

4/28/11  
RW  
12:20

**New Hampshire General Court**  
**New Hampshire Senate**  
**Declaration of Intent**

Name RAYMOND WHITE NH Senate District 9 Date 4/28/2011  
Bill(s) or Activity in Question HB 102

I WILL participate X I WILL NOT participate \_\_\_\_\_

NOTE: IF YOU HAVE CHOSEN NOT TO PARTICIPATE, NO OTHER INFORMATION IS NECESSARY.

Public or private entities affected: \_\_\_\_\_

Nature of benefit to the legislator: \_\_\_\_\_

Nature of financial interest in the issue: \_\_\_\_\_

Nature of relationship between legislator and any affected person or entity: I AM

REGULATED BY 2 OF THESE DEPARTMENTS

CONSIDERED IN THIS BILL

Additional Information: \_\_\_\_\_

Signature: 

TW  
4/28

New Hampshire General Court  
New Hampshire Senate  
Declaration of Intent

Name RAYMOND WHITE NH Senate District 9 Date 4/26/2011  
Bill(s) or Activity in Question HB 173

I WILL participate X

I WILL NOT participate \_\_\_\_\_

NOTE: IF YOU HAVE CHOSEN NOT TO PARTICIPATE, NO OTHER INFORMATION IS NECESSARY.

Public or private entities affected: \_\_\_\_\_

Nature of benefit to the legislator: \_\_\_\_\_

Nature of financial interest in the issue: \_\_\_\_\_

Nature of relationship between legislator and any affected person or entity: THE JASPER  
FAMILY ARE CLIENTS OF MINE IN MY  
INSURANCE BUSINESS.

Additional Information: \_\_\_\_\_

Signature: 

4/19/11  
12:10 PM  
Carl

New Hampshire General Court  
New Hampshire Senate  
Declaration of Intent

Name RAYMOND WHITE NH Senate District 9 Date 4/19/2011  
Bill(s) or Activity in Question HB 175

I WILL participate X I WILL NOT participate \_\_\_\_\_

NOTE: IF YOU HAVE CHOSEN NOT TO PARTICIPATE, NO OTHER INFORMATION IS NECESSARY.


Public or private entities affected: \_\_\_\_\_

Nature of benefit to the legislator: I SELL BOTH INDIVIDUAL  
AND GROUP INSURANCE

Nature of financial interest in the issue: I AM LICENSED WITH  
ANTHEM BC/BS

Nature of relationship between legislator and any affected person or entity: \_\_\_\_\_

Additional Information: \_\_\_\_\_

Signature: 

**New Hampshire General Court**  
**New Hampshire Senate**  
**Declaration of Intent**

Name RAYMOND WHITE NH Senate District 9 Date 4/7/2011

Bill(s) or Activity in Question HB 333-FN-A

I WILL participate X

I WILL NOT participate \_\_\_\_\_

NOTE: IF YOU HAVE CHOSEN NOT TO PARTICIPATE, NO OTHER INFORMATION IS NECESSARY.

Public or private entities affected: \_\_\_\_\_

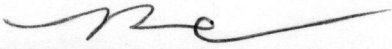
Nature of benefit to the legislator: \_\_\_\_\_

Nature of financial interest in the issue: \_\_\_\_\_

Nature of relationship between legislator and any affected person or entity: LEMAY

BEKF IS AN INSURANCE CLIENT OF MINE

Additional Information: \_\_\_\_\_

Signature: 



**New Hampshire General Court**  
**New Hampshire Senate**  
**Declaration of Intent**

Name RAYMOND WHITE NH Senate District 9 Date 4/7/2011

Bill(s) or Activity in Question HB 333-FN-A

I WILL participate X

I WILL NOT participate \_\_\_\_\_

NOTE: IF YOU HAVE CHOSEN NOT TO PARTICIPATE, NO OTHER INFORMATION IS NECESSARY.

