STATE OF NEW HAMPSHIRE

2018 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

PLEASE PRINT

I. Name of Lobbyist((a) Karen Hicks		
II. Name of lobbyist's	s partnership, firm or corporation, if an	y:	
· Civix St	rategy Group. LC ne of partnership. firm or corporation)	,	
114 North Business Address: (Str	Main St, STE 203 Co	ncord NH (State)	<u> </u>
(128) <u>573-940</u> (Telephone)	(Fax)	e-mail Karer	ecivixstrategygroup.com
	vers: (Choose one – file separate report ansactions which are not attributable to		ay file a separate report for
All reportable trans	sactions occurring in the months prior to the	ne reporting date relative to t	he following client:
Civix Stra	tegy (TVOUD, UC (Full Name of Client as it appears on the Lob	hvist Registration Form)	
<u>OR</u>	(r dir r dine or offens as it appears on the 1300	oyist Registration Form)	
All reportable trans unrelated to any particular	actions by the lobbyist (including the lobbular client.	yist's family), or the lobbyin	g firm listed below which are
IV. Date of Report Reports cover: activi	April 25, 2018 ity from date of registration to 3/31/18	July 25, 2018	8
	October 31, 2018 activity from 7/1/18 to 9/30/18	January 30, 2019 🛭 activity from 10/1/18 to 12/3	1/18
	no fees received and no reportable complete just this form and submit it to the		
VI. Check if additions	al reports are attached:		
If you have received	ed fees or made expenditures, you must fil	e Addendum A– Fees and E	Expenses
☐ If you have paid an Expense Reimburseme	n honorarium or reimbursed expenses, you nt	must file Addendum B- Re	eport of Honorariums or
X If you, your firm, o	or your family has made political contribut	ions, you must file Addendu	um C- Political Contributions
	irmation by Lobbyist SA 15-B, RSA 14-C and RSA 664 and her st of my knowledge and belief.	eby swear or affirm that the	foregoing information is true
January	MS	1-30-19	
(Signature of lobbyist)		(Da	RECEIVED
Karen HiULS (Print Name of lobby)	st)	,	JAN 3 0 2019
(1 that Name of tooby):	ot <i>)</i>		
			NEW HAMPSHIRE DEPARTMENT OF STATE

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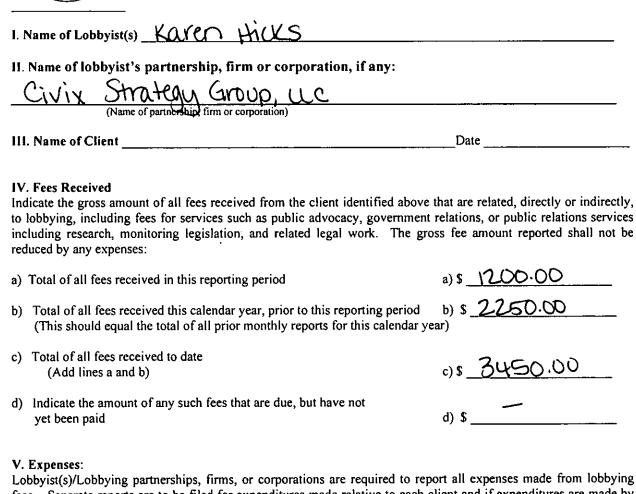
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STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)



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

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) \$

contributions will be reported on separate addendums and should not be reported on Addendum A.

d) Total expenses for this reporting period	d) \$
(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)	e) \$ 2250.00
f) Total of all expenses year to date	ns 2250.00
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from loperiod, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
	\$
	\$
	\$
	\$
	\$
	\$
Sworn Statement/Affirmation by Lobbyist	
·	. 414 41 C ' - ' - C 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
Janenth Us	1-29-19
(Signature of lobbyist)	(Date)
Karen Hicks	•
(Print Name of lobbyist)	

