(Print Name of lobbyist)

PLEASE PRINT

## STATE OF NEW HAMPSHIRE

## 2021 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

## RECEIVED

APR 28 2021

NEW HAMPSHIRE DEPARTMENT OF STATE

I. Name of Lobbyist(s)	n Merrill and Kathy Corey-	Fox	DEPARTMENT (	
II. Name of lobbyist's partn	ership, firm or corporation, if	any:		
The Bernstein Shur (	Group			
(Name of pa	rtnership, firm or corporation)			
670 N. Commercial St.	, P.O. Box 1120, Mancheste	er NH 03105		
Business Address: (Street)	(Town/City)	(State)	(Zip Code)	
603 665-8853	(603) 623-7773	e-mail jim.merrill(	e-mail jim.merrill@bernsteinshur.com	
(Telephone)	(Fa			
reportable expense transact	tions which are not attributable	•		
•	-	the reporting date relative to the fo	ollowing client:	
	Hampshire Campground Ov			
OR (Full)	Name of Client as it appears on the I	obbyist Registration Form)		
		obbyist's family), or the lobbying fir	m listed below which are	
• •	1 28, 2021 <b>X</b> a date of registration to 3/31/21	July 28, 2021		
	ober 27, 2021   from 7/1/21 to 9/30/21	January 26, 2022   activity from 10/1/21 to 12/31/21	,	
	te just this form and submit it to	le transactions made since the l the Secretary of State's Office, 107		
VI. Check if additional repo	orts are attached:			
☐ If you have received fees	or made expenditures, you must	file Addendum A- Fees and Exper	nses	
Expense Reimbursement		ou must file <b>Addendum B</b> – Report		
☐ If you, your firm, or you	family has made political contri	butions, you must file Addendum (	C- Political Contributions	
Sworn Statement/Affirmati I have read RSA 15, RSA 15 and complete to the best of m	-B, RSA 14-C and RSA 664 and	hereby swear or affirm that the fore (Date)		
lim Merrill				