

STATE OF NEW HAMPSHIRE

2022 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

PLEASE PRINT

I. Name of Lobby	Michael Mc	Cary, Stephen	Buoniconti	
II. Name of lobby	ist's partnership, firm	or corporation, if any	/:	
Buoniconti 8	& McCary, LLC			
(1	Name of partnership, firm	or corporation)		
1 Boston Place	Suite 2600	Boston	MA	02108
Business Address:	(Street)	(Town/City)	(State)	(Zip Code)
617-933-7255)	e-mail mike@b	mlicboston.com
(Telephon	ie)	(Fax)		
reportable expens	e transactions which a	re not attributable to	any one client).	may file a separate report for
	ransactions occurring in		e reporting date relative to	the following client:
	•	as it appears on the Lobb	oyist Registration Form)	
OR	(,,,	
All reportable to unrelated to any pa		ist (including the lobby	vist's family), or the lobbyi	ng firm listed below which are
IV. Date of Repor	t April 27, 2022 ctivity from date of registration October 26, 2022 activity from 7/1/22 to		July 27, 2022 activity from 4/1/22 to 6/30/ January 25, 2023 activity from 10/1/22 to 12/3	
If this box is checked		m and submit it to the	ransactions made since Secretary of State's Office,	
VI. Check if addit	ional reports are attac	hed:		
			Addendum A-Fees and	Expenses
If you have pai Expense Reimburse		nbursed expenses, you	must file Addendum B - F	Report of Honorariums or
If you, your fir	m, or your family has n	nade political contribut	ions, you must file Addend	dum C- Political Contributions
I have read RSA 15	Affirmation by Lobby 5, RSA 15-B, RSA 14-C e best of my knowledge	and RSA 664 and her	eby swear or affirm that the	e foregoing information is true
(Signature of lobby	my Stene Bu	encent	1/24/2023	atc)
	ry, Stephen Buoni	conti	(2	RECEIVED
(Print Name of lob				JAN 2 6 2023
	* /			NEW HAMPSHIRE
				DEPARTMENT OF STATE

State of New Hampshire Signature Form for Associated Lobbyist

RSA Chapter 15

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

(Print Name of lobbyist)

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:
Name of Lobbying partnership, firm, or corporation: Buoniconti & McCary, LLC
Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any particular client): National Correctional Employees Union
Date of Report (check one):
April 27, 2022
I have read RSA 15, RSA 15-B, RSA 664, the Statement of Income and Expenses described above, and the following Addendums submitted with that Statement (insert the number of Addendum forms being submitted):
Addendum $A(s)$. O Addendum $B(s)$. O
Addendum C(s). 0
I hereby swear or affirm that the foregoing information on the Statement and each Addendum is true and complete to the best of my knowledge and belief.
(Signature of lobbyist) 1/24/2023 (Date)
Michael McCary, Stephen Buoniconti