## STATE OF NEW HAMPSHIRE

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

## RECEIVED

APR 18 2017

NEW HAMPSHIRE DEPARTMENT OF STATE

I. Name of Lobbyist(s) Debra			
II. Name of lobbyist's partn	ership, firm or cor	poration, if any:	
Legislative	Solutions, L.L.C.		
(Name of partne	rship, firm or corporation)		
III. Name of Client			Date April 18, 2017
Political Contributions For each political contribution client/lobbyist and lobbying			oter 664 paid on behalf of the
Full name of candidate:	Feltes	Dan	
	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$ 250.	00	Office Candidate i	s Seeking Senate
actual cost of the in-kind contri	bution on the line abov		ds or services provided, and enter th ution. If the actual cost is not know
actual cost of the in-kind contri	bution on the line abov		
	bution on the line above word "estimate."  NH Senate	e for amount of contrib  Democratic Caucus	ution. If the actual cost is not know
actual cost of the in-kind contri enter an estimated value and the	bution on the line above word "estimate."	e for amount of contrib	
actual cost of the in-kind contri enter an estimated value and the	bution on the line above word "estimate."  NH Senate (Last Name)	Democratic Caucus (First Name)	ution. If the actual cost is not know
actual cost of the in-kind contrienter an estimated value and the Full name of candidate:  Amount of contribution \$ 250.  If the contribution is an in-kind actual cost of the in-kind contri	NH Senate (Last Name)  Contribution, provide a bution on the line above	Democratic Caucus (First Name) Office Candidate is a description of the good	(Middle Name/Initial) s Seeking ds or services provided, and enter th
actual cost of the in-kind contrienter an estimated value and the Full name of candidate:  Amount of contribution \$ 250.	NH Senate (Last Name)  Contribution, provide a bution on the line above	Democratic Caucus (First Name) Office Candidate is a description of the good	ution. If the actual cost is not know  (Middle Name/Initial)

# 0 1111

# STATE OF NEW HAMPSHIRE

(Name of partners)	ive Solutions, L.L.C.		
(Name of partiers)	nip, firm or corporation)		
III. Name of Client			Date April 18, 2017
Political Contributions For each political contribution client/lobbyist and lobbying fi			ter 664 paid on behalf of the
Full name of candidate:	Hennessey	Martha	
	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$ 250.00	0	Office Candidate i	s Seeking Senate
Full name of candidate:	Kahn (Last Name)	Jay (First Name)	(Middle Name/Initial)
	(Last Name)	(First Name)	(Mildule Ivallie/Illitial)
250.00	_		,
Amount of contribution \$ 250.00	0	Office Candidate is	,
If the contribution is an in-kind c	ontribution, provide a cution on the line above	— lescription of the good	,
If the contribution is an in-kind catual cost of the in-kind contribu	ontribution, provide a cution on the line above	— lescription of the good	Seeking Senate  ds or services provided, and enter the

# STATE OF NEW HAMPSHIRE

	ative Solutions, L.L.C	·	
	. ,		n . April 19 2017
III. Name of Client			Date April 18, 2017
Political Contributions For each political contribution client/lobbyist and lobbying			ter 664 paid on behalf of the
Full name of candidate:	Birdsell	Regina	
<del></del>	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$ 250.	.00	Office Candidate i	s Seeking Senate
		ve for amount of contribe	ution. If the actual cost is not know
enter an estimated value and th	e word "estimate."		ution. If the actual cost is not know
enter an estimated value and th		William (First Name)	(Middle Name/Initial)
	Gannon (Last Name)	William	(Middle Name/Initial)
Full name of candidate:  Amount of contribution \$ 250.  If the contribution is an in-kind	Gannon (Last Name) .00 I contribution, provide ibution on the line above	William (First Name) Office Candidate is a description of the good we for amount of contribu	(Middle Name/Initial)  Seeking Senate  ds or services provided, and enter the services provided. If the actual cost is not know
Full name of candidate:  Amount of contribution \$ 250.  If the contribution is an in-kind actual cost of the in-kind contri	Gannon (Last Name) .00 I contribution, provide ibution on the line above	William (First Name) Office Candidate is a description of the good we for amount of contribu	(Middle Name/Initial)  Seeking Senate  ds or services provided, and enter the actual cost is not know

# 100

L E A S E

P R I N T

# STATE OF NEW HAMPSHIRE

I. Name of Lobbyist(s)	Debra Vanderbeek, R	obert Clegg, Periklis	Karoutas, Leann Moccia
II. Name of lobbyist's part	nership, firm or corp	oration, if any:	
Legisi	ative Solutions, L.L.C.		
	ership, firm or corporation)		
III. Name of Client			Date April 18, 2017
Political Contributions For each political contribution client/lobbyist and lobbying			oter 664 paid on behalf of the
Full name of candidate:	Lasky	Bette	
	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$ 250	.00	Office Candidate i	s Seeking Senate
Full name of candidate:	Woodburn	Jeff	(A.C.1.1) A
	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$ 250	.00	Office Candidate is	s Seeking Senate
	ibution on the line above		ds or services provided, and enter the ution. If the actual cost is not known,
Full name of candidate:	Avard	Kevin	
	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$ 500	0.00	Office Candidate is	s Seeking Senate



