

STATE OF NEW HAMPSHIRE

2022 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

PLEASE PRINT

RECEIVED

NEW HAMPOURE ~

I. Name of Lobbyist's partnership, firm or corporation, if any:

The Bernste				
	of partnership, firm or cor			
670 N. Commercial Street Suite	e 108, P.O. Box 1120	Manchester	NH	03105-1120
Business Address: (Stree	t)	(Town/City)	(State)	(Zip Code)
603 623	8700		e-mail jim.merrill@b	pernsteinshur.com
(Telephone)		(Fax)		
reportable expense trai	sactions which are no	separate reports for each t attributable to any one nonths prior to the reportin	client).	
Great River	Hydro.			
	Full Name of Client as it a	appears on the Lobbyist Regis	stration Form)	
OR All reportable transacurirelated to any particular		cluding the lobbyist's fam	ily), or the lobbying	firm listed below which ar
	April 27, 2022 from date of registration October 26, 2022	to 3/31/22 activity fi	rom 4/1/22 to 6/30/22 nuary 25, 2023	
ac	tivity from 7/1/22 to 9/30/.	22 activity f	from 10/1/22 to 12/31/2	2
	mplete just this form an	no reportable transacti d submit it to the Secretary		_
VI Check if additional	reports are attached:			
If you have received	fees or made expenditu	res, you must file Addend	lum A-Fees and Exp	penses
If you have paid an I Expense Reimbursement		ed expenses, you must file	Addendum B- Repo	ort of Honorariums or
If you, your firm, or	your family has made p	political contributions, you	must file Addendum	C- Political Contribution
Sworn Statement/Affirm I have read RSA 15, RSA and complete to the best	A 15-B, RSA 14-C and 1	RSA 664 and hereby swear	r or affirm that the fo	regoing information is tru
/s/ Jim Merrill			4/27/2022	2
(Signature of lobbyist)			(Date)
Jim Merrill				
(Print Name of lobbyist)				

STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s) Jim Merrill and Kathy Core	y-Fox
II. Name of lobbyist's partnership, firm or corporation, if any: The Bernstein Shur Group	
(Name of partnership, firm or corporation)	
III. Name of Client BROAT RIWER HYDIZO	Date 4/27/2022
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 oss fee amount reported shall not be
a) Total of all fees received in this reporting period	a)\$5000
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)	5000
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$ 2500
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	client and if expenditures are made by nay be filed for the lobbyist(s)/firm.

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

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

a)	Total	aggregat	e expense	s for thi	s reportin	g period	l for salai	ries, l	benefits,
sup	port s	staff, and	office ex	penses, 1	elated dir	ectly or	indirectl	y to l	lobbying.

a)\$ 7,500.00 (see ett)

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)\$ 0.00

d) Total expenses for this reporting period (Add lines a, b and c)	d)\$ 1,500.00 (cu
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)\$_0.50
f) Total of all expenses year to date	1,500,00
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 I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affir is true and complete to the best of my knowledge and belief.	
/s/ Jim Merrill	4/27/2022 (Date)
(Signature of lobbylst) Jim Merrill	(Date)
(Print Name of lobbyist)	
(1 Internation of 1000) lot)	

STATE OF NEW HAMPSHIRE

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

or each political contribution sor each political contribution that is reportable pursuant to RSA Chapter 664 paid on behalf of the lient/lobbyist and lobbying firm, indicate the following: Comparison of Cindy Rosenwald	(Name of	Group		
Political Contributions For each political contribution that is reportable pursuant to RSA Chapter 664 paid on behalf of the elient/lobby ist and lobbying firm, indicate the following: Full name of candidate: Friends of Cindy Rosenwald (Last Name) (First Name) (Middle Name/Initial) Amount of contribution \$ 125.00 Office Candidate is Seeking State Senate If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter the extual 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: Friends of Janet Stevens (Last Name) (First Name) (Middle Name/Initial) Amount of contribution \$ 150.00 Office Candidate is Seeking Executive Counsel 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, in the actual cost is not known.		partnership, firm or corporation		
for each political contribution that is reportable pursuant to RSA Chapter 664 paid on behalf of the lient/lobbyist and lobbying firm, indicate the following: Friends of Cindy Rosenwald	II. Name of Client	Great River	Hydro	Date 4/27/2022
Friends of Cindy Rosenwald (Last Name) (First Name) (Middle Name/Initial) Amount of contribution is an in-kind contribution on the line above for amount of contribution. Friends of Janet Stevens (Last Name) (First Name) (Middle Name/Initial) Amount of contribution is an in-kind contribution on the line above for amount of contribution. If the actual cost is not known, amount of contribution is an in-kind contribution on the line above for amount of contribution. Full name of candidate: Friends of Janet Stevens (Last Name) (First Name) (Middle Name/Initial) Grick Candidate is Seeking (Middle Name/Initial) Full name of candidate: Friends of Janet Stevens (Last Name) (First Name) (Middle Name/Initial) Contribution is an in-kind contribution, provide a description of the goods or services provided, and enter the candidate is Seeking (Middle Name/Initial) The contribution is an in-kind contribution, provide a description of the goods or services provided, and enter the candidate is services provided.	Political Contributions	\$	O	
Full name of candidate: Friends of Cindy Rosenwald (Last Name) (First Name) (Middle Name/Initial) Amount of contribution \$ 125.00 Office Candidate is Seeking State Senate If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter the ctual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not known, anter an estimated value and the word "estimate." Full name of candidate: Friends of Janet Stevens (Last Name) (First Name) (Middle Name/Initial) Amount of contribution \$ 150.00 Office Candidate is Seeking Executive Counsel If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter the citual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not known,	or each political contri	ibution that is reportab		64 paid on behalf of the
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Full name of candidate: Friends of Janet Stevens	amount of contribution \$		Office Califidate is Security	
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actual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not known,	Full name of candidate:	(=400 1 141110)		
		150.00	Office Candidate is Seeking	Executive Counsel
	Amount of contribution \$ If the contribution is an inactual cost of the in-kind of	-kind contribution, provi	de a description of the goods or	services provided, and enter the
	Amount of contribution \$ f the contribution is an inctual cost of the in-kind of	-kind contribution, provi	de a description of the goods or	services provided, and enter the
	Amount of contribution \$ f the contribution is an inactual cost of the in-kind of	-kind contribution, provi	de a description of the goods or	services provided, and enter the
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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 contrib	outions 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 be		
/s/ Jim Merrill	4/27/2022	
(Signature of lobbyist)	(Date)	
Jim Merrill		
(Print Name of lobbyist)		

*Attachment to Addendum A, Section V

The Bernstein Shur Group is a subsidiary business of the Bernstein Shur law firm, with offices in Maine, New Hampshire and Vermont. The Group's lobbying work is only one part of a broad range of work, and the consultants involved in lobbying also perform other consulting work which is completely unrelated to lobbying. All fees for services and reimbursable expenses paid by Bernstein Shur Group clients (including lobbying clients) are deposited into the . operating revenues of the Group and/or law firm. All operating expenses of the Group are paid from operating expenses of the Group and/or law firm. Accordingly, it is impossible to determine with any more specificity how funds placed into our general operating account were later used.