

STATE OF NEW HAMPSHIRE 2021 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

JUL 16 2021

NEW HAMPSHIRE
DEPARTMENT OF STATE

PLEASE PRINT

I. Name of Lobbyist	t(s) Samuel Halle	meier	<u> </u>	
II. Name of lobbyist	l's partnership, firm (or corporation, if any	:	·
Pharmaceutica	Care Managemer	nt Association		
(N	ame of partnership, firm o	or corporation)		
325 7th Street N	W, 9th Floor	Washington	DC	20004
Business Address: (S	Street)	(Town/City)	(State)	(Zip Code)
(202) 756-5727	()	e-mail shalleme	eier@pcmanet.org
(Telephone)		(Fax)		
III. This statement	covers: (Choose one –	file separate reports	for each client, OR you ma	ny file a separate report for
reportable expense	transactions which ar	e not attributable to	any one client).	
All reportable tra	ansactions occurring in	the months prior to th	e reporting date relative to th	e following client:
Pharmaceuti	ical Care Managem	nent Association as it appears on the Lobb	ovist Registration Form)	· }
OR	(i an i suijo și choju	is it appears on the Book	y ist integration rotting	
All reportable tra	nsactions by the lobbyi	st (including the lobby	rist's family), or the lobbying	g firm listed below which are
unrelated to any part	icular client.			
IV. Date of Report	April 28, 2021		July 28, 2021 🛛	
	livity from date of registra	ation,to 3/31/21	activity from 4/1/21 to 6/30/21	
•	October 27, 2021	_	January 26, 2022 🗌	
	activity from 7/1/21 to	9/30/21	activity from 10/1/21 to 12/31.	/21
If this box is checked		m and submit it to the	ransactions made since t Secretary of State's Office, 1	
VI. Check if addition	onal reports are attacl	neď:		
	-		Addendum A- Fees and E	xpenses
☐ If you have paid Expense Reimburser		bursed expenses, you	must file Addendum B- Re	port of Honorariums or
☐ If you, your firm	i, or your family has m	ade political contribut	ions, you must file Addendu	m C-Political Contributions
				dkre,
I have read RSA 15,	ffirmation by Lobbyi RSA 15-B, RSA 14-C ost of my knowledge a	and RSA 664 and her		foregoing information is true
- // //	/2		7/12/01	
(Signature of loobyi	st)		7/13/21 (Da	te)
Samuel Halleme	ier			
(Print Name of lobb				

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STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

11. Name of lobbyist's partnership, firm or corporation, if any:	
Pharmceutical Care Management Association	
(Name of partnership, firm or corporation)	
III. Name of Client Pharmaceutical Care Management Association	Date _July 28, 2021
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 including research, monitoring legislation, and related legal work. The groreduced by any expenses:	relations, or public relations service
a) Total of all fees received in this reporting period	a) \$ <u>7,375.00</u>
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) \$ 4,916.00 ar)
c) Total of all fees received to date (Add lines a and b)	c) \$ 12,291.00
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$_0.00
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 of the lobbyist(s)/firm that are unrelated to any one client a separate report in 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 exampl 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 lobbie (c) an itemized statement of each individual expenditure made during this repo 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.	lient and if expenditures are made to hay be filed for the lobbyist(s)/firm aggregate total of all expenses particles; (b) the aggregate total of all expenses; (b) the aggregate total of a meals purchased during a business than \$10 that is given to the persod with a value of \$25.00 or less); arting period of greater than \$25.00 for than \$25.00 for than \$25, but not greater than \$25 expense reimbursement, or politice
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) \$
ı	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) \$ _0.00
	VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from I period, 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 affire	n that the foregoing information
	is true and complete to the best of my knowledge and belief.	it that the foregoing information
		. 1. 1
	(Signature of lobbyist)	7/13/21 (Date)
	Samuel Hallemeier	
	(Print Name of lobbyist)	