## STATE OF NEW HAMPSHIRE

Legisla	ative Solutions, L.L.C		
(Name of partner	rship, firm or corporation)		
III. Name of Client			Date April 18, 2017
Political Contributions For each political contribution client/lobbyist and lobbying			oter 664 paid on behalf of the
Full name of candidate:	Morse	Chuck	
	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$ 500.	00	Office Candidate i	s Seeking Senate
oner air estimated value and the	e word "estimate."		
Full name of candidate:	Ward	Ruth	
		Ruth (First Name)	(Middle Name/Initial)
	Ward (Last Name)		
Full name of candidate:  Amount of contribution \$ 250.  If the contribution is an in-kind	Ward (Last Name)  00  contribution, provide bution on the line abo	(First Name) Office Candidate is a description of the good	
Full name of candidate:  Amount of contribution \$ 250.  If the contribution is an in-kind actual cost of the in-kind contri	Ward (Last Name)  00  contribution, provide bution on the line abo	(First Name) Office Candidate is a description of the good	s Seeking Senate  ds or services provided, and enter the

# To the second se

## STATE OF NEW HAMPSHIRE

Legisla	ative Solutions, L.L.C	<del>.</del>	
(Name of partne	rship, firm or corporation)		
III. Name of Client			Date April 18, 2017
Political Contributions For each political contributions client/lobbyist and lobbying			oter 664 paid on behalf of the
Full name of candidate:	Gray	James	
<del></del>	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$ 250.	00	Office Candidate i	s Seeking Senate
enter an estimated value and the	e word "estimate."		
		Harold	
	French	Harold (First Name)	(Middle Name/Initial)
Full name of candidate:  Amount of contribution \$ 250.	French (Last Name)	Harold (First Name) Office Candidate is	(Middle Name/Initial)
Full name of candidate:  Amount of contribution \$ 250.  If the contribution is an in-kind	French (Last Name)  00  contribution, provide bution on the line abo	(First Name)  Office Candidate is a description of the good	s Seeking Senate  ds or services provided, and enter the
Full name of candidate:  Amount of contribution \$ 250.  If the contribution is an in-kind actual cost of the in-kind contri	French (Last Name)  00  contribution, provide bution on the line abo	(First Name)  Office Candidate is a description of the good	

,
-

.

# 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

(Print Name of lobbyist)

Statement of Incon	e and Expenses for:	•		
Name of Lobbying pa	rtnership, firm, or corpo	oration: Legislative Solution	ns	
Name of Client (leave particular client):	blank if Statement is fo	or the partnership, firm, or	corporation and not related	to any
Date of Report (check				
April 26, 2017	July 26, 2017 🗆	October 25, 2017 □	January 31, 2018 □	
-			nd Expenses described about timber of Addendum forms	
Addendum A	(s).			
Addendum B(				
Addendum C	s).			
	rm that the foregoing in f my knowledge and be		nt and each Addendum is to	rue and
Xoust C	Keen 8	April	18, 2017	
(Signature of lobbyist	) [		(Date)	
Robert Clegg				

## 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.

Periklis Karoutas

(Print Name of lobbyist)

	ffirmation by Lobby te and Expenses for:	•		
Name of Lobbying pa	rtnership, firm, or corpo	oration: Legislative S	olutions	_
Name of Client (leave	blank if Statement is fo	or the partnership, firm, or	corporation and not related to as	ıy
particular client):				-
Date of Report (check	one):			
April 26, 2017	July 26, 2017 □	October 25, 2017 🗆	January 31, 2018 □	
			nd Expenses described above, ar umber of Addendum forms beir	
Addendum A(	s).			
Addendum B(	s).			
Addendum C(	s).			
•	m that the foregoing in that the foregoing in the thing knowledge and be		Apm 18, 2017	ıd
(Signature of lobbyist)			(Date)	

# 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.

(Print Name of lobbyist)

	Mirmation by Lobby te and Expenses for:	v .	
Name of Lobbying pa	rtnership, firm, or corpo	oration: Legislative S	olutions
Name of Client (leave	blank if Statement is for	or the partnership, firm, or	corporation and not related to any
particular client):			·-
Date of Report (check	k one):		
April 26, 2017	July 26, 2017 🛚	October 25, 2017 □	January 31, 2018 □
			nd Expenses described above, and umber of Addendum forms being
Addendum A	(s).		
Addendum B	(s).		
Addendum Co			
	rm that the foregoing in f my knowledge and be		nt and each Addendum is true and
Signature of lobbyist	Mocia		April 18, 2017
	,		(======)
Leann Moccia			