

STATE OF NEW HAMPSHIRE

2018 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

PLEASE PRINT

RECEIVED

JUL 2 4 2018

NEW HAMPSHIRE

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STATE

I. Name of Lobbyist(s) Eli:	zabeth C. Sargent		DEPARTMENT OF STA
II. Name of lobbyist's partne	rship, firm or corporation, if an	y:	<u>Di.</u>
Sheehan Phinney Capitol	Group		
	tnership, firm or corporation)	•	
Tr . F . 1 C	0 1	> 77.1	00701
Two Eagle Square Business Address: (Street)	Concord (Town/City)	NH (State)	03301
business Address: (Street)	(Town/City)	(State)	(Zip Code)
(603) 228-2370	(603) 224-8899	email <u>esargent@sheeha</u>	an.com
(603) <u>228-2370</u> (Telephone)	(Fax)		
reportable expense transactio	ons which are not attributable to	•	
All reportable transactions	occurring in the months prior to	the reporting date relative to the f	ollowing client:
New Hampshire Pharmac	eists Association		
(Full Name of Client as it appears	on the Lobbyist Registration Form	n)
OR All reportable transaction unrelated to any particular clie		bbyist's family), or the lobbying fi	rm listed below which are
IV. Date of Report Apri	125, 2018 🔲	July 25, 2018 🛛	
Reports cover: activity from a		activity from 4/1/18 to 6/30/18	
	ber 31, 2018 🔲	January 30, 2019	10
activity fro	m 7/1/18 to 9/30/18	activity from 10/1/18 to 12/31/	18
		actions made since the last repo e Secretary of State's Office, State	
If you have paid an h Expense Reimbursement	fees or made expenditures, you n onorarium or reimbursed expense	nust file Addendum A— Fees and es, you must file Addendum B— Feet entributions, you must file Addence	Report of Honorariums or
the best of my knowledge and	3 and RSA 664 and hereby swear belief.	or affirm that the foregoing inform	nation is true and complete to
Egabeth C (Signature of lobbyist)	- sougens	July 25, 2018 (Date)	
Elizabeth C. Sargent (Print Name of lobbyist)		(Jaic)	



STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

P	I. N	. Name of Lobbyist(s) Elizabeth C. Sargent				
_ 	П. і	Name of lobbyist's partnership, firm or corporation, if any:				
A	She	Sheehan Phinney Capitol Group				
S		(Name of partnership, firm or corporation)				
<u>.</u>	Ш.	Name of Client New Hampshire Pharmacists Association	Date July 25, 2018			
₹						
¥ Γ	IV. Fees Received Indicate the gross amount of all fees received from the client identified above that are related, directly or indirectly, to lobe including fees for services such as public advocacy, government relations, or public relations services including resembnitoring legislation, and related legal work. The gross fee amount reported shall not be reduced by any expenses:					
	á)	Total of all fees received in this reporting period	a) \$ <u>1,875.00</u>			
	b)	Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year	b) \$ <u>1,875.00</u>			
	c)	Total of all fees received to date (Add lines a and b)	c) \$ <u>3,750.00</u>			
	d)	Indicate the amount of any such fees that are due, but have not yet been paid	1 d) \$			
	Lob repo unro cate and mea give less; any to b	Expenses: obyist(s)/Lobbying partnerships, firms, or corporations are required to report orts are to be filed for expenditures made relative to each client and if experelated to any one client a separate report may be filed for the lobbyist(s)/fivegories of expenses: (a) the aggregate total of all expenses paid during the report office expenses; (b) the aggregate total of all individual expenses where the als purchased during a business lunch where the cost was \$25.00 or less, purched to the person being lobbied, purchase of a ceremonial object given to a copy and (c) an itemized statement of each individual expenditure made during purpose not covered by (a) (for example: purchase of a meal with value of a purpose to the subject of lobbying with a value greater than \$25, but not great exption). Expenses for honorariums, expense reimbursement, or political contrashould not be reported on Addendum A.	aditures are made by the lobbyist(s)/firm that are rm. Expenses are to be reported in one of three porting period for salaries, benefits, support staff, expenditure was of \$25.00 or less (for example: hase of a pen with a value of less than \$10 that is person being lobbied with a value of \$25.00 or greater than \$25.00 for greater than \$25.00 for greater than \$25, purchase of a ceremonial object ter than \$50, restaurant expenses for a legislative			
	a) b)	Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying. Total aggregate of expenditures during this reporting period, not reported	a) \$ <u>5,911.00</u>			
	<i>0)</i>	in a), of \$25 or less.	b) \$			
	a)	Total of all itemized expenditures reported in detail in section VI	6) \$			

d)	Total expenses for this reporting period (Add lines a, b and c)	d) \$ <u>5,911.00</u>
	(ride mes a, b and c)	
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	e) \$ <u>6,231.00</u>
f)	Total of all expenses year to date	F) \$ <u>12,142.00</u>
Pro	Other Expenses: vide the following detail for all expenditures of more than \$25 made from lobuding by whom paid or to whom charged.	obying fees during this reporting period,
Pai	1 :	Amount:
		\$
		\$
		\$
		\$
		\$
		\$
Swe	orn Statement/Affirmation by Lobbyist	
I ha	ve read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm that the ue and complete to the best of my knowledge and belief.	e foregoing information
_Sig	Gabeth Clargent July nature of lobbyist) July	25, 2018 (Date)
	zabeth C. Sargent nt Name of lobbyist)	