

(Print Name of lobbyist)

PLEASE PRINT

STATE OF NEW HAMPSHIRE

2021 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

RECEIVED

JUL 3 0 2021

NEW HAMPSHIRE DEPARTMENT OF STATE

I. Name of Lobbyist(s) Pi	erce J. Haley		
II. Name of lobbyist's par	tnership, firm or corporation, if a	ny:	
Serlin Haley LLP	·		
(Name of	partnership, firm or corporation)	 	
51 Franklin Street	Boston	MA	02110
Business Address: (Street)	(Town/City)	(State)	(Zip Code)
(617) 778-1200	(617) <u>778-1300</u>		@serlinhaley.com
(Telephone)	(Fax))	
reportable expense transa	c (Choose one – file separate reportions which are not attributable to one occurring in the months prior to	to any one client).	
			the following client:
OR (Ful	l Name of Client as it appears on the Lo	obbyist Registration Form)	
	ns by the lobbyist (including the lob client.	obyist's family), or the lobby	ing firm listed below which are
	ril 28, 2021	July 28, 2021 🗵 activity from 4/1/21 to 6/30/	/21
	tober 27, 2021	January 26, 2022 [activity from 10/1/21 to 12/	
	Gees received and no reportable lete just this form and submit it to the ncord, NH 03301.		
VI. Check if additional re	ports are attached:		
☐ If you have received fe	es or made expenditures, you must f	file Addendum A- Fees and	Expenses
☐ If you have paid an hor Expense Reimbursement	orarium or reimbursed expenses, yo	ou must file Addendum B-1	Report of Honorariums or
☐ If you, your firm, or yo	ur family has made political contrib	utions, you must file Adden	dum C- Political Contributions
Sworn Statement/Affirma I have read RSA 15, RSA 1 and complete to the best of	5-B, RSA 14-C and RSA 664 and h	ereby swear or affirm that th	ne foregoing information is true
freace H. H	der	07/21/2021	2.2241/10/10
(Signature of lobb vist)	U	(I	Date)
Pierce J. Haley			

II. Name of lobbyist's partner	ership, firm or cor	poration, if any:	
Serlin Haley LLP			
	ship, firm or corporation)		
III. Name of Client			Date 07/21/2021
Political Contributions For each political contributio client/lobbyist and lobbying			ter 664 paid on behalf of the
Full name of candidate:		Kevin	
	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$ 100.	.00	Office Candidate is	s Seeking State Senate
,	· · · · · · · · · · · · · · · · · · ·	D. Al-	
Full name of candidate:	Ward	Ruth	
Full name of candidate: Amount of contribution \$	(Last Name)	(First Name)	(Middle Name/Initial) Seeking State Senate
Amount of contribution \$ 100. If the contribution is an in-kind	(Last Name) 00 contribution, provide pution on the line above word "estimate."	(First Name)Office Candidate is a description of the good ve for amount of contribu	,
Amount of contribution \$ 100. If the contribution is an in-kind actual cost of the in-kind contribution is an in-kind actual cost of the in-kind contribution.	(Last Name) OO contribution, provide pution on the line abo	(First Name) Office Candidate is a description of the good	Seeking State Senate Is or services provided, and enter the

(If more than three contributions were made, report additional add	onal contributions on separate addendum C forms.)
Sworn Statement/Affirmation by Lobbyist	•
Turce H. Haley	07/21/2021
(Signature of lobby let)	(Date)
Pierce J. Haley	

I. Name of Lobbyist(s) Pier	ce J. Haley		
II. Name of lobbyist's part	nership, firm or cor	poration, if any:	
Serlin Haley LLP		, ,	
· · · · · · · · · · · · · · · · · · ·	ership, firm or corporation)	 	
III. Name of Client			Date 07/21/2021
Political Contributions For each political contributions	on that is reportable	nursuant to PSA Chan	ter 664 paid on behalf of the
client/lobbyist and lobbying			ter 004 paid on behalf of the
		<u> </u>	
Full name of candidate:	Stevens	Janet	
an name of candidate.	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$ 200	0.00	Office Candidate is	s Seeking Executive Council
		Office Candidate is Seeking Executive Council	
Full name of candidate:	Ricciardi	Denise	
run name of candidate.	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$ 100	0.00	Office Condidate is	Seeking State Senate
Amount of contribution \$		Office Candidate is	S Seeking
	ibution on the line abo		ds or services provided, and enter the ution. If the actual cost is not known
<u> </u>			
Full name of candidate:	Hennessey	Erin	
Full name of candidate:	Hennessey (Last Name)	Erin (First Name)	(Middle Name/Initial)

