STATE OF NEW HAMPSHIRE

2020 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

RECEIVED

OCT 2 8 2020

IIRE STATE

	PLEASE PRINT		NEW HAMPSH DEPARTMENT OF
I. Name of Lobbyist	(s) James Boul		
II. Name of lobbyist	's partnership, firm or corporation, if	Tany:	
N	SNNSHY & BOUL		
(Na	me of partnership, firm or corporation)		
Business Address: (S	OT ST., STE. 3 treet) (Town/City)	CONCORD NE	+ 03301 (Zip Code)
(603 <u>228</u> -	-1601 ()	e-mail	
	overs: (Choose one – file separate rep ransactions which are not attributabl	orts for each client, OR you may file a e to any one client).	separate report for
All reportable tran	nsactions occurring in the months prior t	to the reporting date relative to the follow	ving client:
·	Conduent	•	
OP	(Full Name of Client as it appears on the	Lobbyist Registration Form)	
OR All reportable tran unrelated to any partic	sactions by the lobbyist (including the k	obbyist's family), or the lobbying firm lis	sted below which are
IV. Date of Report Reports cover: activ	April 29, 2020 ity from date of registration to 3/31/20	July 29, 2020 activity from 4/1/20 to 6/30/20	
	October 28, 2020 X activity from 7/1/20 to 9/30/20	January 27, 2021 ☐ activity from 10/1/20 to 12/31/20	
If this box is checked,	no fecs received and no reportab complete just this form and submit it to 4, Concord, NH 03301.	le transactions made since the last the Secretary of State's Office, 107 North	report. 🛘 h Main Street,
VI. Check if addition	al reports are attached:		
🔀 If you have receiv	ed fees or made expenditures, you must	file Addendum A- Fees and Expenses	
☐ If you have paid a Expense Reimburseme	n honorarium or reimbursed expenses, yent	ou must file Addendum B- Report of I	
☐ If you, your firm,	or your family has made political contri	butions, you must file Addendum C- Po	olitical Contributions
I have read RSA 15, R	irmation by Lobbyist SA 15-B, RSA 14-C and RSA 664 and l st of my knowledge and belief.	hereby swear or affirm that the foregoing	z information is true
	12	ro/an/aa	
(Signature of lobbyist)· /v.	(Date)	•
James	Bouley		
(Print Name of lobbyi	st)		

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 leperiod, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
	\$
	\$
	\$
	\$
	\$
· · · · · · · · · · · · · · · · · · ·	\$
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
	, ,
	10/27/20

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