

STATE OF NEW HAMPSHIRE

2018 Statement of Income and Expenses for LOBBYISTS

RECEIVED

OCT 29 2018

NEW HAMPSHIRE DEPARTMENT OF STATE

(RSA Chapter 15)

I. Name of Lobbyist(s) Bruc	e A. Berke, Simon P. Tho	mson and Erle B. Pierce	
II. Name of lobbyist's partners	hip, firm or corporation, if an	y:	
Sheehan Phinney Capitol (Group		
	ership, firm or corporation)		
Two Eagle Square	Concord	NH	03301
Business Address: (Street)	(Town/City)	(State)	(Zip Code)
(603) 228-2370 (603) 2	24-8899 email bberke@	sheehan.com, sthomson(asheehan.com and
		epierce@sheehan.com	
III. This statement covers: (Chreportable expense transaction All reportable transactions of	s which are not attributable to	any one client).	•
U.S. Term Limits			
(Fu	ll Name of Client as it appears	on the Lobbyist Registration Fo	orm)
OR All reportable transactions is unrelated to any particular client	ry the lobbyist (including the lot	obyist's family), or the lobbying	g firm listed below which are
Reports cover: activity from da	5, 2018	July 25, 2018 activity from 4/1/18 to 6/30/1	18
	7/1/18 to 9/30/18	January 30, 2019 activity from 10/1/18 to 12/3	1/18
V. There have been no fees reco If this box is checked, complete jo Concord, NH 03301.			
If you have paid an hor Expense Reimbursement	es or made expenditures, you m orarium or reimbursed expense	s, you must file Addendum B-	
Sworn Statement/Affirmation I I have read RSA 15, RSA 15-B a the best of my knowledge and be (Signature of lobbyist)	nd RSA 664 and hereby swear of	or affirm that the foregoing info $\frac{\text{October } 31,2018}{\text{Color}}$	<u> </u>
Bruce A. Berke, Simon P. (Print Name of lobbyist)	Thomson and Erle B. Piero	ce com (s run	