STATE OF NEW HAMPSHIRE

2021 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

PLEASE PRINT

RECEWED

JAN 26 2022

I. Name of Lobbyist(s) _	Jim Merrill and Kathy Corey-Fox		NEW HAMPSHIRE
II. Name of lobbyist's pa	rtnership, firm or corporation, if any:		DEPARTMENT OF STATE
The Bernstein Shur C	•		
	f partnership, firm or corporation)		
670 N. Commercial S	Street, P.O. Box 1120, Manchester N	NH 03105	
Business Address: (Street)	(Town/City)	(State)	(Zip Code)
603 665 8853	603 623-7773	e-mail jim.merrill@	bernsteinshur com
(Telephone)	(Fax)	o-man _jormorm(a)	,oomstanding
reportable expense trans	s: (Choose one – file separate reports for actions which are not attributable to any ions occurring in the months prior to the re	y one client).	•
		porting date relative to the for	lowing chent:
	Camp Walt Whitman all Name of Client as it appears on the Lobbyist	Deliver E	
<u>OR</u>	ons by the lobbyist (including the lobbyist)	,	listed below which are
Reports cover: activity fr	ectober 27, 2021	July 28, 2021 ivity from 4/1/21 to 6/30/21 January 26, 2022 tivity from 10/1/21 to 12/31/21	\
If this box is checked, com State House, Room 204, Co	fees received and no reportable tran plete just this form and submit it to the Section on Cord, NH 03301.	sactions made since the la retary of State's Office, 107 N	st report. orth Main Styeet,
If you have paid an ho Expense Reimbursement	eports are attached: ees or made expenditures, you must file Ad norarium or reimbursed expenses, you mus our family has made political contributions	st file Addendum B Report o	of Honorariums or
(Signature of lobbyist)	ation by Lobbyist 15-B, RSA 14-C and RSA 664 and hereby my knowledge and belief.	swear or affirm that the forego	oing information is true
Print Name of Johnviet)			

	(If more than three contrib	outions were made, report addit	tional contributions on separa	te addendum C forms.)	
		firmation by Lobbyist			
	I have read RSA 15, I	RSA 15-B and RSA 664	and hereby swear or affi	rm that the foregoing inform	ation
	is true and complete t	o the best of my knowled	lge and belief.		
				1-25-22	
	(Signature of lobbyis	t)		1-25-22 (Date)	
	Jim Merrill		·	(Date)	
			·	(Date)	
	Jim Merrill		·	(Date)	
	Jim Merrill		· · · · · · · · · · · · · · · · · · ·	(Date)	
•	Jim Merrill		i	(Date)	
	Jim Merrill		· · · · · · · · · · · · · · · · · · ·	(Date)	



STATE OF NEW HAMPSHIRE

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

II. Name of lobbyis The Bernstein S	Shur Group					· · · · · · · · · · · · · · · · · · ·	-	
	•	, firm or corporatio	m)				. :	
		, min or corporation It Whitman				1/	25/2	റാറ
III. Name of Client	Camp vva			<u> </u>	· .		23/2	022 .
Political Contribu For each political c	ontribution t	hat is reportab	le pursu	ant to RS	A Chapter	664 paid (on behal	lf of the
client/lobbyist and	lobbying firr	n, indicate the	followi	ng:				
·			-	<u></u>		<u> </u>	·.	
Full name of candid	_{date:} Chu	ck Morse	e					
Amount of contributi	252	(Last Name)		(First Name Candidate i	s Seeking	(Middle State \$	Name/Ini Sena	tial) I te
ectual cost of the in-kenter an estimated va			bove for	amount of	contributio	on. If the ac	tual cost	is not kno
			bove for	amount of	contributio	on. If the ac	ctual cost	is not kno
enter an estimated va	lue and the wo		bove for	amount of	contributio	n. If the ac	tual cost	is not kno
nter an estimated va	lue and the wo			(First Name			Name/Ini	
enter an estimated va	date:	ord "estimate."		(First Name		(Middle		
Full name of candidamount of contribution is a ctual cost of the in-k	date: on \$ an in-kind corkind contribution	(Last Name) attribution, provion on the line a	Officide a desc	(First Name	e is Seekin	(Middle	Name/Ini	tial)
Full name of candidamount of contribution is actual cost of the in-k	date: on \$ an in-kind corkind contribution	(Last Name) attribution, provion on the line a	Officide a desc	(First Name	e is Seekin	(Middle	Name/Ini	tial)
Full name of candidamount of contribution is actual cost of the in-k	date: on \$ an in-kind corkind contribution	(Last Name) attribution, provion on the line a	Officide a desc	(First Name	e is Seekin	(Middle	Name/Ini	tial)
oull name of candidamount of contribution is ctual cost of the in-k	date: on \$ an in-kind corkind contribution	(Last Name) attribution, provion on the line a	Officide a desc	(First Name	e is Seekin	(Middle	Name/Ini	tial)
	date: on \$ an in-kind cor cind contributi	(Last Name) attribution, provion on the line a	Officide a desc	(First Name	e is Seekin	(Middle	Name/Ini	tial)