PLEASE PRINT

STATE OF NEW HAMPSHIRE

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

RECEIVED

NEW HAMPSHIRE PARTMENT OF STATE

				DEPARTMENT OF
	t(s)Kristy A. Merri yist's partnership, fir		any:	
			,	
New Hamps	hire Bankers Associa ame of partnership, firm	or corporation)		
DO D 2596		Concord	NH	03302-2586
PO Box 2586 Business Address: (3	Street)	(Town/City)	(State)	(Zip Code)
(402) 224 537	3 () N/A	e-mailkmerrill@	nhbankers.com
(603)224-537. (Telephone))	(Fax)		
reportable expense	transactions which a	re not attributable to	s for each client, OR you may any one client). the reporting date relative to the state of the	ay file a separate report for
X All reportable to	ransactions occurring i	n the months prior to t	to topotting date retained to a	
New Hamp	pshire Bankers Ásso	ciation	N. D. Standard Bound	
O.D.	(Full Name of Clien	t as it appears on the Lot	byist Registration Form)	
OR ☐ All reportable tranunrelated to any par	nsactions by the lobbyi ticular client.	st (including the lobby	rist's family), or the lobbying	firm listed below which are
IV. Date of Report	April 29. activity from date of reg	2020 🗌 gistration to 3/31/20	July 29, 2020 [] activity from 4/1/20 to	6/30/20
Reports Cover.	October 28, 202 activity from 7/1/20 to	20 X	January 27, 2021 activity from 10/1/20 to 12/3	1/20
V. There have be If this box is checked House, Room 204. C	d, complete just this for	and no reportable on and submit it to the	transactions made since (Secretary of State's Office, 1	the last report. 07 North Main Street, State
VI. Check if additi	onal reports are attac	ched:	Additional Assessment For	vnencec
X) If you have rece	ived fees or made expe	enditures, you must ill	e Addendum A— Fees and Ex must file Addendum B— Rep	oort of Honorariums or
E Daimburge	ment			
X If you, your firm	, or your family has ma	ade political contributi	ons, you must file Addendur	n C- Political Contributions
I have read RSA 15	Affirmation by Lobby . RSA 15-B, RSA 14-0 best of my knowledge	C and RSA 664 and he	reby swear or affirm that the	foregoing information is true
(Signature o) lobb	Merrill		10/26/2020 (I	Date)
Kristy A. Merr				

p L E A S E P R i N T

STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A



I. Name of Lobbyist(s)Kristy A. Merrill / Ryan Hale	
II. Name of lobbyist's partnership, firm or corporation, if any:	
New Hampshire Bankers Association(Name of partnership, firm or corporation)	
III. Name of Client New Hampshire Bankers Association Da	te10/26/2020
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:	ess fee amount reported shall not be
a) Total of all fees received in this reporting period	a) \$9,026.44
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) \$16,122.74 ar)
c) ToteAdfldlheses andeb)ed to date	c) \$25,149.18
 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 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 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 lessing lobbied, purchase of a ceremonial object given to a person being lobbie (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.	may be filed for the lobbyist(s)/firm. e aggregate total of all expenses paid expenses; (b) the aggregate total of all le: meals purchased during a business st than \$10 that is given to the personed with a value of \$25.00 or less); and orting period of greater than \$25.00 for ue of greater than \$25, purchase of a er 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.	a) \$31,025.09
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	рё 0.00
c) Total of all itemized expenditures reported in detail in section VI.	c) \$18,000.00

	ses for this reporting period ines a, b and c)	d) \$49,025.09
e) Total of exp (This should b	enses paid this calendar year, prior to this reporting period be the amount on line f of addendum A for last month's report)	e) \$86.797.76
f) Total of all	expenses year to date	f) \$135,822.85
VI. Other Exp Provide the foll period, includir	nenses: lowing detail for all expenditures of more than \$25 made from l ang by whom paid or to whom charged.	lobbying fees during this reporting
Paid to:	Gallagher, Callahan & Gartrell, PC quarterly	Amount:
(monthly \$6000	0) lobbying retainer paid by NH Bankers Association.	\$18,000.00
		\$
		s
		s
		\$
		\$
1 have read R	ment/Affirmation by Lobbyist SA 15, RSA 15-B and RSA 664 and hereby swear or affi	
is true and co	omplete to the best of my knowledge and belief.	, .
Krist	Mary Pl	10/26/2020
(Signature o	f lobbyist)	(Date)
~		
Kristy A. I	Merrill of lobbyist)	

