PLEASE PRINT

STATE OF NEW HAMPSHIRE

2022 Statement of Income and Expenses for LOBBYISTS

RECEIVED

APR 2 2 2022

NEW HAMPSHIRE DEPARTMENT OF STATE

(RSA Chapter 15)

I. Name of Lobbyist(s) Robert	J 50	voll et			DEFANT SALOF ST
II. Name of lobbyist's	s partnership, firi	n or corp	oration, if any:			
New Ham	PShire Mone of partnership, fire	5 for sorpor	Transport	T ASSO	ociation	V
Business Address: (Str	Street)	(1	Con Cork Town/City)		NH (State)	(Zip Code)
(63) 224-7 (Telephone)	337	(603) <u></u>	125 - 936 (Fax)	e-mai	n rjsuvil	er <u>@Nhm</u> ru.org
III. This statement coreportable expense to						le a separate report for
All reportable tran	sactions occurring	in the mo	nths prior to the	reporting date	relative to the fol	llowing client:
New Ham	PShire me	TOC T	ransport	A SSOCI	fat (av	
OR All reportable trans	actions by the lobl		·			n listed below which are
	April 27, 2022 ity from date of regi October 26, 202 activity from 7/1/22	22		-		
V. There have been If this box is checked, State House, Room 20	complete just this j	form and s				
VI. Check if addition	-					
If you have received If you have paid an Expense Reimburseme	n honorarium or re		-		-	ses of Honorariums or
			itical contributio	ons, you must f	ile Addendum C	- Political Contributions
C		1				
Sworn Statement/Aff I have read RSA 15, R and complete to the be	SA 15-B, RSA 14-	C and RS	A 664 and hereb	by swear or aff	firm that the foreg	oing information is true
Variables	1				4-20-22	
(Signature of lobbyist	. Score	67	_		(Date)	:
(Print Name of Johhyi	(ta					



Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s) Robert J Sculley	
II. Name of lobbyist's partnership, firm or corporation, if any:	
New HAMpshire motor transport (Name of partnership, firm or corporation)	ASSOCIATION
III. Name of Client New Hamp Snice Moror Transport Ass.	
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:	relations, or public relations service oss fee amount reported shall not be
a) Total of all fees received in this reporting period	a)\$ 9,240.00 b)\$
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) \$ear)
c) Total of all fees received to date (Add lines a and b)	c)\$ 9,240.00
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 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 lobbie (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 greater 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 pair expenses; (b) the aggregate total of all expenses; (b) the aggregate total of all ele: meals purchased during a business as than \$10 that is given to the person of with a value of \$25.00 or less); and or ting period of greater than \$25.00 for the of greater than \$25, purchase of the 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 (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	
	4 44 6 4 4 6 4 4
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
Vact 1 cus	4-20-02
(Signature of lobbyist)	(Date)
(Print Name of Johnvist)	
(Print Name of lobbyist)	

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

I. Name of Lobbyist(s) Robert J Sculley			
II. Name of lobbyist's partnership, firm or corporation, if any:			
New Hampshire Motor Transport Association (Name of partnership, firm or corporation)			
III. Name of Client New Hamp Shire Motor transport ASSN Date			
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: KAHU JAH (Last Name) (First Name) (Middle Name/Initial)			
Amount of contribution \$ 250.00 Office Candidate is Seeking SELATE			
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: Sax y Dough (Last Name) (Middle Name/Initial)			
Amount of contribution \$ 1,000,00 Office Candidate is Seeking SEVATE			
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: Perus Kucka Resecce (Last Name) (First Name) (Middle Name/Initial) Amount of contribution S. 250.00 (Office Condidate is Seeking Seeking Seeking)			

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 more than three contributions were made, report additional contributions on separate addendum C forms.)
Sworn Statement/Affirmation by Lobbyist
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm that the foregoing information is true and complete to the best of my knowledge and belief. (Signature of lobbyist) (Print Name of lobbyist) (Print Name of lobbyist)

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

I. Name of Lobbyist(s) Hobert J Shulley
II. Name of lobbyist's partnership, firm or corporation, if any:
New Hampsnise Motor Transport Association
III. Name of Client New ham PShire Motor transport ASSN Date
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: ROSEULALD CLUDY (Last Name) (First Name) (Middle Name/Initial)
Amount of contribution \$ 250.00 Office Candidate is Seeking SELATE
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: WATTENS DAVED (Last Name) (First Name) (Middle Name/Initial)
Amount of contribution \$ 250.00 Office Candidate is Seeking SEPATE
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."
Busin Real A
Full name of candidate: 101103611 NEGWA (Middle Name/Initial)
Amount of contribution \$ 250.00 Office Candidate is Seeking

If the contribution is an in-kind contribution, provide a description of the good actual cost of the in-kind contribution on the line above for amount of contribution enter an estimated value and the word "estimate."	
(If more than three contributions were made, report additional contributions on separate Sworn Statement/Affirmation by Lobbyist	addendum C forms.)
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. (Signature of lobbyist) ROBERT J. SCULLY (Print Name of lobbyist)	m that the foregoing information 4-2-2-2 (Date)

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

I. Name of Lobbyist(s)	ibert J S	Lulley	
II. Name of lobbyist's partn	ership, firm or corp	oration, if any:	
New Hampshi (Name of partner	re Motor -	transport As	Sociation_
III. Name of Client New M	ampshire Mot	or transport ASS	№ Date
Political Contributions For each political contribution client/lobbyist and lobbying			r 664 paid on behalf of the
Full name of candidate:	, 411411111111	KEUUZ	
Full name of candidate:	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$	O. a Off	ice Candidate is Seeking	SELATE
	oution on the line above		or services provided, and enter the on. If the actual cost is not known,
Full name of candidate: Amount of contribution \$	NEVISS (Last Name)	(First Name)	(Middle Name/Initial)
If the contribution is an in-kind of	contribution, provide a ution on the line above	description of the goods of	or services provided, and enter the on. If the actual cost is not known,
Full name of candidate:	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$	C	office Candidate is Seekin	g

If the contribution is an in-kind contribution, provide a description actual cost of the in-kind contribution on the line above for amount	
enter an estimated value and the word "estimate."	
(If more than three contributions were made, report additional contribution	ns on separate addendum C forms.)
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swe	ear or affirm that the foregoing information
is true and complete to the best of my knowledge and belief.	
WHI Jan	4-202
(Signature of lobby ist)	(Date)
ROBELT J. Schley	
(Print Name of lobbyist)	