

### STATE OF NEW HAMPSHIRE

### 2019 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

RECEIVED

JAN 2 8 2020

NEW HAMPSTIRE DEPARTMENT OF STATE

I. Name of Lobbyist(s) Alison	Cooper		
II. Name of lobbyist's partners	hip, firm or corporation, if	any:	
American Property Casual	y Insurance Association	1	
(Name of partne	rship, firm or corporation)		
95 Columbia Street	Albany	NY	12210-2707
Business Address: (Street)	(Town/City)	(State)	(Zip Code)
(847) 297-7800	<sub>(847)</sub> 297-5064	<sub>e-mail</sub> compliar	nce@apci.org
(Telephone)	(Fa	x)	
III. This statement covers: (Ch reportable expense transaction			ay file a separate report fo
☐ All reportable transactions of	curring in the months prior to	o the reporting date relative to t	he following client:
American Property Casu	alty Insurance Associa	ation	
(Full Nam	e of Client as it appears on the I		· · · · · · · · · · · · · · · · · · ·
<u>OR</u>			
All reportable transactions by unrelated to any particular client.		bbyist's family), or the lobbyin	g firm listed below which a
	, 2019	July 31, 2019 activity from 4/1/19 to 6/30/19	9
	30, 2019	January 29, 2020 🛮	•
	n 7/1/19 to 9/30/19	activity from 10/1/19 to 12/3	1/19
V. There have been no fees r If this box is checked, complete ju State House, Room 204, Concord	ist this form and submit it to		
VI. Check if additional reports	are attached:		
· •		file Addendum A- Fees and E	Expenses
☐ If you have paid an honorarion  Expense Reimbursement	ım or reimbursed expenses, y	ou must file <b>Addendum B</b> - Re	eport of Honorariums or
☐ If you, your firm, or your fan	nily has made political contri	butions, you must file Addendi	um C- Political Contribution
Sworn Statement/Affirmation It have read RSA 15, RSA 15-B, I and complete to the best of my ki	RSA 14-C and RSA 664 and I	hereby swear or affirm that the	foregoing information is tru
alison losp	<u>~</u>	1/27/2020	
(Signature of lobbyist)		(Da	ite)
Alison Cooper			
(Print Name of lobbyist)			

# L E A 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) AllSON Cooper	
II. Name of lobbyist's partnership, firm or corporation, if any:	
American Property Casualty Insurance Association	
(Name of partnership, firm or corporation)	
III. Name of Client American Property Casualty Insurance Association	
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 reincluding research, monitoring legislation, and related legal work. The gross reduced by any expenses:	elations, or public relations services
a) Total of all fees received in this reporting period	a) \$ 4,859.38
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	b) \$ 0 ar)
c) Total of all fees received to date (Add lines a and b)	c) \$ 4,859.38
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$ <u>0</u>
V. Expenses:  Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to repo fees. Separate reports are to be filed for expenditures made relative to each clithe lobbyist(s)/firm that are unrelated to any one client a separate report metapenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office expindividual 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 lobbied (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 greater restaurant expenses for a legislative reception). Expenses for honorariums, contributions will be reported on separate addendums and should not be reported.	ient and if expenditures are made by ay be filed for the lobbyist(s)/firm. aggregate total of all expenses paid benses; (b) the aggregate total of all emeals purchased during a business than \$10 that is given to the person with a value of \$25.00 or less); and ting period of greater than \$25.00 for to of greater than \$25, purchase of a than \$25, but not greater than \$50, 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.	a) \$
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) \$ <u>0</u>
c) Total of all itemized expenditures reported in detail in section VI.	c) \$ <u>0</u>

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$ 0
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) \$ <u>0</u>
f) Total of all expenses year to date	f) \$ 0
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:
none	\$
	\$
	\$
	\$
	\$
	\$
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
(Signature of lobbyist)	1/27/2020
(Signature of lobbyist)	(Date)
Alison Cooper	
(Print Name of lobbyist)	

i.