

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

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FEB 0 2 2021

PLEASE PRINT

I. Name of Lobbyist(s) Chris Hodgdon	NEW HAMPSHIRE DEPARTMENT OF STATE
a	
II. Name of lobbyist's partnership, firm or corporation, if any:	
(Name of partnership, firm or corporation)	
Business Address: (Street) (Town/City) (State)	(Zip Code)
	is_Hodgdon@ comesit, com
(Telephone) (Fax)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
 III. This statement covers: (Choose one – file separate reports for each client, OR your reportable expense transactions which are not attributable to any one client). All reportable transactions occurring in the months prior to the reporting date relative 	
(Full Name of Client as it appears on the Lobbyist Registration Form) OR	
All reportable transactions by the lobbyist (including the lobbyist's family), or the lob unrelated to any particular client.	bying firm listed below which are
IV. Date of Report April 29, 2020 Reports cover: activity from date of registration to 3/31/20 April 29, 2020 July 29, 2020 activity from 4/1/20 to 6/2	
October 28, 2020	
V. There have been no fees received and no reportable transactions made sin If this box is checked, complete just this form and submit it to the Secretary of State's Off 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 a	:
☐ If you have paid an honorarium or reimbursed expenses, you must file Addendum B Expense Reimbursement	- Réport of Honorariums or
If you, your firm, or your family has made political contributions, you must file Add	endum C- Political Contributions
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 and complete to the best of my knowledge and belief.	the foregoing information is true
(Signature of lobbyist)	D7/
(Signature of lobbyist)	(Date)
(Print Name of lobbyist)	

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STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

1. Name of Lobbyist(s) Chris Hodglon	•
II. Name of lobbyist's partnership, firm or corporation, if any:	
(Name of partnership, firm or corporation)	
III. Name of Client Comcast	
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 services ses fee amount reported shall not be
a) Total of all fees received in this reporting period	a)\$ 28,000
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) \$
c) Total of all fees received to date (Add lines a and b)	c)\$ <u>84,000</u>
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 represes. 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 in 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 less being lobbied, purchase of a ceremonial object given to a person being lobbied (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 greate restaurant expenses for a legislative reception). Expenses for honorariums, contributions will be reported on separate addendums and should not be reported.	lient and if expenditures are made by may be filed for the lobbyist(s)/firm. aggregate total of all expenses paid penses; (b) the aggregate total of all e: meals purchased during a business s than \$10 that is given to the person d with a value of \$25.00 or less); and rting period of greater than \$25.00 for e of greater than \$25, purchase of a r 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.b) Total aggregate of expenditures during this reporting period, not reported	a) \$
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 reportin (This should be the amount on line f of addendum A for last mo	onth's report)
f) Total of all expenses year to date	f)s 206-
f) Total of all expenses year to date VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 period, including by whom paid or to whom charged.	2nt to lobby 1st for milecu and 5 made from lobbying fees during this reporting expend
Paid to:	Amount:
	\$
	\$
	\$
	\$
	\$
	\$
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Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby s is true and complete to the best of my knowledge and belie	
. 🙃	/
plet -	1-27-2021
(Signature of lobbyist)	$\frac{1-2+202(}{(Date)}$
(Signature of Jobbyist) (Print Name of Jobbyist)	$\frac{1-2+202(}{(Date)}$

P	I. Name of Lobbyist(s) Chris Hodgdon
L E	II. Name of lobbyist's partnership, firm or corporation, if any:
A S	Comcest
E	(Name of partnership, firm or corporation)
P	III. Name of Client Concast Date 1-27-2021
R I N T	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: Committee to Elect Huse Republicans (Last Name) (First Name) (Middle Name/Initial)
	Amount of contribution \$ 1500 - Office Candidate is Seeking House
	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: Cavanas (First Name) (Middle Name/Initial)
	Amount of contribution \$ /000 Office Candidate is Seeking St-le Jenete
	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: Ut Democratic Sende Caucal (Middle Name/Initial) (First Name) (Middle Name/Initial)
	Amount of contribution \$ 1000 Office Candidate is Seeking State Sealer

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STATE OF NEW HAMPSHIRE

I. Name of Lobbyist(s)	Chris Hodg	don.	
II. Name of lobbyist's pa	U ertnership, firm or con	poration, if any:	
	urtnership, firm or corporation)		
III. Name of Client	ement		Date
Political Contributions			•
			ter 664 paid on behalf of the
client/lobbyist and lobbyi	ing firm, indicate the fo	illowing:	٠.
Full name of candidate:	NOH Couch T	La Vice DA	(
Tan hame of canadate.	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$	2500	Office Candidate is	s Seeking State Senate
			ls or services provided, and enter the
actual cost of the in-kind co enter an estimated value and		ve for amount of contribu	ution. If the actual cost is not known,
	. me word obtimate.		
7 To A 1100			
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Full name of candidate:	Morre	John	
	(Lastame)		(Middle Name/Initial)
Amount of contribution \$ _	200	Office Candidate is	Seeking State Sancte
If the contribution is an in-k	ind contribution, provide	a description of the good	s or services provided, and enter the
actual cost of the in-kind co enter an estimated value and		ve for amount of contribu	ntion. If the actual cost is not known,
onto an commuted varde and	the word commute.		
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		· · · · · · · · · · · · · · · · · · ·	
Full name of candidate:	Souci	Donna	
_	(Last Nune)	(First Name)	(Middle Name/Initial)
Amount of contribution \$ _	1000	Office Candidate is	Seeking State Sende