Public or private entities affected: \_\_\_\_\_

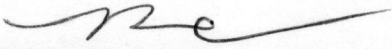
Nature of benefit to the legislator: \_\_\_\_\_

Nature of financial interest in the issue: \_\_\_\_\_

Nature of relationship between legislator and any affected person or entity: LEMA

BEFF IS AN INSURANCE CLIENT OF MINE

Additional Information: \_\_\_\_\_

Signature: 

4/15/11  
4:10 PM

**New Hampshire General Court**  
**New Hampshire Senate**  
**Declaration of Intent**

Name RAYMOND WHITE NH Senate District 9 Date 4/14/2011  
Bill(s) or Activity in Question H3450

I WILL participate ~~NO~~ X

I WILL NOT participate \_\_\_\_\_

NOTE: IF YOU HAVE CHOSEN NOT TO PARTICIPATE, NO OTHER INFORMATION IS NECESSARY.

Public or private entities affected: \_\_\_\_\_

Nature of benefit to the legislator: \_\_\_\_\_

Nature of financial interest in the issue: \_\_\_\_\_

Nature of relationship between legislator and any affected person or entity: MY COMPANY

INSURES INNOVATIONS DAY SPA, WHO  
TESTIFIED AND IS AFFECTED BY THE BILL

Additional Information: (JOHN ST. LAURENT)

Signature: \_\_\_\_\_

**New Hampshire General Court**  
**New Hampshire Senate**  
**Declaration of Intent**

Name RAYMOND WHITE NH Senate District 9 Date 6/9/2011

Bill(s) or Activity in Question HB 601

I WILL participate X

I WILL NOT participate \_\_\_\_\_

NOTE: IF YOU HAVE CHOSEN NOT TO PARTICIPATE, NO OTHER INFORMATION IS NECESSARY.

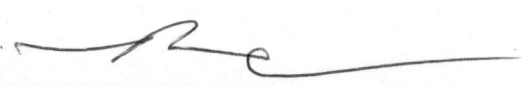
Public or private entities affected: \_\_\_\_\_

Nature of benefit to the legislator: \_\_\_\_\_

Nature of financial interest in the issue: I PAY FEES AND  
AM LICENSED BY THE NH INSURANCE  
DEPT.

Nature of relationship between legislator and any affected person or entity: \_\_\_\_\_

Additional Information: \_\_\_\_\_

Signature: 

**New Hampshire General Court**  
**New Hampshire Senate**  
**Declaration of Intent**

Name RAYMOND WHITE NH Senate District 9 Date 6/9/2011

Bill(s) or Activity in Question HB 601

I WILL participate X

I WILL NOT participate \_\_\_\_\_

NOTE: IF YOU HAVE CHOSEN NOT TO PARTICIPATE, NO OTHER INFORMATION IS NECESSARY.

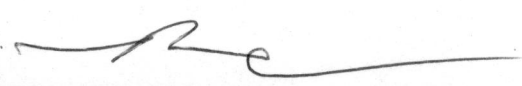
Public or private entities affected: \_\_\_\_\_

Nature of benefit to the legislator: \_\_\_\_\_

Nature of financial interest in the issue: I PAY FEES AND  
AM LICENSED BY THE NH INSURANCE  
DEPT.

Nature of relationship between legislator and any affected person or entity: \_\_\_\_\_

Additional Information: \_\_\_\_\_

Signature: 

4/9/11  
12:50

New Hampshire General Court  
New Hampshire Senate  
Declaration of Intent

Name RAYMOND WHITE NH Senate District 9 Date 4/6/2011  
Bill(s) or Activity in Question HB 95

I WILL participate X

I WILL NOT participate \_\_\_\_\_

NOTE: IF YOU HAVE CHOSEN NOT TO PARTICIPATE, NO OTHER INFORMATION IS NECESSARY.

Public or private entities affected: \_\_\_\_\_

Nature of benefit to the legislator: \_\_\_\_\_


Nature of financial interest in the issue: \_\_\_\_\_

Nature of relationship between legislator and any affected person or entity: I AM

A LICENSED PRODUCER WITH ANTIHUMAN

BLUE CROSS / BLUE SHIELD OF NH

Additional Information: \_\_\_\_\_

Signature: 

DEC 9 REC'D

DEC 9 REC'D

New Hampshire General Court  
New Hampshire Senate  
Declaration of Intent

DEC 9 REC'D

Name RAYMOND WHITE NH Senate District 9 Date 12/8/11  
Bill(s) or Activity in Question SB 185

I WILL participate ☒

I WILL NOT participate ☐

NOTE: IF YOU HAVE CHOSEN NOT TO PARTICIPATE, NO OTHER INFORMATION IS NECESSARY.

