

# STATE OF NEW HAMPSHIRE

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

OCT 25 2022

NEW HAMPSHIRE
DEPARTMENT OF STATE

#### PLEASE PRINT

PLEASE PRINT

I. Name of Lobb	DEPARTMENT OF			
II. Name of lobb	- -	p, firm or corporation, if any:		
	(Name of partners	nip, firm or corporation)		
5 Bedford	Farms	Bedford	NH	03110
Business Address:	(Street)	(Town/City)	(State)	(Zip Code)
( ) 207-46	88-8789	( )	Courtney.Tan e-mail	ner@hitchcock.org
(Telepho	one)	(Fax)		<del></del> ,
reportable exper	ise transactions	ose one — file separate reports for which are not attributable to an urring in the months prior to the n	ny one client).	- "
Dartmouth	Health			
	(Full Name	of Client as it appears on the Lobbyi	st Registration Form)	
All reportable unrelated to any property. Date of Reports cover:	oarticular client.  ort April 27, activity from date October 2	of registration to 3/31/22 a 26, 2022 🔽	July 27, 2022  Stivity from 4/1/22 to 6/30/22  January 25, 2023  Activity from 10/1/22 to 12/31/2	
	ked, complete jus	ceived and no reportable tra to this form and submit it to the Se NH 03301.		
If you have p Expense Reimbu	eceived fees or moderation and honorarium received an honorarium received and the control of the	are attached:  lade expenditures, you must file A  m or reimbursed expenses, you m  ily has made political contribution	ust file <b>Addendum B</b> – Rep	oort of Honorariums or
and complete to	15, RSA 15-B, R the lest of my kn	y Lobbyist SA 14-C and RSA 664 and herebowledge and belief.	October 20, 20	022
(Signature of lot			(Date	<del>e</del> )
Courtney T				
(Print Name of l	υυσγιει <i>)</i>			

# P L E A S E

#### S E P R I N T

# STATE OF NEW HAMPSHIRE

# Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s) Courtney Tanner					
II. Name of lobbyist's partnership, firm or corporation, if any:					
(Name of partnership, firm or corporation)  III. Name of Client Dartmouth Health	Date 10/20/2022				
<ul> <li>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 greduced by any expenses:</li> <li>a) Total of all fees received in this reporting period</li> <li>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</li> <li>c) Total of all fees received to date (Add lines a and b)</li> <li>d) Indicate the amount of any such fees that are due, but have not yet been paid</li> </ul>	nt relations, or public relations services gross fee amount reported shall not be a) \$\frac{10,000}{20,000}\$				
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to refees. Separate reports are to be filed for expenditures made relative to each the lobbyist(s)/firm that are unrelated to any one client a separate report 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 individual expenses where the expenditure was of \$25.00 or less (for examplunch where the cost was \$25.00 or less, purchase of a pen with a value of the being lobbied, purchase of a ceremonial object given to a person being lobbe (c) an itemized statement of each individual expenditure made during this repart purpose not covered by (a) (for example: purchase of a meal with value great restaurant expenses for a legislative reception). Expenses for honorarium contributions will be reported on separate addendums and should not be reported.	n client and if expenditures are made by may be filed for the lobbyist(s)/firm he aggregate total of all expenses paid expenses; (b) the aggregate total of all ple: meals purchased during a business less than \$10 that is given to the person pied with a value of \$25.00 or less); and porting period of greater than \$25.00 fo alue of greater than \$25, purchase of a ter than \$25, but not greater than \$50 as, expense reimbursement, or political				
<ul><li>a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.</li><li>b) Total aggregate of expenditures during this reporting period, not reported</li></ul>					
<ul><li>in a), of \$25 or less.</li><li>c) Total of all itemized expenditures reported in detail in section VI.</li></ul>	b) \$ c) \$				

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$	
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) \$	
f) Total of all expenses year to date	f) \$	
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from leading 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 affirm is true and complete to the best of my knowledge and belief.	m that the foregoing information	
	10/20/2022	
(Signature of lobbyist)	(Date)	
Courtney Tanner		
(Print Name of lobbyist)		

# STATE OF NEW HAMPSHIRE

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

•	ership, firm or corporation)		
II. Name of Client Dartmo	outh Health	· 	<sub>Date</sub> 10/20/2022
Political Contributions			
or-each-political-contributi			pter 664 paid on behalf of the
lient/lobbyist and lobbying	firm, indicate the i	ollowing:	
full name of candidate:	rumble, David		
			(Middle Name/Initial)
amount of contribution \$ 10	0.00	Office Candidate is Seek	<sub>ing</sub> NH House
Full name of candidate:	(Last Name)	(First Name)	(Middle Name/Initial)
full name of candidate:	(Last Name)	(First Name)	
Full name of candidate:  Amount of contribution \$  f the contribution is an in-kind cut cost of the in-kind contribution contribution is an in-kind contribution in-kind contribu	(Last Name) d contribution, provid	(First Name)  Office Candidate is See a description of the goo	(Middle Name/Initial)
Full name of candidate:  Amount of contribution \$  If the contribution is an in-kind actual cost of the in-kind contribution contribution is an in-kind contribution in-kind cont	(Last Name) d contribution, provid	(First Name)  Office Candidate is See a description of the goo	(Middle Name/Initial) seking ods or services provided, and enter t
Full name of candidate:  Amount of contribution \$  If the contribution is an in-kine	(Last Name) d contribution, provid	(First Name)  Office Candidate is See a description of the goo	(Middle Name/Initial) seking ods or services provided, and enter t

	escription of the goods or services provided, and enter the for amount of contribution. If the actual cost is not known,
enter an estimated value and the word "estimate."	or amount of contribution. If the actual cost is not known,
(If more than three contributions were made, report additional	contributions on separate addendum C forms.)
Sworn Statement/Affirmation by Lobbyist	
*	ereby swear or affirm that the foregoing information
is true and complete to the best of my knowledge and	nd belief.
	October 20, 2022
(Signature of lobbyist)	(Date)
	(Date)
Courtney Tanner	_
(Print Name of lobbyist)	
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