2023 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

# RECEIVED

JUL 2 4 2023

NEW HAMPSHIRE DEPARTMENT OF STATE

### PLEASE PRINT

I. Name of Lobbyist(s) 108 Elt 5. SCOLCEU
II. Name of lobbyist's partnership, firm or corporation, if any:
Name of partnership, firm or corporation)  Name of partnership, firm or corporation)
P. C. Box 3898 Cololl Ntl 03302  Business Address: (Street) (Town/City) (State) (Zip Code)
(oG) 224-7337 () e-mail
(prove)
III. This statement covers: (Choose one – file separate reports for each client, OR you may file a separate report for reportable expense transactions which are not attributable to any one client).
All reportable transactions occurring in the months prior to the reporting date relative to the following client:
(Full Name of Client as it appears on the Lobbyist Registration Form)
OR
All reportable transactions by the lobbyist (including the lobbyist's family), or the lobbying firm listed below which are
unrelated to any particular client.
TV D
IV. Date of Report April 26, 2023 July 26, 2
Reports cover: activity from date of registration to 3/31/23 activity from 4/1/23 to 6/30/23
October 25, 2023 January 31, 2024 January 31, 2024
activity from 7/1/23 to 9/30/23 activity from 10/1/23 to 12/31/23
V. There have been no fees received and no reportable transactions made since the last report.  If this box is checked, complete just this form and submit it to the Secretary of State's Office, 107 North Main Street, State House, Room 204, Concord, NH 03301.
VI Check if additional reports are attached:
If you have received fees or made expenditures, you must file Addendum A- Fees and Expenses
If you have paid an honorarium or reimbursed expenses, you must file Addendum B—Report of Honorariums or Expense Reimbursement
If you, your firm, or your family has made political contributions, 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 hereby swear or affirm that the foregoing information is true
and complete to the best of my knowledge and belief.
$\frac{\sqrt{WA}\sqrt{\sqrt{UV_1}}}{\sqrt{\text{Signature of lobbyist}}} = \frac{7-21-23}{\sqrt{\text{Data}}}$
(Signature of lob(yist) (Date)
P-V
(Brint Name of John with
(Print Name of lobbyist)



L E

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P R I N T

### Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s) ROBERT J. Saulay	
II. Name of lobbyist's partnership, firm or corporation, if any:	
Name of partnership, firm or corporation)	704
(Name of partnership, firm or corporation)	
III. Name of Client N & MOTON TITUEDOLT ASSO	Date 7-21-13
<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 groreduced 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 year)</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>	that are related, directly or indirectly, relations, or public relations services as fee amount reported shall not be a) \$
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to rep fees. 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 in 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 less being 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.	client and if expenditures are made by may be filed for the lobbyist(s)/firm. It aggregate total of all expenses paid apenses; (b) the aggregate total of all expenses; (c) that is given to the person of with a value of \$25.00 or less); and orting period of greater than \$25.00 for the of greater than \$25, purchase of a expense reimbursement, or political ed on Addendum A.
support staff, and office expenses, related directly or indirectly to lobbying.  b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	a) \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$
c) Total of all itemized expenditures reported in detail in section VI.	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 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 affirm is true and complete to the best of my knowledge and belief.	from that the foregoing information  9-21-2-3
(Signature of lobbyist) Reserve J- Scarcey	(Date)
(Print Name of lobbyist)	

P	I. Name of Lobbyist(s) ROBER J. Scoules
L E	II. Name of lobbyist's partnership, firm or corporation, if any:
A S E	Name of partnership, firm or corporation)  (Name of partnership, firm or corporation)
P	III. Name of Client Nt Alora Turngote Kesh Date 7-21-23
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:    Note
	Amount of contribution \$ 2,500 Office Candidate is Seeking 5 Charge
	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: (Last Name) (First Name) (Middle Name/Initial)
	Amount of contribution \$ Office Candidate is Seeking
	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: (Last Name) (First Name) (Middle Name/Initial)

