STATE OF NEW HAMPSHIRE

2020 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

PLEASE PRINT

I. Name of Lobbyist(s) Richard Bouley \$	Michael Dennehy
11. Name of lobbyist's partnership, firm or corporation, if any:	,
DENNEHY & BOULEY LL	.c.
(Name of partnership, firm or corporation)	
Business Address: (Street) ST., STE. 3 CONC	(State) VH 03301 (Zip Code)
(603 228-1601 () e-ma	ail
III. This statement covers: (Choose one – file separate reports for each clier reportable expense transactions which are not attributable to any one client	nt, OR you may file a separate report for t).
All reportable transactions occurring in the months prior to the reporting dat American Physical Therapists (Full Name of Client as it appears on the Lobbytst Registration OR All reportable transactions by the lobbytst (including the lobbytst's family), our unrelated to any particular client.	Assoc. NH Chapte
IV. Date of Report April 29, 2020 July 29, Reports cover: activity from date of registration to 3/31/20 activity from 4/	, 2020
	27, 2021
V. There have been no fees received and no reportable transactions n If this box is checked, complete just this form and submit it to the Secretary of Sta State House, Room 204, Concord, NH 03301.	nade since the last report. Gate's Office, 107 North Main Street,
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 Adde Expense Reimbursement	ndum B- Report of Honorariums or
☐ If you, your firm, or your family has made political contributions, you must f	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 affind complete to the best of my knowledge and belief. Walk and C Baulay C (Signature of lobbyist) Boule C Richard Boule Boule C Richard Boule Boule Boule Boule Boule Boule Boule Boule	April 24, 2020 (Date)
(Print Name of lobbyist)	RECEIVED

MAY 06 2020

NEW HAMPSHIRE DEPARTMENT OF STATE

STATE OF NEW HAMPSHIRE



Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

1. Name of Lobbyist(s) Richard Bouley &	Michael Denn
II. Name of lobbyist's partnership, firm or corporation, if any:	
DENNEHY & BOULEY LLC (Name of partnership, firm or corporation)	<u> </u>
III. Name of Client American Physical There ASSOC NH Chapte	pists 03/31/2020
IV. Fees Received Indicate the gross amount of all fees received from the client identified abov to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The greduced by any expenses:	ve that are related, directly or indirectly,
a) Total of all fees received in this reporting period	a)\$/0,000.00
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 y	b) \$
c) Total of all fees received to date (Add lines a and b)	c)\$_ / O,000.06_
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to repfees. Separate reports are to be filed for expenditures made relative to each the lobbyist(s)/firm that are unrelated to any one client a separate report 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 lessing 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 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. e aggregate total of all expenses paid xpenses; (b) the aggregate total of all le: meals purchased during a business ss than \$10 that is given to the person ed with a value of \$25.00 or less); and orting period of greater than \$25.00 for me of greater than \$25, purchase of a ter than \$25, but not greater than \$50,
 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) \$
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.	n that the foregoing information
Richard L. Bouley (Signature of lobbyist)	april 24, 2020
Richard Bouley (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 Statement of Income and Expenses for:

Name of Lobbying partnership, firm, or corporation:
Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any
particular client): American Physical Therapists Assoc
particular client): American Physical Therapists Assoc NH Chapter Date of Report (check one):
April 29, 2020
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. (Signature of lobbyist) (Date)
Michael Dennehy (Print Name of lobbyist)