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STATE OF NEW HAMPSHIRE

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

I. Name of Lobbyist(s)	karen Hick	S	
II. Name of lobbyist's pa	artnership, firm or cor	poration, if any:	
(Name of p	artnership, firm or corporation)		
III. Name of Client		<u>.</u>	Date
Political Contributions For each political contrib client/lobbyist and lobby	oution that is reportable		er 664 paid on behalf of the
Full name of candidate:	Pappas (Last Name)	Chris (First Name)	(Middle Name/Initial)
Amount of contribution \$ _	$5\infty \infty$	Office Candidate is	Seeking Congressional
enter an estimated value an	d the word "estimate."		
enter an estimated value an	Cushina	Probert (First Name)	(Middle Name/Initial)
	Cushing (Last Name)	Probert (First Name) Office Candidate is	(Middle Name/Initial) Seeking NH Hube Pep D
Full name of candidate: Amount of contribution \$	Cushing (Last Name) 250.00 kind contribution, provide ontribution on the line abo	Office Candidate is a description of the goods ve for amount of contributions.	
Full name of candidate: Amount of contribution \$ _ If the contribution is an in- actual cost of the in-kind co enter an estimated value an	Cushing (Last Name) 250.00 kind contribution, provide ontribution on the line abo d the word "estimate."	Office Candidate is a description of the goods we for amount of contribut	Seeking NH Habe Rep Da
Full name of candidate: Amount of contribution \$ _ If the contribution is an in-lactual cost of the in-kind coenter an estimated value an	Cushing (Last Name) 250.00 kind contribution, provide ontribution on the line abo d the word "estimate."	Office Candidate is a description of the goods we for amount of contribut	Seeking NH Habe Rep Da

	·	
(If more than three contributi	ons were made, report additional contribution	ns on separate addendum C forms.)
Sworn Statement/Affin	mation by Lobbyist	
	A 15-B and RSA 664 and hereby sw he best of my knowledge and belief.	ear or affirm that the foregoing infor
(Signature of lobbyist)	lun	1/29/19
(Circanderran at Indianaise)		(Date)



STATE OF NEW HAMPSHIRE

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

I. Name of Johnvist's no	artnership, firm or corpo	aration if any	
	•	,	
(Name of pa	tegy Grox	o uc	
III. Name of Client			Date
	oution that is reportable puing firm, indicate the follo		er 664 paid on behalf of the
Full name of candidate:	Grassie (Last Name)	Anne	(Middle Name/Initial)
Amount of contribution \$	250.00	(First Name)	Seeking NH Serate
			tion. If the actual cost is not know
enter an estimated value and	d the word "estimate."	Gray	
enter an estimated value and	d the word "estimate."	(First Name)	(Middle Name/Initial)
Full name of candidate:	Chynoweth (Last Name)	(First Name)	
Full name of candidate: Amount of contribution \$	Chynoweth (Last Name) 250.60 sind contribution, provide a contribution.	(First Name) Office Candidate is stated to the goods for amount of contribut	(Middle Name/Initial)
Full name of candidate: Amount of contribution \$ _ If the contribution is an in-kactual cost of the in-kind coenter an estimated value and	Chynoweth (Last Name) 250.60 Sind contribution, provide a contribution on the line above d the word "estimate."	(First Name) Office Candidate is step of the goods for amount of contribut	(Middle Name/Initial) Seeking Execohye Co
Full name of candidate: Amount of contribution \$ If the contribution is an in-kactual cost of the in-kind co	Chynoweth (Last Name) 250.60 Sind contribution, provide a contribution on the line above	(First Name) Office Candidate is stated to the goods for amount of contribut	(Middle Name/Initial) Seeking Execohye Co

(If more than three contributions were made, report addition	nal contributions on separate addendum C forms.)
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 an is true and complete to the best of my knowledge	nd hereby swear or affirm that the foregoing information e and belief.
(Signature of lobbyist)	1/29/19 (Date)

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