STATE OF NEW HAMPSHIRE



2019 Statement of Income and Expenses RECEIVED

(RSA Chapter 15)

PLEASE PRINT

JAN 2 9 2020

I. Name of Lobbyist	(s) Alux	andra	Sosna	uski, (Ī.	NEW HAMPSHIRE DEPARTMENT OF STAT	Έ
II. Name of lobbyist	t's partnershi	p, firm or co	rporation, if a	ny:	U		
North	ch Du	Star Y	2ntal				
(Na	ame of partners	nip, firm or cor	poration)				
On. D	ulta	Orive.	Con	and	NH	03302	
Business Address: (S	Street)		(Town/City)		(State)	(Zip Code)	
(103) 223- (Telephone)	1283	().	(Fax)		-mail <u>a 505</u>	inmskie redelk	
reportable expense	transactions	which are no	t attributable (to any one cl	ient).	may file a separate report for the following client:	•
		Nach.	IL N.	oh v	Late C)	
	(Full Name	of Client as it	appears on the Lo	bbyist Registra	ation Form)		
<u>OR</u>	•		••		•		
☐ All reportable trai unrelated to any parti	•	ne lobbyist (ir	icluding the lob	byist's family	/), or the lobby	ring firm listed below which are	;
IV. Date of Report Reports cover: act	April 24, ivity from date		to 3/31/19		31, 2019 🛚 m 4/1/19 to 6/30	V19	
		0, 2019 🗍 7/1/19 to 9/30/	719		iary 29, 2020 m 10/1/19 to 12		
V. There have bee If this box is checked State House, Room 2	l, complete jus	t this form an				e the last report. © 107 North Main Street,	
VJ. Check if additio	nal reports a	re attached:					
🐧 If you have recei	ived fees or m	ade expenditu	ıres, you must f	ile Addendu	m A- Fees and	l Expenses	
 If you have paid Expense Reimbursen 		n or reimburs	ed expenses, yo	ou must file A	ddendum B-	Report of Honorariums or	
		ly has made p	oolitical contrib	utions, you m	ust file Adde n	dum C- Political Contribution	S
Sworn Statement/A I have read RSA 15, and complete to the to	RSA 15-B, Ripest of my kno	SA 14-C and welledge and b	pelief.	ereby swear (or affirm that the	ne foregoing information is true	
Alexande (Print Name of lobb	50. yist)	swo WS	<u>'K</u> '		,	,	

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STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A



(RSA Chapter 15:6)

I. Name of Lobbyist(s) Alexandra Sasnowski, ES	· 9 ·
II. Name of lobbyist's partnership, firm or corporation, if any:	
Northest Delfa Dentat	0
(Name of partnership, firm or corporation)	
III. Name of Client Northest Oulfa Denty	Datc 1/28/10
 IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The grareduced by any expenses: a) Total of all fees received in this reporting period 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) 	a) \$
c) Total of all fees received to date (Add lines a and b)	c) \$ 10,200
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to repfees. Separate reports are to be filed for expenditures made relative to each of the lobbyist(s)/firm that are unrelated to any one client a separate report of the Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office exindividual expenses where the expenditure was of \$25.00 or less (for example lunch where the cost was \$25.00 or less, purchase of a pen with a value of lebeing lobbied, purchase of a ceremonial object given to a person being lobbied (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greate restaurant expenses for a legislative reception). Expenses for honorariums, contributions will be reported on separate addendums and should not be reported.	client and if expenditures are made by may be filed for the lobbyist(s)/firm e aggregate total of all expenses paid expenses; (b) the aggregate total of all le: meals purchased during a business ss than \$10 that is given to the person ed with a value of \$25.00 or less); and printing period of greater than \$25.00 for ue of greater than \$25, purchase of a er than \$25, but not greater than \$50, expense reimbursement, or political
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) \$
c) Total of all itemized expenditures reported in detail in section VI.	c) \$

d) Total expenses for this reporting period	d) \$	
(Add lines 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) \$	
f) Total of all expenses year to date	ns	
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from leperiod, including by whom paid or to whom charged.	obbying fees during this reporting	
Paid to:	Amount:	
SIA	· rh	
	\$	
·	\$	
	\$	
	\$	
	S	
	\$	
Sworn Statement/Affirmation by Lobbyist		
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm	m that the foregoing information	
is true and complete to the best of my knowledge and belief.	in that the foregoing information	
(\mathcal{M}_{1})	1/29/20	
(Signature of lobbyist)	(Date)	
Mexandra Sosnowski		
(Print Name of lobbyist)		
(Fruit Name of loodyist)		

