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#### STATE OF NEW HAMPSHIRE

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

PLEASE PRINT

II. Name of lobbyist's partnership, firm or corporation, if any:	
(Name of partnership, firm or corporation)  670 N. Commercial St., Ste 108 PO Box 1120 Manchester NH 03105-1120  Business Address: (Street) (Town/City) (State) (Zip Code)  ( ) 603 62308700 ( ) 603 623-7775 e-mail jim.merrill@bernsteinshur.com	
670 N. Commercial St., Ste 108 PO Box 1120 Manchester NH 03105-1120  Business Address: (Street) (Town/City) (State) (Zip Code)  (1) 603 62308700 (503 623-7775 e-mail jim.merrill@bernsteinshur.com	
Business Address: (Street) (Town/City) (State) (Zip Code)  ( ) 603 62308700 ( ) 603 623-7775 e-mail jim.merrill@bernsteinshur.com	
( ) 603 62308700 ( ) 603 623-7775 e-mail jim.merrill@bernsteinshur.com	
(Telephone) (Fax)	
III. This statement covers: (Choose one – file separate reports for each client, OR you may file a separate reportable expense transactions which are not attributable to any one client).	t for
All reportable transactions occurring in the months prior to the reporting date relative to the following client:	
Martignetti Companies of NH, Inc.	
(Full Name of Client as it appears on the Lobbyist Registration Form)	
All reportable transactions by the lobbyist (including the lobbyist's family), or the lobbying firm listed below which	h oro
unrelated to any particular client.	II di C
IV. Date of Report April 27, 2022 July 27, 2022 July 27, 2022 Reports cover: activity from date of registration to 3/31/22 activity from 4/1/22 to 6/30/22	
October 26, 2022 January 25, 2023	
activity from 7/1/22 to 9/30/22 activity from 10/1/22 to 12/31/22	
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	itions
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 and complete to the best of my knowledge and belief.	true
/ // / 1/17/2023	
(Signature of lobbyist) (Date)	
Jim/Merrill	7
(Print Name of lobbyist)  RECEIVED	
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#### STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses
Addendum A

(RSA Chapter 15:6)

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new Hampshire Department of STAX

II. Name of lobbyist's partnership, firm or corporation, if any:  Bernstein Shur	
(Name of partnership, firm or corporation)	<del></del> `
III. Name of Client Martignetti Companies of NH, I	nc. <sub>Date</sub> 1/17/2023
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 greduced by any expenses:	nt relations, or public relations service ross fee amount reported shall not
a) Total of all fees received in this reporting period	10,000,00
<ul> <li>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)     </li> </ul>	
b) Total of all fees received this calendar year, prior to this reporting period	a) \$ 1,000.00 b) \$ 10,000.00 year) 11,000.00

#### 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.

a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$ 3, 2	50.00
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) \$	0.00
c) Total of all itemized expenditures reported in detail in section VI.	c) \$	0. 50

d) Total expenses for this reporting period (Add lines a, b and c)	d)s 3,250.00
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)\$ 11,000.00
f) Total of all expenses year to date	ns 14,250.00
VI. Other Expenses:  Provide the following detail for all expenditures of more than \$25 made from leading by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
	\$
	\$
	\$
<u> </u>	\$
	· \$
	\$
Sworn Statement/Affirmation by Lobbyist  I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm	n that the foregoing information
is true and complete to the best of my knowledge and belief.	in that the foregoing information
	1/17/2023
(Signature of lobbyist)	(Date)
Jim Merrill	
(Print Name of lobbyist)	-

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#### \*Attachment to Addendum A, Section V

The Bernstein Shur Group is a subsidiary business of the Bernstein Shur law firm, with offices in Maine, New Hampshire and Vermont. The Group's lobbying work is only one part of a broad range of work, and the consultants involved in lobbying also perform other consulting work which is completely unrelated to lobbying. All fees for services and reimbursable expenses paid by Bernstein Shur Group clients (including lobbying clients) are deposited into the . operating revenues of the Group and/or law firm. All operating expenses of the Group are paid from operating expenses of the Group and/or law firm. Accordingly, it is impossible to determine with any more specificity how funds placed into our general operating account were later used.

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### STATE OF NEW HAMPSHIRE

Lobbyists Report of Political Contributions Addendum C (RSA Chapter 15:6)

	I. Name of Lobbyist(s) Jim Merrill and Kathy Corey-Fox						
;	II. Name of lobbyist's partnership, firm or corporation, if any:						
<b>.</b>	Bernstein Shur						
;	(Name of partnership, firm or corporation)						
	III. Name of Client Martignetti Co y N 4 Date 1/17/2023						
	Political Contributions For each political contribution that is reportable pursuant to RSA Chapter 664 paid on behalf of the client/lobbyist and lobbying firm, indicate the following:						
	Full name of candidate: Sununu Christopher  (Last Name) (First Name) (Middle Name/Initial)						
	Amount of contribution \$ 48.00 Office Candidate is Seeking Governor						
	If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter the actual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not known, enter an estimated value and the word "estimate."						
1							
Full name of candidate: Avard Kevin							
	(Last Name) (First Name) (Middle Name/Initial)						
	Amount of contribution \$ 100.00 Office Candidate is Seeking State Senate						
	Amount of contribution \$ 100.00 Office Candidate is Seeking State Senate  If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter the actual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not known, enter an estimated value and the word "estimate."						
	If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter the actual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not known, enter an estimated value and the word "estimate."						
I	If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter the actual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not known, enter an estimated value and the word "estimate."  Full name of candidate: Murphy Keith						
•	If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter the actual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not known, enter an estimated value and the word "estimate."  Full name of candidate:  Murphy  Keith  (Last Name)  (First Name)  (Middle Name/Initial)						
•	If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter the actual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not known, enter an estimated value and the word "estimate."  Full name of candidate:  Murphy  Keith  (Last Name)  (First Name)  (Middle Name/Initial)						
ı	If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter the actual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not known, enter an estimated value and the word "estimate."  Full name of candidate:  Murphy  Keith  (Last Name)  (First Name)  (Middle Name/Initial)  Amount of contribution \$  100.00  Office Candidate is Seeking						

If the contribution is an in-kind contribution, provide a desactual cost of the in-kind contribution on the line above for	scription of the goods or services provided, and enter the
enter an estimated value and the word "estimate."	The actual cost is not known,
(If more than three contributions were made, report additional co	ntributions on separate addendum C forms.)
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and her is true and complete to the best of my knowledge and	reby swear or affirm that the foregoing information belief.
h	1/17/2023
(Signature of lobbyist)	(Date)
Jim Merrill	
(Print Name of lobbyist)	

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JAN 25 2023

NEW HAMPSHIRE
DEPARTMENT OF STAUS