family has made political contribu	utions, you mu	st file Addendum	C – Political Contributions
Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15-B, RSA 14-C and RSA 664 and he and complete to the best of my knowledge and belief.		affirm that the for $4 \cdot 21 \cdot 17$	regoing information is true
(Signature of John Vist)		(Date)	
(Signature of lobbyist) Dirk Boly		(Zate)	RECEIVED
(Print Name of lobbyist)			APR 2 0 2017

NEW HAMPSHIRE DEPARTMENT OF STATE

P L E A S E P R I N T

STATE OF NEW HAMPSHIRE



Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

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I. Name of Lobbyist(s) Dile Bally & A	ty Kontrolos
II. Name of lobbyist's partnership, firm or corporation, if any:	
Dennehy & Bonley, LLC (Name of partneship, firm or corporation)	
(Name of partnership, firm or corporation). III. Name of Client Ntt Nwhtm Network	L Date 4.21.17
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 greeduced by any expenses:	relations, or public relations services
a) Total of all fees received in this reporting period	a)\$ [1250
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) \$
e) Total of all fees received to date (Add lines a and b)	c) S 11250
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) 8 1250
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 in 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 eximdividual 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 lobbie (e) 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 greate restaurant expenses for a legislative reception). Expenses for honorariums, contributions will be reported on separate addendums and should not be reported.	elient and if expenditures are made by may be filed for the lobbyist(s)/firm. aggregate total of all expenses paid expenses; (b) the aggregate total of all e: meals purchased during a business as than \$10 that is given to the person d with a value of \$25.00 or less); and rting period of greater than \$25.00 for the of greater than \$25, purchase of a 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) \$
b) Total aggregate of expenditures during this reporting period , not reported in a), of \$25 or less.	b) \$
e) Total of all itemized expenditures reported in detail in section VI.	e) \$

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 is true and complete to the best of my knowledge and belief.	n that the foregoing information
Dick Bouley	4.21.17
(Signature of lobbyist)	(Date)
Dick Bolly	
(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:
Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to an particular client):
Date of Report (check one):
April 26, 2017 ☐ July 26, 2017 ☐ October 25, 2017 ☐ January 31, 2018 ☐
I have read RSA 15, RSA 15-B, RSA 664, the Statement of Income and Expenses described above, are 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 as complete to the best of my knowledge and belief.
(Signature of lobbyist) (Date)
Aux Kantonbus
(Print Name of lobbyist)