

## STATE OF NEW HAMPSHIRE

2023 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

# RECEIVED JUL 2 5 2023 NEW HAMPSHIRE DEPARTMENT OF STATE

PLEASE PRINT

I. Name of Lol	bbyist(s) Lindse	y Howa	ra ————			
	bbyist's partnership,			ny:		
Maxim H	ealthcare Sei					
	(Name of partnership			-		_
7227	Lee Defore	st Drive		a	MD	21046
Business Address	` '		(Town/City)		(State)	(Zip Code)
( ) 410-	910-1500 hone)	_ ( )_		e-m	<sub>ail</sub> maxim@	evenable.com
(Telep	hone)	_ ,	(Fax)	1		
						y file a separate report for
reportable exp	ense transactions w	hich are no	t attributable t	o any one clien	t).	
All reportab	ole transactions occur	ring in the n	nonths prior to t	the reporting da	te relative to th	e following client:
	ealthcare Se		-	, ,		
		-		bbyist Registratio	n Form)	<del></del>
<u>OR</u>	(2 211 ) = 110 0 1	,	FF	,	•	
		lobbyist (in	cluding the lobl	byist's family),	or the lobbying	g firm listed below which are
unrelated to any	particular client.					
IV. Date of Rep	port April 26, 20	23		July 2	6, 2023	
Reports cover:	activity from date of		o 3/31/23		4/1/23 to 6/30/2	3 1
	October 25,			January 3		]
	activity from 7/1/2	3 10 9/30/23		activity from 10/	1/23 10 12/31/23	
V. There have	e been no fees rece	ived and r	io reportable	transactions	made since t	he last report.
If this box is che	ecked, complete just t om 204, Concord, Ni	his form and U 02201	d submit it to th	e Secretary of S	tate's Office, 1	07 North Main Street,
State House, Ro	om 204, Concora, 141	1 05501.				
	lditional reports are			1. 4.23	• Face and Fo	
If you have	received fees or mad	e expenditu	res, you must n	n wast file Add	4– rees and ex endum B– Rer	port of Honorariums or
Expense Reimb	ursement					
If you, you	firm, or your family	has made p	olitical contribu	ıtions, you must	file Addendu	m C-Political Contributions
Sworn Stateme	ent/Affirmation by I	obbyist 14-C and I	RSA 664 and be	rehy swear or a	ffirm that the f	oregoing information is true
and complete to	the best of my know	ledge and b	elief.			
1 -12	W A	M		67/	1 8 / てひ <u>と 3</u> (Date	
(Signature of le	obbyist)		<del></del>	<del>- ' '   -</del>	(Date	e)
Lindsey I						
(Print Name of						

#### P L E A S E P R I N T

## STATE OF NEW HAMPSHIRE

# Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s) Lindsey Howard					
II. Name of lobbyist's partnership, firm or corporation, if any:  Maxim Healthcare Services, Inc.					
(Name of partnership, firm or corporation)					
III. Name of Client Maxim Healthcare Services, Inc.	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 greated by any expenses:	t relations, or public relations services oss fee amount reported shall not be				
a) Total of all fees received in this reporting period	a) \$				
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>0</u>				
c) Total of all fees received to date (Add lines a and b)	c) \$ 0				
<ul> <li>Indicate the amount of any such fees that are due, but have not yet been paid</li> </ul>	d) \$ 0				
V. Expenses:  Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to report all expenses made from lobbying fees. Separate reports are to be filed for expenditures made relative to each client and if expenditures are made by the lobbyist(s)/firm that are unrelated to any one client a separate report may be filed for the lobbyist(s)/firm. Expenses are to be reported in one of three categories of expenses: (a) the aggregate total of all expenses paid during the reporting period for salaries, benefits, support staff, and office expenses; (b) the aggregate total of all individual expenses where the expenditure was of \$25.00 or less (for example; meals purchased during a business lunch where the cost was \$25.00 or less, purchase of a pen with a value of less than \$10 that is given to the person being lobbied, purchase of a ceremonial object given to a person being lobbied with a value of \$25.00 or less); and (c) an itemized statement of each individual expenditure made during this reporting period of greater than \$25.00 for any purpose not covered by (a) (for example; purchase of a meal with value of greater than \$25, purchase of a ceremonial object to be given to the subject of lobbying with a value greater than \$25, but not greater than \$50, restaurant expenses for a legislative reception). Expenses for honorariums, expense reimbursement, or political contributions will be reported on separate addendums and should not be reported on Addendum A.					
<ul> <li>a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.</li> </ul>	a) \$ 1,346				
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	<sub>b) \$</sub> 0				
c) Total of all itemized expenditures reported in detail in section VI.	c) \$ 0				

d) Total expenses for this reporting period	<sub>d) \$</sub> 1,346
(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)  f) Total of all expenses year to date  VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from left.	e) s 0  f) s 1,346  b) b) b) sing fees during this reporting
period, including by whom paid or to whom charged.  Paid to:	Amount:
	s
	\$
	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.	n that the foregoing information
(Signature of lobbyist)	07/18/2023 (Date)
Lindsey Howard	
(Print Name of lobbyist)	