(Print Name of lobbyist)

STATE OF NEW HAMPSHIRE

2016 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

JUL 2 2 2016

RECEIVED

NEW HAMPSHIRE DEPARTMENT OF STATE

PLEASE PRINT

D' D' .	t's partnership, firm or co	rporation, if any:		
Bianco Professioi	nal Association			
(Na	ame of partnership, firm or cor	poration)	-	
18 Centre Street		Concord	NH	03301
Business Address: (S	Street)	(Town/City)	(State)	(Zip Code)
(603) 225-7170	(603)	226-0165	e-mail attys(@biancopa.com
(Telephone)	· · · · · · · · · · · · · · · · · · ·	(Fax)	· · · · · · · · · ·	 -
All reportable tra	insactions occurring in the m	nonths prior to the re	porting date relative to t	he following client:
	(Full Name of Client as it a	ppears on the Lobbyist	Registration Form)	
<u>OR</u>				
☐ All reportable tran unrelated to any parti	nsactions by the lobbyist (in icular client.	cluding the lobbyist`	s family), or the lobbying	ng firm listed below which
	April 27, 2016		(5.4	
•	ivity from date of registration	to 3/31/16 act	July 27, 2016 🛚 X ivity from 4/1/16 to 6/30/1	6
IV. Date of Report Reports cover: acti	•			
Reports cover: acti V. There have bee If this box is checked,	October 27, 2016 activity from date of registration of October 27, 2016 activity from 7/1/16 to 9/30/10 on no fees received and reference to this form and complete just this form and	16 ac no reportable tran	January 25, 2017 January 26, 2017 January 26, 2017 January 26, 2017 January 27, 2017 Januar	1/16 the last report.
Reports cover: acti V. There have bee If this box is checked, Concord, NH 03301.	October 27, 2016 activity from date of registration of October 27, 2016 activity from 7/1/16 to 9/30/10 on no fees received and reference to this form and complete just this form and	16 ac no reportable tran	January 25, 2017 January 26, 2017 January 26, 2017 January 26, 2017 January 27, 2017 Januar	1/16 the last report.
V. There have bee If this box is checked, Concord, NH 03301. VI. Check if addition	October 27, 2016 October 27, 2016 activity from 7/1/16 to 9/30/16 on no fees received and management of the position of the po	no reportable trand submit it to the Sec.	January 25, 2017 January 25, 2017 January 25, 2017 January 25, 2017 January 26, 2017 January 26, 2017 January 26, 2017 January 27, 2	the last report. State House, Room 204,
V. There have bee If this box is checked, Concord, NH 03301. VI. Check if addition	October 27, 2016 October 27, 2016 activity from 7/1/16 to 9/30/16 on no fees received and managements, complete just this form and mal reports are attached: ved fees or made expenditure an honorarium or reimburse	no reportable trand submit it to the Sec.	January 25, 2017 January 25, 2017 January 25, 2017 January 25, 2017 January 26, 2017 January 26, 2017 January 26, 2017 January 27, 2	the last report. State House, Room 204,

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn	Statement/Affirma	tion by Lobbyist
Statem	ent of Income and	Expenses for:

Name of C	lient (leave bl			ssional Association I, or corporation and not related to any
Date of Re	port (check o	ne):		
April 27, 2	2016 🗆	July 27, 2016 ဩ:	October 27, 2016	January 25, 2017 □
I have read the followi submitted):	ing Addendun	A 15-B, RSA 664, that submitted with that	e Statement of Incom at Statement (insert th	e and Expenses described above, and the number of Addendum forms being
) Ad	dendum A(s).			
Ad	dendum B(s).			
Ad	dendum C(s).			
I hereby sw	vear or affirm the best of m	that the foregoing inf y knowledge and beli	Formation on the State lef.	ment and each Addendum is true and
(Signature	·	nh		7/14/14 (Date)
	e of lobbyist)	· ·		

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 part	nership, firm, or corpo	oration: Bianco Profession	nal Association
			corporation and not related to any
particular client): NH	Snowmobile Association	on	
Date of Report (check	one):		
April 27, 2016 □	July 27, 2016 🔀	October 27, 2016 □	January 25, 2017 □
			nd Expenses described above, and umber of Addendum forms being
Addendum A(s	5).		
Addendum B(s).		
Addendum C(s).		
I hereby swear or affire complete to the lest of			nt and each Addendum is true and
(Signature of lobbyist)	In Tolich	<u> </u>	(Date)
Adam Schmidt			
(Print Name of lobbyis	t)		

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn	Stateme	nt/Affirm:	ation by	Lobbyist
Statem	ent of In	come and	Expens	es for:

Name of Lobbying partnership, firm, or corporation: Bianco Professional Association
Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any
particular client): NH Snowmobile Association
Date of Report (check one):
April 27, 2016 □ July 27, 2016 □ October 27, 2016 □ January 25, 2017 □
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)
Karen Soucy (Print Name of lobbyist)

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn	Staten	nent/Affirm	nation	by	Lobby	ist
Statem	ent of	Income an	d Expe	ense	es for:	

Name of Lobbying partner	ship, firm, or corpo	ration: Bianco Profession	al Association
			corporation and not related to any
particular client): NH Sne	owmobile Association	on	
Date of Report (check one	<i>?):</i>		
April 27, 2016 □	fuly 27, 2016 🔀	October 27, 2016 □	January 25, 2017 □
			d Expenses described above, and imber of Addendum forms being
Addendum B(s).			
Addendam b(s).			
Addendum C(s).			
I hereby swear or affirm t complete to the best of my			t and each Addendum is true and
(Signature of lobbyist)	y for	18	fully 200 6 (Date)
Kathy Corey Fo	x		
(Print Name of lobbyist)			