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STATE OF NEW HAMPSHIRE

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

·	rship, firm or corporation)		
III. Name of Client			Date10/26/2020
Political Contributions For each political contribution client/lobbyist and lobbying	firm, indicate the follow	ving:	er 664 paid on behalf of the
Full name of candidate:	Chandley	Shanon	c) (Middle Nume/Initia
Amount of contribution \$!	00.00	Office Candidate is S	eekingSenate
one aresimated value and in	e word "estimate."		on. If the actual cost is not know
			·
Full name of candidate:	(Last Name)	(First Name)	·
Full name of candidate: Amount of contribution \$ If the contribution is an in-kind actual cost of the in-kind contribution is an in-kind contribution is a	(Last Name) I contribution, provide a delibution on the line above f	(First Name) Office Candidate is secription of the goods	(Middle Name/Initial)
Full name of candidate: Amount of contribution \$	(Last Name) I contribution, provide a delibution on the line above for word "estimate."	(First Name) Office Candidate is secription of the goods	(Middle Name/Initial) Seeking or services provided, and enter t

If the contribution is an in-kind contribution, provide a description of actual cost of the in-kind contribution on the line above for amount enter an estimated value and the word "estimate."	of the goods or services provided, and enter the of contribution. If the actual cost is not known,
	1
(If more than three contributions were made, report additional contributions	s on separate addendum C forms.)
Sworn Statement/Affirmation by Lobbyist	,
I have read RSA-15, RSA-15-B and RSA-664 and hereby swe is true and complete to the best of my knowledge and belief.	ear or affirm that the foregoing information
Jefun DAhl	10/26/2020
(Signature of lobbyist)	(Date)
Ryan Hale	
(Print Name of lobbyist)	

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STATE OF NEW HAMPSHIRE

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

(Name of partne	rship, firm or corporation)		<u> </u>
II. Name of Client		D	nte10/26/2020
Political Contributions For each political contribution in the contribution of the con	firm, indicate the followir	ng:	64 paid on behalf of the
			(Middle Name/Initial)
Amount of contribution \$2	50.00C	office Candidate is Seeki	ngSenate
actual cost of the in-kind contributer an estimated value and the	bution on the line above for a word "estimate."	amount of contribution.	ervices provided, and enter the If the actual cost is not known,
Full name of candidate:	Regina for State Senate (Last Name)	e(First Name)	(Middle Name/Initial)
Full name of candidate: Amount of contribution \$ If the contribution is an in-kind actual cost of the in-kind contr	Regina for State Senate (Last Name) 125.00 Office I contribution, provide a describution on the line above for	e(First Name) Candidate is Seeking ription of the goods or s	(Middle Name/Initial)
Full name of candidate: Amount of contribution \$	Regina for State Senate (Last Name) 125.00 Office I contribution, provide a describution on the line above for	e(First Name) Candidate is Seeking ription of the goods or s	(Middle Name/Initial) _Senate ervices provided, and enter the

actual cost of the in-kind contribution on the line above for amount of	
enter an estimated value and the word "estimate."	
	······································
	· · · · · · · · · · · · · · · · · · ·
	,
(If more than three contributions were made, report additional contributions or	n separate addendum C forms.)
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear is true and complete to the best of my knowledge and belief.	or affirm that the foregoing information
Kint Hewill	10/26/2020
(*ighature of lobbyist)	(Date)
(Print Name of lobbyist)	

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