STATE OF NEW HAMPSHIRE

2019 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

PLEASE PRINT

1. Name of Lobbyist(s) Enca Bodwell, Es.
II. Name of lobbyist's partnership, firm or corporation, if any:
A) all of Oak D. L. D.
(Name of partnership, firm or corporation)
One Delta Drive Concard NH 0332 Business Address: (Street) (Town/City) (State) (Zip Code)
(Since) (Since
III. This statement covers: (Choose one – file separate reports for each client, OR you may file a separate report for reportable expense transactions which are not attributable to any one client).
All reportable transactions occurring in the months prior to the reporting date relative to the following client:
Noch and not protect
(Full Name of Client as it appears on the Lobbyist Registration Form)
<u>OR</u>
☐ All reportable transactions by the lobbyist (including the lobbyist's family), or the lobbying firm listed below which are unrelated to any particular client.
IV. Date of Report April 24, 2019 July 31, 2019
Reports cover: activity from date of registration to 3/31/19 activity from 4/1/19 to 6/30/19
October 30, 2019
V. There have been no fees received and no reportable transactions made since the last report. If this box is checked, complete just this form and submit it to the Secretary of State's Office, 107 North Main Street, State House, Room 204, Concord, NH 03301.
VI. Check if additional reports are attached:
If you have received fees or made expenditures, you must file Addendum A- Fees and Expenses
☐ If you have paid an honorarium or reimbursed expenses, you must file Addendum B— Report of Honorariums or Expense Reimbursement
If you, your firm, or your family has made political contributions, you must file Addendum C- Political Contributions
Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15-B, RSA 14-C and RSA 664 and hereby swear or affirm that the foregoing information is true and complete to the best of my knowledge and belief.
Greature of lobbyist) Evica Bodwell (Signature of lobbyist) (Date)
(Signature of lobbyist) (Date)
Erica Bodwell
(Print Name of lobbyist)

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STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A



(RSA Chapter 15:6)

I. Name of Lobbyist(s) Erica Bodwell, By.	
II. Name of lobbyist's partnership, firm or corporation, if any:	
Worshust Delta Oentel	
(Name of partnership, firm or corporation)	0 ./- / h
III. Name of Client Northest Pella Denta	P_Date
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The groreduced by any expenses: a) Total of all fees received in this reporting period 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) c) Total of all fees received to date (Add lines a and b)	a) \$ 3050 b) \$ 9 168
 Indicate the amount of any such fees that are due, but have not yet been paid 	d) \$
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to repfees. Separate reports are to be filed for expenditures made relative to each of the lobbyist(s)/firm that are unrelated to any one client a separate report of Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office exindividual expenses where the expenditure was of \$25.00 or less (for example lunch where the cost was \$25.00 or less, purchase of a pen with a value of lessenge lobbied, purchase of a ceremonial object given to a person being lobbied (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greate restaurant expenses for a legislative reception). Expenses for honorariums, contributions will be reported on separate addendums and should not be reported.	client and if expenditures are made by may be filed for the lobbyist(s)/firm aggregate total of all expenses paid expenses; (b) the aggregate total of all e: meals purchased during a busines as than \$10 that is given to the person ad with a value of \$25.00 or less); and enting period of greater than \$25.00 for the of greater than \$25, purchase of er than \$25, but not greater than \$50 expense reimbursement, or political
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	a) \$
in a), of \$25 or less.	b) \$
c) Total of all itemized expenditures reported in detail in section VI.	c) \$

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	1
d) Total expenses for this reporting period (Add lines a, b and c)	d) \$
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)\$
f) Total of all expenses year to date	f) \$
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.	obbying fees during this reporting
Paid to:	Amount: , ,
<u> </u>	\$
·	s
	\$
	\$
	\$
	\$
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.	m that the foregoing information
(Signature of lobbyist) En ca Budwell (Print Name of lobbyist)	1/26/7020 (Date)
Enca Budwell	,
(Print Name of lobbyist)	

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