

STATE OF NEW HAMPSHIRE 2021 Statement of Income and Expenses for LOBBYISTS

(RSA Chapter 15)

APR 27 2021

NEW HAMPSHIRE DEPAREMENT OF STATE

RECEIVED

PLEASE PRINT

I. Name of Lobbyist(s)	Kristy A. Merrill / Ryan Hale			inakina kantanya atau i .
IL Name of lobbyist's partner	ship, firm or corporation,	if any:		
New Hampshire Bankers As	sociation			
(Name of partners	hip, firm or corporation)			
_PO Box 2586	Concord	`N	Ĥ	03302-2586
Business Address: (Street)	(Town/City)	(S	tate)	(Zip Code)
(603) 224-5373 (Telephone):	():N/A	c-mailk	merrill@nhba	nikers.com
III. This statement covers: (Choo reportable expense transactions	se one – file separate repoi	ts for each client. (OR you may f	ile a separate report for
LX All reportable transactions occu	uring in the months prior to	he reporting date re	lative to the fo	llowing client:
New Hampshire Bankers A (Full Name	ssociation of Client as it appears on the Lo	bbyist Registration Fo	rm)	
Unitelated to any particular client.	ne lobbyist (including the lob	byist's family), or th	iellobbying fir	m listed below which are
	128; 2021 LX of registration to 3/31/21	July 28, 20 activity from 4/1/2		
The state of the s	7, 2021 U 7/1/21 to 9/30/21	January 26, activity from 10/1/		
V _{ii} There have been no fees red If this box is checked, complete just State House, Room 204, Concord, 1	this form and submit it to th	transactions made Secretary of State	le since the l	ast report. Vorth Main Street:
Vl: Check if additional reports at	e affached			
X If you have received fees or ma		le Àddendum A- F	ees and Exper	išēš
If you have paid an honorarium o Expense Reimbursement				
LX If you, your firm, or your famil	y has made political contribu	tions, you must file	Addendum C	- Political Contributions
Sworn Statemen VAffirmation by I have read RSA 15, RSA 15-B, RS and complete to the best of my know	A 14-C and RSA 664 and he	reby swear or affirm	that the foreg	going information is true
KHAG U		4/15/2	0021	
(Signature of lobbyist)	بسياستين السياسية المساورة ال		(Date)	
Kristy A. Merrill (Print Name of lobbyist)	- ;,,			

STATE OF NEW HAMPSHIRE Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

New Hampshire Banker	Association		
(Name of barri	ersnip, tirm or-corporation).		
III. Name of ClientNew I	lampshire Bankers Association	Date	4/15/2021
o lobbying, including fees fo	all fees received from the client identified r services such as public advocacy, goven g legislation, and related legal work. T	nment relations,	or public relations
) Total of all fees received in	this reporting period	a) \$	8,630.31
) Total of all fees received the (This should equal the total	is calendar year, prior to this reporting per of all prior monthly reports for this calend		0.00
) Total of all fees received to (Add lines a and b)	date	c) \$	8,630.31
1 :	auch food that are due but have not		
) Indicate the amount of any yet been paid	Such lees that are due, but have not	d) \$	0.00
yet been paid. Lexpenses: obbyist(s)/Lobbying partners es. Separate reports are to be e lobbyist(s)/firm that are u expenses are to be reported in uring the reporting period for dividual expenses where the nich where the cost was \$25.0 cing lobbied, purchase of a col an itemized statement of ea- try purpose not covered by (in tremontal object to be given staurant, expenses for a legis	hips, firms, or corporations are required to effled for expenditures made relative to correlated to any one client a separate replication of three categories of expenses: (ar salaries, benefits, support staff, and off expenditure was of \$25.00 or less (for expenditure was of a pen with a value eremonial object given to a person being I ch individual expenditure made during this a) (for example: purchase of a meal with to the subject of lobbying with a value gislative reception). Expenses for honorar in separate addendums and should not be respective.	to report all expeach client and port may be fill a) the aggregatice expenses; (beample: meals pof less than \$10 obbied with a vs reporting period value of greater than \$20 iums, expense	penses made from lo if expenditures are n ed for the lobbyist(e total of all expens b) the aggregate tota purchased during a b of that is given to the alue of \$25.00 or lead of greater than \$2, ter than \$25, purchase, but not greater than treimbursement, or p
yet been paid. C. Expenses: obbyist(s)/Lobbying partners res. Separate reports are to be e lobbyist(s)/firm that are u expenses are to be reported in uring the reporting period for dividual expenses where the nich where the cost was \$25.0 reing lobbied, purchase of a color an itemized statement of ear expenses not covered by (in the remontal object to be given staurant, expenses for a legis outributions will be reported of Total aggregate expenses for	hips, firms, or corporations are required to efiled for expenditures made relative to enrelated to any one client a separate reprinciple of three categories of expenses: (or salaries, benefits, support staff, and off expenditure was of \$25.00 or less (for expenditure was of a pen with a value eremonial object given to a person being I ch individual expenditure made during this a) (for example: purchase of a meal with to the subject of lobbying with a value galative reception). Expenses for honorar	to report all expeach client and port may be fill a) the aggregation of less than \$10 obbied with a vice reporting period value of greater than \$20 iums, expense eported on Additional control of the co	penses made from lo if expenditures are n ed for the lobbyist(e total of all expens b) the aggregate tota purchased during a b of that is given to the alue of \$25.00 or lead of greater than \$2, ter than \$25, purchase, but not greater than treimbursement, or p

