STATE OF NEW HAMPSHIRE

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

PLEASE PRINT

I. Name of Lobbyist(s) <u>Melissa E. Birchard</u>	·
II. Name of lobbyist's partnership, firm or corporation, if a	ny:
Conservation Law Foundation	on .
(Name of partnership, firm or corporation)	
27 North Main St. Co	oncord, NH 03301-4930
Business Address: (Street) (Town/City)	(State) (Zip Code)
()603 225-3060 () (Fax)	e-mailmbirchard@clf.org
III. This statement covers: (Choose one – file separate reporreportable expense transactions which are not attributable	, ,
All reportable transactions occurring in the months prior to	the reporting date relative to the following client:
Conservation Law Foundation	·
(Full Name of Client as it appears on the Lo	bbyist Registration Form)
OR All reportable transactions by the lobbyist (including the lob unrelated to any particular client.	byist'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 * activity from 7/1/18 to 9/30/18	January 30, 2019 \square 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.	
VI. Check if additional reports are attached:	
If you have received fees or made expenditures, you must f	ile Addendum A- Fees and Expenses
☐ If you have paid an honorarium or reimbursed expenses, yo Expense Reimbursement	ou must file Addendum B- Report of Honorariums or
☐ If you, your firm, or your family has made political contrib	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 h and complete to the best of my knowledge and belief. (Signature of lobbyist) Melissa E. Birchard	ereby swear or affirm that the foregoing information is true ///// (Date)
(Print Name of lobbyist)	

PLEASE PRINT

STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s) Melissa E. Birchard	· · · · · · · · · · · · · · · · · · ·
II. Name of lobbyist's partnership, firm or corporation, if any:	
Conservation Law Foundation (Name of partnership, firm or corporation)	
III. Name of Client Conservation Law Foundation	Date
IV. Fees Received Indicate the gross amount of all fees received from the client identified about to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The reduced by any expenses:	nent relations, or public relations services
a) Total of all fees received in this reporting period	a) \$216.60 (pro-rated salar
b) Total of all fees received this calendar year, prior to this reporting perio (This should equal the total of all prior monthly reports for this calendar	
c) Total of all fees received to date (Add lines a and b)	c)\$837.35 (pro-rated salar
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$ <u>N/A</u>
V. Expenses: -\(\) \(\) \(\) \\\\\\\\\\\\\\\\\\\\	ch client and if expenditures are made by our may be filed for the lobbyist(s)/firm. the aggregate total of all expenses paid e expenses; (b) the aggregate total of all imple: meals purchased during a business of less than \$10 that is given to the person belied with a value of \$25.00 or less); and reporting period of greater than \$25.00 for value of greater than \$25, purchase of a leater than \$25, but not greater than \$50, arms, expense reimbursement, or political
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.b) Total aggregate of expenditures during this reporting period, not reported.	ed
in a), of \$25 or less.	b) \$ N/A
c) Total of all itemized expenditures reported in detail in section VI.	c) \$ _ N/A

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$ N/A
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) \$ N/A
f) Total of all expenses year to date	f) \$N/A
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from leading period, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
N/A	· \$
	\$
	\$
	\$
	\$
	\$
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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.	n that the foregoing information
(Signature of Johnvist)	149/2018
(Signature of lobbyist)	(Date)
Melissa E. Birchard (Print Name of lobbyist)	