PLEASE PRINT

STATE OF NEW HAMPSHIRE

2018 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

RECEIVED

JAN 28 2019

NEW HAMPSHIRE DEPARTMENT OF STATE

I. Name of Lobbyist(s) Kobert U. Sculle	DEPARTMENT OF
II. Name of lobbyist's partnership, firm or corporation, if an	y:
New Hampshire Motor Transpor (Name of partnership, firm or corporation)	t association
Business Address: (Street) (Town/City)	0(Cl NH 0330) (State) (Zip Code)
(603 - 204 - 7337) $(608 - 208 - 93)$ (Fax)	361 e-mail Y sculley@nhmta.org
III. This statement covers: (Choose one – file separate report reportable expense transactions which are not attributable to	s for each client, OR you may file a separate report for any one client).
☐ All reportable transactions occurring in the months prior to the	he reporting date relative to the following client:
NH Motor Jransport associa (Full Name of Client as it appears on the Lot	ation Obyist Registration Form)
OR All reportable transactions by the lobbyist (including the lobb unrelated to any particular client.	pyist's family), or the lobbying firm listed below which are
IV. Date of Report April 25, 2018	July 25, 2018 🗍
Reports cover: activity from date of registration to 3/31/18	activity from 4/1/18 to 6/30/18
October 31, 2018 \sqcup activity from 7/1/18 to 9/30/18	January 30, 2019 ☑ activity from 10/1/18 to 12/31/18
V. There have been no fees received and no reportable If this box is checked, complete just this form and submit it to the Concord, NH 03301.	transactions made since the last report. Because of State's Office, State House, Room 204,
VI. Check if additional reports are attached:	
☐ If you have received fees or made expenditures, you must fi	le Addendum A- Fees and Expenses
☐ If you have paid an honorarium or reimbursed expenses, you Expense Reimbursement	u must file Addendum B- Report of Honorariums or
If you, your firm, or your family has made political contribu	utions, you must file Addendum C- Political Contributions
Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15-B, RSA 14-C and RSA 664 and he and complete to the best of my knowledge and belief.	creby swear or affirm that the foregoing information is true
(Signature of lobbyist)	1-24-19 (Date)
(Print Name of lobbyist)	



STATE OF NEW HAMPSHIRE

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

P	I. Name of Lobbyist(s) Robert J. Sculley
L E	II. Name of lobbyist's partnership, firm or corporation, if any:
A S	New Hampshire Motor Fransport association (Name of partnership, firm or corporation)
E	
P	III. Name of Client NH motor Transport absociationate
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: CHCK (Last Name) (First Name) (Middle Name/Initial)
	Amount of contribution \$ 1,000.00 Office Candidate is Seeking SEVATE
	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: Clast Name Chart Name Cha
4	Amount of contribution \$ 400.00 Office Candidate is Seeking SEPRIE
1	f 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."
	Tull name of candidate: (Last Name) (First Name) (Middle Name/Initial) Amount of contribution \$ 500.00 Office Candidate is Seeking

(If more than	hree contributions were made	e, report additional contributi	ions on separate addend	um C forms
Sworn Stat	ement/Affirmation by	Lobbyist	, ware addong	coms.)
I have read	RSA 15, RSA 15-B and complete to the best of m	RSA 664 and hereby sv y knowledge and belief	wear or affirm that	the foregoing information 1 19 (Date)



STATE OF NEW HAMPSHIRE

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

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A TABLE OF TODDYISI	(s) Robert J. S P's partnership, firm or corp	1	
s Enemy Ma	partnership, firm or corp	oration, if any:	
E OO (Name	of partnership, firm or corporation)	J. New Ha	noshire
P III. Name of Client Z R I Political Contribution N For each political con T client/lobbyist and lob	Moters Association Moters Association Comparinership, firm or corporation Comparinership Comparinership	rsuant to RSA Cha	pter 664 paid on behalf of the
Full name of candidate Amount of contribution \$	SCHUDOMAN (Last Name) 250. ©	(First Name) Office Candidate is	AU W
Full name of candidate:			
	(Last Name) (F	irst Name)	
Amount of contribution \$		irst Name)	(Middle Name/Initial)
Amount of contribution \$	Of	fice Candidate is See	(Middle Name/Initial) king services provided, and enter the If the actual cost is not known,
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Amount of contribution \$ If the contribution is an in-kin actual cost of the in-kind contrependent and estimated value and the contract of the contract	Official description of the description of the line above for among word "estimate."	fice Candidate is See	kina
Amount of contribution \$	Office of the contribution of the line above for among the word "estimate."	fice Candidate is See ption of the goods or ount of contribution.	kina

If the contribution is an in-kind contribut actual cost of the in-kind contribution on enter an estimated value and the word "es	omate."	of contribution. If the a	ictual cost is not
(If more than three contributions were made, rep. Sworn Statement/Affirmation by Lob.)			
Sworn Stote	ort additional contribution	202 00 200	
Sworn Statement/Affirmation by Lobi)vic+	on separate addendum C fo	rms.)
I have read RSA 15, RSA 15-B and RSA is true and complete to the best of my known to the best of my kn	664 and hereby sw wledge and belief.	ear or affirm that the fore	going informati
(Signature of obbyist)		L- 7.1	,
Print Name of lobbyist)	E 01	(Date	-19
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