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$40,678.12
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) \$0.00
) Total of all expenses year to date	f) \$40,678.12
/I. Other Expenses: Provide the following detail for all expenditures of more than \$25 made fro eriod, including by whom paid or to whom charged.	om lobbying fees during this reporting
aid to: Gallagher, Callahan & Gartrell, PC uarterly (monthly \$6000), lobbying retainer paid	Amount:
y NH Bankers Association_	\$ _180000
	s
	\$
	- \$
	s
	\$
	
Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or a	affirm that the foregoing information
s true and complete to the best of my knowledge and belief.	
Kit Ih	4/15/2021
(Signature of lobbyist)	(Dăte)
_Kristy A. Merrill(Print Name of lobbyist)	



STATE OF NEW HAMPSHIRE

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

. Name of Lobbyist(s)Kris		•	
L Name of lobbyist's par	tnership, firm or c	orporation, if any:	
(Name of partner	ship, firm or corporation)		
II. Name of Client			Date
Political Contributions For each political contribution client/lobbyist and lobbying	on that is reportable firm, indicate the fo	llowing:	er 664 paid on behalf of the
Full name of candidate:	ZoVA (Last Name)	(First Name)	(Middle Name/Initial)_
Amount of contribution \$	15.08	Office Candidate is	Seeking State Pepr
t the contribution is an in-kind	contribution, provide	a describiton of the Book	s or services provided, and enter t
actual cost of the in-kind contri enter an estimated value and th	ibution on the line abo e word "estimate."	ve for amount of contribû	tion. If the actual cost is not know
actual cost of the in-kind contri enter an estimated value and th	ibution on the line abo e word "estimate."	ve for amount of contribu	tion. If the actual cost is not know
actual cost of the in-kind contri- enter an estimated value and the	e word "estimate." (Last Name)	(First Name)	tion. If the actual cost is not know
actual cost of the in-kind contribution same of candidate: Amount of contribution same in-kind actual cost of the in-kind contribution contribution contribution is an in-kind actual cost of the in-kind contribution contribution is an in-kind contribution is an in	(Last Name) I contribution, provide ibution on the line about	(First Name) Office Candidate is	(Middle Name/Initial)
actual cost of the in-kind contribution same of candidate: Amount of contribution same in-kind actual cost of the in-kind contribution contribution contribution is an in-kind actual cost of the in-kind contribution contribution is an in-kind contribution is an in	(Last Name) I contribution, provide ibution on the line about	(First Name) Office Candidate is	(Middle Name/Initial) Seeking
actual cost of the in-kind contri- enter an estimated value and the	(Last Name) I contribution, provide ibution on the line about	(First Name) Office Candidate is	(Middle Name/Initial) Seeking

If the contribution is an in-kind contribution, provide a descript actual cost of the in-kind contribution on the line above for amo	ion of the goods or services provided, and enter the
enter an estimated value and the word "estimate."	punt of contribution. If the actual costs is not known?
2.5 March 1985	No. and the second seco
(If more than three contributions were made, report additional contributions)	utions on separate addendum C forms.)
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby is true and complete to the best of my knowledge and bel	swear or affirm that the foregoing information ief.
that N	4/15/2021
(Signature of lobbyist) Kristy A Merrill	(Date)
(Print Name of lobbyist)	

State of New Hampshire Signature Form for Associated Lobbyist RSA Cliapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:

	rporation: New Hampshire Bankers Association. s for the partnership, firm, or corporation and not related to any
Date of Report (check one):	
April 28, 2021 X July 28, 2021	October 27, 2021
	, the Statement of Income and Expenses described above, and that Statement (insert the number of Addendum forms being
X_ Addendum A(s).	
Addendum B(s).	
X Addendum C(s).	
complete to the best of my knowledge and	ginformation on the Statement and each Addendum is true and belief. 4/15/2021(Date)
(Signature of lobbyist)	(Date)
Ryan Hale	
(Print Name of lobbyist)	