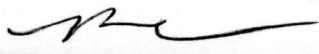
Public or private entities affected: \_\_\_\_\_

Nature of benefit to the legislator: \_\_\_\_\_

Nature of financial interest in the issue: I AM REGULATED BY  
DEPT OF INSURANCE AND BUREAU OF  
SECURITIES REGULATION

Nature of relationship between legislator and any affected person or entity: \_\_\_\_\_

Additional Information: \_\_\_\_\_

Signature: 



New Hampshire General Court  
New Hampshire Senate  
Declaration of Intent

Name RAYMOND WHITE NH Senate District 9 Date 3/8/2011  
Bill(s) or Activity in Question SB 110

I WILL participate X

I WILL NOT participate \_\_\_\_\_

NOTE: IF YOU HAVE CHOSEN NOT TO PARTICIPATE, NO OTHER INFORMATION IS NECESSARY.

Public or private entities affected: \_\_\_\_\_


Nature of benefit to the legislator: \_\_\_\_\_

Nature of financial interest in the issue: \_\_\_\_\_

Nature of relationship between legislator and any affected person or entity: \_\_\_\_\_

ATTY ~~JOHN~~ JOHN CROWIN OF MANCHESTER  
IS A CLIENT OF MINE AND A PARTY

Additional Information: TO THIS LEGISLATION ~~AS~~ AS A  
LANDLORD

Signature: 

**New Hampshire General Court**  
**New Hampshire Senate**  
**Declaration of Intent**

Name RAYMOND WHITE NH Senate District 9 Date 2/8/2011  
Bill(s) or Activity in Question SB 116

I WILL participate X

I WILL NOT participate \_\_\_\_\_

NOTE: IF YOU HAVE CHOSEN NOT TO PARTICIPATE, NO OTHER INFORMATION IS NECESSARY.

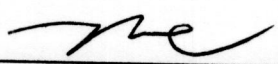
Public or private entities affected: \_\_\_\_\_

Nature of benefit to the legislator: \_\_\_\_\_

Nature of financial interest in the issue: \_\_\_\_\_

Nature of relationship between legislator and any affected person or entity: GAM. From whom  
IS AN INSURANCE CLIENT OF MINE

Additional Information: \_\_\_\_\_

Signature: 

New Hampshire General Court  
New Hampshire Senate  
Declaration of Intent

Name RAYMOND WHITE NH Senate District 9 Date 3/8/2011  
Bill(s) or Activity in Question SB 119

I WILL participate X

I WILL NOT participate \_\_\_\_\_

NOTE: IF YOU HAVE CHOSEN NOT TO PARTICIPATE, NO OTHER INFORMATION IS NECESSARY.

Public or private entities affected: \_\_\_\_\_

Nature of benefit to the legislator: \_\_\_\_\_

Nature of financial interest in the issue: I AM AN INSURANCE AGENT  
WHO SELLS COMMERCIAL GROUP HEALTH  
INSURANCE

Nature of relationship between legislator and any affected person or entity: \_\_\_\_\_

Additional Information: \_\_\_\_\_

Signature: re

rec: 2/22/11

New Hampshire General Court  
New Hampshire Senate  
Declaration of Intent

Name RAYMOND WHITE NH Senate District 9 Date 2/17/2011  
Bill(s) or Activity in Question SB 157-FN

I WILL participate X I WILL NOT participate \_\_\_\_\_

NOTE: IF YOU HAVE CHOSEN NOT TO PARTICIPATE, NO OTHER INFORMATION IS NECESSARY.


