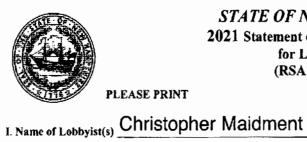
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#### STATE OF NEW HAMPSHIRE 2021 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

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NEW HAMPSHIRE DEPARTMENT OF STATE

| II. Name of lob    | byist's partnership,  | firm or co                           | rporation, if any:     |                        |   |       |
|--------------------|---|--------------------------------------|------------------------|------------------------|---|-------|
| American           | ns for Prosp  | erity N                              | lew Hamps              | hire                   |   |       |
|                    | (Name of partnership  |                                      |                        |                        |   |       |
| 8025               | S Willow S  | t #205                               | Mancheste              | er NH                  | 03103   |       |
| Business Address:  | (Street)  |                                      | (Town/City)            | (State)                | (Zip Code)  |       |
| 603 440            | 9937  | ( )                                  |                        | e-mail CM              | aidment@afphq.org                                 |       |
| (Teleph            |   | _ ( ),                               | (Fax)                  | C-man                  |   | ,     |
|                    | ent covers: (Choose<br>ense transactions wh                     |                                      |                        |                        | ou may file a separate re                         | port  |
| All reportabl      | le transactions occurr  | ing in the n                         | nonths prior to the re | porting date relativ   | e to the following client:                        |       |
| •                  | ns for Prosp  | -                                    | -                      |                        |   |       |
| Americai           |   |                                      | ppears on the Lobbyis  |                        |   |       |
| <u>OR</u>          | (i dii i taine oi   | Chom as it a                         | promis on the boody is | g.aaon i omij          |   |       |
|                    | e transactions by the particular client.                        | lobbyist (in                         | cluding the lobbyist   | s family), or the lo   | bbying firm listed below v                        | vhich |
| IV. Date of Rep    | ort April 28, 20  | 21                                   |                        | July 28, 2021          | 7   |       |
| Reports cover:     | activity from date of   |                                      | to 3/31/21 aci         | ivity from 4/1/21 to 6 | /30/21  |       |
|                    | October 27,   |                                      |                        | January 26, 202        |   |       |
|                    | activity from 7/1   | 1/21 to 9/30/1                       | 21 ac                  | tivity from 10/1/21 to | 12/31/21  |       |
| If this box is che |   | his form and                         |                        |                        | nce the last report.<br>fice, 107 North Main Stre | et,   |
| VI. Check if add   | ditional reports are  | attached:                            |                        |                        |   |       |
|                    | received fees or mad  |                                      | res, you must file Ac  | ldendum A Fees         | and Expenses                                      |       |
| If you have p      | paid an honorarium o  |                                      |                        |                        | B— Report of Honorariums                          | s or  |
| Expense Reimbu     |   |                                      |                        |                        |   |       |
| If you, your       | firm, or your family  | has made p                           | olitical contributions | , you must file Add    | lendum C– Political Cont                          | tribu |
|                    |   |                                      |                        |                        |   |       |
| I have read RSA    | nt/Affirmation by L<br>15, RSA 15-B, RSA<br>the best of my know | 14-C and I                           |                        | swear or affirm the    | t the foregoing information                       | n is  |
| Christopher M      | aidment Digitally signed by Date: 2021.07.23                    | Christopher Maid<br>11:23:04 -04'00' | ment                   | 07/23/20               | 21  |       |
| (Signature of lol  | bbyist)   |                                      |                        |                        | (Date)  |       |
| Christoph          | ner Maidme  | nt                                   |                        |                        |   |       |
| (Print Name of 1   |   |                                      |                        |                        |   |       |

 $_{a)}$   $^{0}$ 

<sub>c)</sub> \$ 0



I. Name of Lobbyist(s) Christopher Maidment

a) Total aggregate expenses for this reporting period for salaries, benefits,

support staff, and office expenses, related directly or indirectly to lobbying.

b) Total aggregate of expenditures during this reporting period, not reported

c) Total of all itemized expenditures reported in detail in section VI.

in a), of \$25 or less.

### STATE OF NEW HAMPSHIRE

#### **Lobbyists Fees and Expenses** Addendum A

(RSA Chapter 15:6)

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| (Name of partnership, firm or corporation)   |   |
|--|---|
| III. Name of Client  | Date  |
| IV. Fees Received Indicate the gross amount of all fees received from the client id to lobbying, including fees for services such as public advocacincluding research, monitoring legislation, and related legal wreduced by any expenses:   | y, government relations, or public relations service overk. The gross fee amount reported shall not be  |
| a) Total of all fees received in this reporting period   | a) \$ _1033.66  |
| b) Total of all fees received this calendar year, prior to this repo<br>(This should equal the total of all prior monthly reports for t  | orting period b) \$ 0   |
| c) Total of all fees received to date (Add lines a and b)  | c) \$ 1033.66   |
| <li>d) Indicate the amount of any such fees that are due, but have n<br/>yet been paid</li>  | ot d) \$  |
| V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are refees. Separate reports are to be filed for expenditures made release. Separate reports are to be filed for expenditures made release the lobbyist(s)/firm that are unrelated to any one client a sepenate separate reporting period for salaries, benefits, support staff, individual expenses where the expenditure was of \$25.00 or le lunch where the cost was \$25.00 or less, purchase of a pen with being lobbied, purchase of a ceremonial object given to a perso (c) an itemized statement of each individual expenditure made d any purpose not covered by (a) (for example: purchase of a recremonial object to be given to the subject of lobbying with restaurant expenses for a legislative reception). Expenses for contributions will be reported on separate addendums and should | ative to each client and if expenditures are made between the parate report may be filed for the lobbyist(s)/firmenses: (a) the aggregate total of all expenses parand office expenses; (b) the aggregate total of a set (for example: meals purchased during a busine at a value of less than \$10 that is given to the person being lobbied with a value of \$25.00 or less); at the uring this reporting period of greater than \$25.00 fineal with value of greater than \$25, purchase of a value greater than \$25, but not greater than \$55, honorariums, expense reimbursement, or politic |

| <ul> <li>d) Total expenses for this reporting period (Add lines a, b and c)</li> <li>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)</li> <li>f) Total of all expenses year to date</li> </ul> | o) \$ 0 e) \$ 0 f) \$ 0                              | RECEIVED   |
|---|--|--|
| VI. Other Expenses:  Provide the following detail for all expenditures of more than \$25 made from l period, including by whom paid or to whom charged.   |  | JUL 29 2021<br>NEW HAMPSHIRE<br>DEPARTMENT OF STAT |
| 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.  Signature of lobbyist)  Christopher Maidment  (Print Name of lobbyist)   | m that the foregoing information  07/23/2021  (Date) | <u> </u>   |

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