If the contribution is an in-kind contribution, provide a description actual cost of the in-kind contribution on the line above for amoun enter an estimated value and the word "estimate."	
(If more than three contributions were made, report additional contribution	ns on separate addendum C forms.)
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby sw is true and complete to the best of my knowledge and belief.	
Pierce J. Holey	07/21/2021
(Signature of lobby let)	(Date)
Pierce J. Haley	
(Print Name of lobbyist)	

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I. Name of Lobbyist(s) Piero	ce J. Haley		
II. Name of lobbyist's partr	aership, firm or cor	noration, if any:	•
Serlin Haley LLP	p, o. o.	portution, it unj.	
	ership, firm or corporation)		
III. Name of Client			Date 07/21/2021
Political Contributions For each political contribution client/lobbyist and lobbying			ter 664 paid on behalf of the
Full name of candidate:	Bradley	Jeb	
	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$ 500	0.00	Office Candidate i	s Seeking State Senate
Full name of candidate:	Morse	Chuck	
	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$ 500	1.00	Office Candidate is	Seeking State Senate
If the contribution is an in-kind			ds or services provided, and enter the
actual cost of the in-kind contrenter an estimated value and the		ve for amount of contrib	
	e word "estimate." Carson	Sharon	ution. If the actual cost is not known
Full name of candidate:	e word "estimate."	Sharon (First Name)	

If the contribution is an in-kind contribution, provide a descript actual cost of the in-kind contribution on the line above for amounter an estimated value and the word "estimate."	
	, AMARINGARE
(If more than three contributions were made, report additional contribu-	utions 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 believed.	
Pierce J. Haley	07/21/2021
(Signature of lobbyist)	(Date)
Pierce J. Haley	
(Print Name of lobbyist)	

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I. Name of Lobbyist(s) Pier	ce J. Haley		
II. Name of lobbyist's part	nershin firm or cori	paration if any	
•	nersulp, in m or corp	poration, it any:	
Serlin Haley LLP	ership, firm or corporation)		* **** ** * * * * * * * * * * * * * * *
•	ership, filli of corporation)		07/24/2024
III. Name of Client			_{Date} 07/21/2021
Political Contributions For each political contribut client/lobbyist and lobbying			ter 664 paid on behalf of the
Full name of candidate:	D'Allesandro	Lou	·
	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$ 50	0.00	Office Candidate is	S Seeking State Senate
·	Cause	Dan	
Full name of candidate:	Soucy	Donna	(A 4: 4.41 - A 1 // - :4: - 1)
Amount of contribution \$ 50	(Last Name) 0.00	(First Name)	(Middle Name/Initial) Seeking State Senate
	ribution on the line abov		ds or services provided, and enter to the services provided, and enter to the actual cost is not known the services.
D 11			
Full name of candidate:	Sherman	Tom	
Full name of candidate:	(Last Name)	(First Name)	(Middle Name/Initial)

(If more than three contributions were made, report additional	contributions on separate addendum C forms.)
Sworn Statement/Affirmation by Lobbyist	
	hereby swear or affirm that the foregoing information and belief.
I have read RSA 15, RSA 15-B and RSA 664 and h	

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

RECEIVED

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

JUL 3 0 2021

NEW HAMPSHIRE DEPARTMENT OF STATE

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:

Name of Lobbying pa	rtnership, firm, or corp	oration: Serlin Haley Ll	_P
Name of Client (leave particular client):	e blank if Statement is f	or the partnership, firm, or	corporation and not related to any
Date of Report (chec	k one):		
April 28, 2021 🗆	July 28, 2021 🗹	October 27, 2021 🗆	January 26, 2022 □
			nd Expenses described above, and number of Addendum forms being
O Addendum A	(s).		
0 Addendum B	(s).		
4 Addendum C	(s).		
	rm that the foregoing in f my knowledge and be		nt and each Addendum is true and
Proce J.	Holey	07/2	21/2021
(Signature of lowbyist	() /		(Date)
Pierce J. Haley			
(Print Name of lobby)	ist)		

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