P	I. Name of Lobbyist(s) Chris Hodglon				
L E	II. Name of lobbyist's partnership, firm or corporation, if any:				
A					
S E	(Name of partnership, firm or corporation)				
P	III. Name of Client Comest				
R I V T	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: Mocca Chycle				
	Full name of candidate: Chuck (Last Name) (First Name) (Middle Name/Initial)				
	Amount of contribution \$ 1600 Office Candidate is Seeking State Senal				
	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 some for the Francisco Francisc				
	Full name of candidate: Haroll (Last Name) (First Name) (Middle Name/Initial)				
	Amount of contribution \$ 500 Office Candidate is Seeking Start				
	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: Gunnittee 15 Elect Hoose Denserts (Last Name) (First Name) (Middle Name/Initial)				
	Amount of contribution \$ 1000 Office Candidate is Seeking Huse				

I. Name of Lobbyist(s)	- hris Hodge	by	16
II. Name of lobbyist's pa	rtnership, firm or cor	poration, if any:	
_			
(Name of pa	rtnership, firm or corporation)		
III. Name of Client	recet		Date 1-27-2021
Political Contributions			
For each political contrib	ution that is reportable	oursuant to RSA Chap	oter 664 paid on behalf of the
client/lobbyist and lobbyi	ng firm, indicate the fol	llowing:	
Full name of candidate:	Levesgu	Melanie	(Middle Name/Initial)
	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$	500	Office Candidate i	s Seeking State Seate
If the contribution is an in-k	ind contribution, provide	a description of the good	ds or services provided, and enter the
actual cost of the in-kind cost	ntribution on the line abov	e for amount of contrib	ution. If the actual cost is not known,
enter an estimated value and	the word "estimate."		
		·	
· · · · · · · · · · · · · · · · · · ·	·		
Full name of candidate:	Birdcell	Recins	
~	(Last Name)		(Middle Name/Initial)
Amount of contribution \$	500	Office Candidate is	Seeking State Sevele
If the contribution is an in-k	ind contribution, provide a	a description of the good	ds or services provided, and enter the
actual cost of the in-kind corenter an estimated value and		e for amount of contribu	ution. If the actual cost is not known,
enter an estimated value and	the word estimate.		
Full name of candidate:		τ	
	Gray	James	-
	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$	(Last Name)	(First Name) Office Candidate is	

		gdon_	· · · · · · · · · · · · · · · · · · ·
II. Name of lobbyist's pa	rtnership, firm or cor	poration, if any:	v
	Diss cc (+	- · · · · · ·	
(Name of par	om cast rtnership, firm or corporation)		
III. Name of Client	Comeast		Date
Political Contributions For each political contributions client/lobbyist and lobbyi	ution that is reportable ng firm, indicate the fo	pursuant to RSA Chapt llowing:	er 664 paid on behalf of the
Full name of candidate: _	Carso . (Last Name)	Sharon (First Name)	(Middle Name/Initial)
Amount of contribution \$	500	Office Candidate is	Seeking State Senate
	the word "estimate."		
		Cl	
Full name of candidate: _		Shannan (First Name)	(Middle Name/Initial)
			(Middle Name/Initial) Seeking Style Sewte
Amount of contribution \$ If the contribution is an in-ki actual cost of the in-kind con	(Last Name) (Last Name) (Last Name) (Last Name) (Last Name)	Office Candidate is S	Seeking Style Sente
Amount of contribution \$ If the contribution is an in-ki actual cost of the in-kind con	(Last Name) (Last Name) (Last Name) (Last Name) (Last Name)	Office Candidate is S	Seeking Style Sente
Amount of contribution \$ If the contribution is an in-ki actual cost of the in-kind con	(Last Name) (Last Name) (Last Name) (Last Name) (Last Name)	Office Candidate is S	Seeking Star Seate sor services provided, and enter the
Full name of candidate: _ Amount of contribution \$ If the contribution is an in-ki actual cost of the in-kind cor enter an estimated value and Full name of candidate: _	(Last Name) (Last Name) (Last Name) (Last Name) (Last Name)	Office Candidate is S	Seeking Style Sente

I. Name of Lobbyist(s)	hris Ho.	lg lbn		
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II. Name of lobbyist's partnership, firm or corporation, if any: (Name of partnership, firm or corporation)				
(Name of partners	thip, firm or corporation)			
III. Name of Client	naccit		Date	
•	ric vol	-	Date	
Political Contributions For each political contribution	n that is reportable r	urguant to RSA Chant	er 664 naid on behalf of the	
client/lobbyist and lobbying f	irm, indicate the fol	lowing:	ci oo4 paid on benan of the	
(
Full name of candidate:	Want	Ruth		
	(Last Name)	(First Name)	(Middle Name/Initial)	
Amount of contribution \$	500	Office Candidate is	Seeking State Sound	
If the contribution is an in-kind of	contribution, provide a	description of the goods	or services provided, and enter the	
actual cost of the in-kind contrib	ution on the line abov	e for amount of contribut	tion. If the actual cost is not known,	
enter an estimated value and the	word "estimate."			
		71. 1.		
Full name of candidate:	Brulle.	Jes		
	(Last Name)	(First Name)	(Middle Name/Initial)	
Amount of contribution \$	000	Office Candidate is S	Seeking State Senete	
,			or services provided, and enter the	
actual cost of the in-kind contrib	ution on the line above	e for amount of contribut	ion. If the actual cost is not known,	
enter an estimated value and the	word "estimate."			
	· · · · · · · · · · · · · · · · · · ·			
Full name of candidate:	Natters	David	<u> </u>	
	(Last Name)	(First Name)	(Middle Name/Initial)	
Amount of contribution \$	00	Office Candidate is S	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 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) (Aris Holcolor) (Date)
(Print Name of lobbyist)