

## STATE OF NEW HAMPSHIRE 2021 Statement of Income and Expenses

for LOBBYISTS (RSA Chapter 15)

RECEIVED OCT 27 2021 NEW HAMPSHIRE DEPARTMENT OF STATE

PLEASE PRINT

Reports cover: activity from date of registration to 3/31/21 activity f  October 27, 2021   Ja	client).	le a separate report
(Name of partnership, firm or corporation)  51 Franklin Street  Business Address: (Street)  (617) 778-1200 (71	(State)  e-mail phaley@serletient, OR you may file client).  ng date relative to the following phaley phale	(Zip Code) linhaley.com le a separate report
Business Address: (Street) (Town/City)  (617) 778-1200 (617) 778-1300  (Telephone) (Fax)  III. This statement covers: (Choose one — file separate reports for each reportable expense transactions which are not attributable to any one  All reportable transactions occurring in the months prior to the reporting the months prior to the reporting the months prior to the reporting transactions by the lobbyist (including the lobbyist's family activity from date of registration to 3/31/21 activity from the prior to 9/30/21 activity from 7/1/21 to 9/30/21 activity from 7/1/21 to 9/30/21 activity from and submit it to the Secretary from the first form and submit it to the Secretary from the first form and submit it to the Secretary from the first form and submit it to the Secretary from the first form and submit it to the Secretary from the first form from the first form and submit it to the Secretary from the first form from the first form from the first form from from from from from from from	(State)  e-mail phaley@serletient, OR you may file client).  ng date relative to the following phaley phale	(Zip Code) linhaley.com le a separate report
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v. There have been no fees received and no reportable transactif this box is checked, complete just this form and submit it to the Secretary	ily 28, 2021	
If this box is checked, complete just this form and submit it to the Secretary	nuary 26, 2022 [] from 10/1/21 to 12/31/21	
VI. Check if additional reports are attached:		•
☐ If you have received fees or made expenditures, you must file Addence	lum A- Fees and Expen	ises
☐ If you have paid an honorarium or reimbursed expenses, you must file Expense Reimbursement	Addendum B-Report	of Honorariums or
If you, your firm, or your family has made political contributions, you	must file Addendum C	- Political Contributi
Sworn Statement/Affirmation by Lobbyist  I have read RSA 15, RSA 15-B, RSA 14-C and RSA 664 and hereby sweat and complete to the best of my knowledge and belief.  Signature of lobbyist)  Pierce J. Haley	r or affirm that the foreg	going information is to
(Print Name of lobbyist)		



### STATE OF NEW HAMPSHIRE

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

I. Name of Lobbyist(s) Pier	ce J. Haley		
II. Name of lobbyist's part	nership, firm or cor	poration, if any:	
Serlin Haley LLP			
	ership, firm or corporation)		
III. Name of Client			Date 10/21/2021
Political Contributions For each political contribut client/lobbyist and lobbying			oter 664 paid on behalf of the
Full name of candidate: C	ommittee to Elect F	louse Republicans	
	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$ 10	00.00	Office Candidate i	s Seeking
Full name of candidate:	(Last Name)		
	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$		Office Candidate is	Seeking
	ribution on the line abo		ds or services provided, and enter the ution. If the actual cost is not known,
Full name of candidate:		•	
	(Last Name)	(First Name)	(Middle Name/Initial)

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(If more than three contributions were made, report additional co	ontributions on separate addendum C forms.)
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Sworn Statement/Affirmation by Lobbyist	
Lhave read DCA 15 DCA 15 D and DCA 664 and ha	makes assume as a CC and Alica Adva Community of Community
I have read RSA 15, RSA 15-B and RSA 664 and her is true and complete to the best of my knowledge and	
is the and complete to the best of my knowledge and	r defici.
A $A$ $A$ $A$ $A$ $A$ $A$ $A$ $A$ $A$	
///-	10/21/2021
flere G. Haley.	· · · · · · · · · · · · · · · · · · ·
(Signature of lobeyist)	(Date)

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# State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

## RECEIVED

OCT 27 2021

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

(Signature of lobby ist)

(Print Name of lobbyist)

Pierce J. Haley

NEW HAMPSHIRE DEPARTMENT OF STATE

(Date)

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:						
Name of Lobbying partnership, firm, or corporation: Serlin Haley LLP						
Name of Client (leave blank if Staparticular client):	atement is fo	or the partnership, firm,	or corporation and no	t related to any		
Date of Report (check one):						
April 28, 2021 □ July 28,	2021 🗆	October 27, 2021	January 26, 2022			
I have read RSA 15, RSA 15-B, the following Addendums submitude:  O Addendum A(s).  O Addendum B(s).	RSA 664, tl	he Statement of Income at Statement (insert the	and Expenses describe number of Addendu	ped above, and m forms being		
1 Addendum C(s).						
I hereby swear or affirm that the complete to the best of my knowled	foregoing in edge and bel	nformation on the Stater lief.	nent and each Addend	lum is true and		
Where I HAVE	<b>u</b> /	10	)/21/2021			