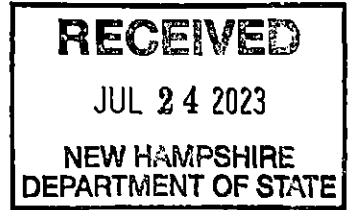




**STATE OF NEW HAMPSHIRE**  
**2023 Statement of Income and**  
**Expenses for LOBBYISTS**  
**(RSA Chapter 15)**



PLEASE PRINT

**I. Name of Lobbyist(s)** Jeanne Herrick and Erica Bodwell

**II. Name of lobbyist's partnership, firm or corporation, if any:**

HealthTrust Inc.

(Name of partnership, firm or corporation)

25 Triangle Park Drive Concord NH 03301

Business Address: (Street) (Town/City) (State) (Zip Code)

( 603 ) 230-3315 ( ) \_\_\_\_\_ e-mail legal@healthtrustnh.org  
 (Telephone) (Fax)

**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:

HealthTrust Inc.

(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.

**IV. Date of Report**

April 26, 2023

July 26, 2023

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

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.

Jeanne Herrick  
 (Signature of lobbyist)

07/19/2023

(Date)

Jeanne Herrick

(Print Name of lobbyist)

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

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

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

Name of Lobbying partnership, firm, or corporation: HealthTrust Inc.

Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any particular client): \_\_\_\_\_

***Date of Report (check one):***

April 26, 2023         July 26, 2023         October 25, 2023         January 31, 2024  

I have read RSA 15, RSA 15-B, RSA 664, the Statement of Income and Expenses described above, and the following Addendums submitted with that Statement (insert the number of Addendum forms being submitted):

Addendum A(s). \_\_\_\_\_

Addendum B(s). \_\_\_\_\_

Addendum C(s). \_\_\_\_\_

I hereby swear or affirm that the foregoing information on the Statement and each Addendum is true and complete to the best of my knowledge and belief.

*Erica Bodwell*  
(Signature of lobbyist)

07/19/2023  
(Date)

Erica Bodwell  
(Print Name of lobbyist)