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."	e n,
If more than three contributions were made, report additional contributions on separate addendum C forms.)	
Sworn Statement/Affirmation by Lobbyist	
have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm that the foregoing information strue and complete to the best-of my knowledge and belief.	<u>a</u>
(Signature of lobbyist) 1-21-23 (Date)	_
(Print Name of lobbyist)	

P	I. Name of Lobbyist(s) ROBERT J. Scales
L E	II. Name of lobbyist's partnership, firm or corporation, if any:
A S E	Net MOTOL TRANSPIR ASSOCIATION  (Name of partnership, firm or corporation)
P	III. Name of Client NH MOTEL THATLE ASSOL Date 7-21-23
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: ALTSCHILLA DEBNA (Last Name) (First Name) (Middle Name/Initial)
	Amount of contribution \$ 500 Office Candidate is Seeking 55 - 405
	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:  (Last Name)  (First Name)  (Middle Name/Initial)
	Amount of contribution \$ 25 Office Candidate is Seeking SELOATE
	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: BAADABY (First Name) (Middle Name/Initial)
	Amount of contribution \$ 1, are Office Candidate is Seeking SELATE

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."
enter an estimated value and the word estimate.
(If more than three contributions were made, report additional contributions on separate addendum C forms.)
Sworn Statement/Affirmation by Lobbyist
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm that the foregoing information—is true and complete to the best of my knowledge and belief.
(Signature of lobbyist) (Date)
(Print Name of lobbyist)

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,	I. Name of Lobbyist(s) KOBERT J. SCULLEY
	II. Name of lobbyist's partnership, firm or corporation, if any:
5	M. H. MOTON TRANSPORT ASSOCIATION  (Name of partnership, firm or corporation)
,	MI. Name of Client 1/1 Motor Tumpor ASSN Date 7-21-23
ĭ	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: NH SELATE DEW-CUSTIC CACCES  (Last Name) (First Name) (Middle Name/Initial)
	Amount of contribution \$ 2,500 Office Candidate is Seeking
	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: DA LESA-DAO (Cast Name) (First Name) (Middle Name/Initial)  Amount of contribution \$ 250 Office Candidate is Seeking SEVATE
	Amount of contribution \$ 250 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: CALGO SHALOO (Middle Name/Initial)
	Amount of contribution \$ 500 Office Candidate is Seeking SE LATE

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 contributions on separate addendum C forms.)  Sworn Statement/Affirmation by Lobbyist
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm that the foregoing information—is-true and complete to the best of my knowledge and belief.
(Signature of lobbyist)  (Date)  (Print Name of lobbyist)

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I. Name of Lobbyist(s) ROBERT J. Scully	<u></u>
II. Name of lobbyist's partnership, firm or corporation, if any:	
Net Moter TMDSPOTT ASSOCIATION (Name of partnership, firm or ediporation)	
III. Name of Client N+ Norce TIANGET ASSN Date 7.	-21-23
Political Contributions For each political contribution that is reportable pursuant to RSA Chapter 664 paid on be client/lobbyist and lobbying firm, indicate the following:	ehalf of the
Full name of candidate: DAULD  (Last Name) (First Name) (Middle Name)	(C. 11)
, , , , , , , , , , , , , , , , , , , ,	=
Amount of contribution \$ 250 Office Candidate is Seeking SEL	ATT=
Full name of candidate: FLIDU (Last Name) (Middle Name) (Middle Name)	W *: 1)
0	•
Amount of contribution \$ _2 5000 Office Candidate is Seeking _ SEV	47E
If the contribution is an in-kind contribution, provide a description of the goods or services provide actual cost of the in-kind contribution on the line above for amount of contribution. If the actual enter an estimated value and the word "estimate."	ded, and enter the cost is not known,
Full name of candidate: (Last Name) (First Name) (Middle Name)	e/Initial)
Amount of contribution \$ 250 Office Candidate is Seeking SEP	

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 contributions on separate addendum C forms.)	
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm that the foregoing information is true and complete to the best of my knowledge and belief.	
(Signature of lobby 1st)  7-21-23 (Date)	
Print Name of lobbyist)  Robbits  (Print Name of lobbyist)	

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