Public or private entities affected: \_\_\_\_\_

Nature of benefit to the legislator: \_\_\_\_\_

Nature of financial interest in the issue: I HAVE INSURANCE CLIENTS  
THAT ARE INVOLVED IN WEIGHTS + MEASURES  
(SCALE / METER COMPANIES)

Nature of relationship between legislator and any affected person or entity: \_\_\_\_\_  
NORTHEAST SCALE IS A INSURANCE AND PENSION  
CLIENT OF MINE, RON BOISVERT WAS A  
CLIENT OF MINE PREVIOUSLY

Additional Information: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature: 

rec: 2/22/11

New Hampshire General Court  
New Hampshire Senate  
Declaration of Intent

Name RAYMOND WHITE NH Senate District 9 Date 2/22/2011  
Bill(s) or Activity in Question SB 162 FN

I WILL participate X

I WILL NOT participate \_\_\_\_\_

NOTE: IF YOU HAVE CHOSEN NOT TO PARTICIPATE, NO OTHER INFORMATION IS NECESSARY.

Public or private entities affected: \_\_\_\_\_

Nature of benefit to the legislator: \_\_\_\_\_

Nature of financial interest in the issue: I AM A LICENSED  
INSURANCE AGENT AND EARN A LIVING  
FROM INSURANCE

Nature of relationship between legislator and any affected person or entity: \_\_\_\_\_

Additional Information: \_\_\_\_\_

Signature: 

rec: 2/22/11

New Hampshire General Court  
New Hampshire Senate  
Declaration of Intent

Name RAYMOND WHITE NH Senate District 9 Date 2/22/2011  
Bill(s) or Activity in Question SB 163 FN

I WILL participate X

I WILL NOT participate \_\_\_\_\_

NOTE: IF YOU HAVE CHOSEN NOT TO PARTICIPATE, NO OTHER INFORMATION IS NECESSARY.

Public or private entities affected: \_\_\_\_\_

Nature of benefit to the legislator: \_\_\_\_\_

Nature of financial interest in the issue: I AM AN INSURANCE  
AGENT AND WORK IN THE INSURANCE  
BUSINESS

Nature of relationship between legislator and any affected person or entity: \_\_\_\_\_

Additional Information: \_\_\_\_\_

Signature: \_\_\_\_\_



**New Hampshire General Court**  
**New Hampshire Senate**  
**Declaration of Intent**

Name RAYMOND WHITE NH Senate District 9 Date 2/10/2011  
Bill(s) or Activity in Question SB 170

I WILL participate X

I WILL NOT participate \_\_\_\_\_

NOTE: IF YOU HAVE CHOSEN NOT TO PARTICIPATE, NO OTHER INFORMATION IS NECESSARY.

Public or private entities affected: \_\_\_\_\_

Nature of benefit to the legislator: \_\_\_\_\_

Nature of financial interest in the issue: \_\_\_\_\_

Nature of relationship between legislator and any affected person or entity: I AM

A LICENSED INSURANCE AGENT. THIS  
IS AN INSURANCE BILL

Additional Information: \_\_\_\_\_

Signature: \_\_\_\_\_

3-17-11  
4:57 PM

New Hampshire General Court  
New Hampshire Senate  
Declaration of Intent

Name RAYMOND WHITE NH Senate District 9 Date 3/15/2011  
Bill(s) or Activity in Question SB 179

I WILL participate X

I WILL NOT participate \_\_\_\_\_

NOTE: IF YOU HAVE CHOSEN NOT TO PARTICIPATE, NO OTHER INFORMATION IS NECESSARY.

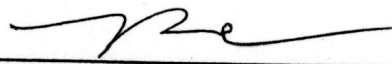
Public or private entities affected: \_\_\_\_\_

Nature of benefit to the legislator: \_\_\_\_\_

Nature of financial interest in the issue: I AM AN EMPLOYEE BENEFITS  
BROKER AND EARN COMMISSIONS FROM THE  
SALE OF GROUP HEALTH INSURANCE

Nature of relationship between legislator and any affected person or entity: \_\_\_\_\_

Additional Information: \_\_\_\_\_

Signature: 

**New Hampshire General Court**  
**New Hampshire Senate**  
**Declaration of Intent**

Name RAYMOND WHITE NH Senate District 9 Date 2/29/2011  
Bill(s) or Activity in Question SB 186

I WILL participate X

I WILL NOT participate \_\_\_\_\_

NOTE: IF YOU HAVE CHOSEN NOT TO PARTICIPATE, NO OTHER INFORMATION IS NECESSARY.


Public or private entities affected: \_\_\_\_\_

Nature of benefit to the legislator: \_\_\_\_\_

Nature of financial interest in the issue: I EARN INCOME FROM THE  
INSURANCE AND SECURITIES BUSINESS.

Nature of relationship between legislator and any affected person or entity: I AM  
REGULATED BY THE DEPARTMENT OF  
INSURANCE AND SECURITIES DEPARTMENT

Additional Information: I AM IN THE INSURANCE AND  
INVESTMENT BUSINESS, AND EARN A LIVING  
FROM IT.

Signature: 

DEC 9 REC'D

New Hampshire General Court  
New Hampshire Senate  
Declaration of Intent

Name RAYMOND WHITE NH Senate District 9 Date 12/8/11

Bill(s) or Activity in Question SB 186

I WILL participate ☒

I WILL NOT participate ☐

NOTE: IF YOU HAVE CHOSEN NOT TO PARTICIPATE, NO OTHER INFORMATION IS NECESSARY.

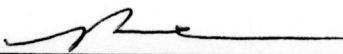
Public or private entities affected: \_\_\_\_\_

Nature of benefit to the legislator: \_\_\_\_\_

Nature of financial interest in the issue: I AM REGULATED BY  
DEPT OF INSURANCE AND BUREAU OF  
SECURITIES REGULATION

Nature of relationship between legislator and any affected person or entity: \_\_\_\_\_

Additional Information: \_\_\_\_\_

Signature: 

**New Hampshire General Court**  
**New Hampshire Senate**  
**Declaration of Intent**

Name RAYMOND WHITE NH Senate District 9 Date 2/29/2011  
Bill(s) or Activity in Question SB 186

I WILL participate X

I WILL NOT participate \_\_\_\_\_

NOTE: IF YOU HAVE CHOSEN NOT TO PARTICIPATE, NO OTHER INFORMATION IS NECESSARY.


Public or private entities affected: \_\_\_\_\_

Nature of benefit to the legislator: \_\_\_\_\_

Nature of financial interest in the issue: I EARN INCOME FROM THE  
INSURANCE AND SECURITIES BUSINESS.

Nature of relationship between legislator and any affected person or entity: I AM  
REGULATED BY THE DEPARTMENT OF  
INSURANCE AND SECURITIES DEPARTMENT

Additional Information: I AM IN THE INSURANCE AND  
INVESTMENT BUSINESS, AND EARN A LIVING  
FROM IT.

Signature: 



DEC 9 REC'D

New Hampshire General Court  
New Hampshire Senate  
Declaration of Intent

Name RAYMOND WHITE NH Senate District 9 Date 12/8/11  
Bill(s) or Activity in Question SB 188

I WILL participate ✓

I WILL NOT participate \_\_\_\_\_

NOTE: IF YOU HAVE CHOSEN NOT TO PARTICIPATE, NO OTHER INFORMATION IS NECESSARY.

Public or private entities affected: \_\_\_\_\_

Nature of benefit to the legislator: \_\_\_\_\_

Nature of financial interest in the issue: I AM REGULATED BY  
THE BUREAU OF SECURITIES REGULATION

Nature of relationship between legislator and any affected person or entity: \_\_\_\_\_

Additional Information: \_\_\_\_\_

Signature: 



**New Hampshire General Court**  
**New Hampshire Senate**  
**Declaration of Intent**

Name RAYMOND WHITE NH Senate District 9 Date 2/24/2011

Bill(s) or Activity in Question SB 188 FN

I WILL participate X

I WILL NOT participate \_\_\_\_\_

NOTE: IF YOU HAVE CHOSEN NOT TO PARTICIPATE, NO OTHER INFORMATION IS NECESSARY.

Public or private entities affected: \_\_\_\_\_

Nature of benefit to the legislator: I EARN INCOME FROM  
BOTH SECURITIES AND INSURANCE

Nature of financial interest in the issue: I EARN INCOME FROM  
INSURANCE AND SECURITIES

Nature of relationship between legislator and any affected person or entity: \_\_\_\_\_

I AM REGULATED BY BOTH INSURANCE  
DEPARTMENT AND SECURITIES DEPARTMENT

Additional Information: \_\_\_\_\_

Signature: \_\_\_\_\_

2-1-11 1:50

New Hampshire General Court  
New Hampshire Senate  
Declaration of Intent

Name RAYMOND WHITE NH Senate District 9 Date 2/1/2011

Bill(s) or Activity in Question SB 50

I WILL participate X

I WILL NOT participate \_\_\_\_\_

NOTE: IF YOU HAVE CHOSEN NOT TO PARTICIPATE, NO OTHER INFORMATION IS NECESSARY.

Public or private entities affected: \_\_\_\_\_

Nature of benefit to the legislator: I AM A PARTY TO 2

TRUSTS

Nature of financial interest in the issue: \_\_\_\_\_

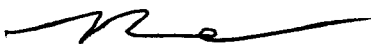
Nature of relationship between legislator and any affected person or entity: \_\_\_\_\_

Additional Information: I CREATED A SPECIAL NEEDS

IRREVOCABLE TRUST FOR MY SON.

I AM GRANTOR AND TRUSTEE ON A

REVOCABLE FAMILY TRUST

Signature: 

Commerce  
8-12-11  
3:20pm

**New Hampshire General Court**  
**New Hampshire Senate**  
**Declaration of Intent**

Name RAYMOND WHITE NH Senate District 9 Date 8/9/2011  
Bill(s) or Activity in Question SB 74

I WILL participate X

I WILL NOT participate \_\_\_\_\_

NOTE: IF YOU HAVE CHOSEN NOT TO PARTICIPATE, NO OTHER INFORMATION IS NECESSARY.


Public or private entities affected: \_\_\_\_\_

Nature of benefit to the legislator: \_\_\_\_\_

Nature of financial interest in the issue: I AM LICENSED WITH  
NUMEROUS LIFE INSURANCE COMPANIES

Nature of relationship between legislator and any affected person or entity: \_\_\_\_\_

Additional Information: \_\_\_\_\_

Signature: 

Commerce  
8-12-11  
3:20pm

**New Hampshire General Court**  
**New Hampshire Senate**  
**Declaration of Intent**

Name RAYMOND WHITE NH Senate District 9 Date 8/9/2011  
Bill(s) or Activity in Question SB 74

I WILL participate X

I WILL NOT participate \_\_\_\_\_

NOTE: IF YOU HAVE CHOSEN NOT TO PARTICIPATE, NO OTHER INFORMATION IS NECESSARY.


Public or private entities affected: \_\_\_\_\_

Nature of benefit to the legislator: \_\_\_\_\_

Nature of financial interest in the issue: I AM LICENSED WITH  
NUMEROUS LIFE INSURANCE COMPANIES

Nature of relationship between legislator and any affected person or entity: \_\_\_\_\_

Additional Information: \_\_\_\_\_

Signature: 

**New Hampshire General Court**  
**New Hampshire Senate**  
**Declaration of Intent**

Name RAYMOND WHITE NH Senate District 9 Date 2/8/2011  
Bill(s) or Activity in Question SB 89

I WILL participate X

I WILL NOT participate \_\_\_\_\_

NOTE: IF YOU HAVE CHOSEN NOT TO PARTICIPATE, NO OTHER INFORMATION IS NECESSARY.

Public or private entities affected: \_\_\_\_\_

Nature of benefit to the legislator: I OWN AN EMPLOYEE BENEFIT  
COMPANY, COMPANY BENEFIT AND RETIREMENT GROUP,  
INC AND COMPETE DIRECTLY WITH LEASING COMPANY  
Nature of financial interest in the issue: IN MY BUSINESS

Nature of relationship between legislator and any affected person or entity: \_\_\_\_\_

Additional Information: \_\_\_\_\_

Signature: 