

STATE OF NEW HAMPSHIRE

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

PLEASE PRINT

II. Name of lobbyist's partnership.	firm or comparation if	12.842*4	
National Association of I	•	•	
	o, tirm or corporation)	Dompanies (IVAIIIIC)	
3601 Vincennes Ro	·	olis IN	46268
Business Address: (Street)	(Town/City)	(State)	(Zip Code)
508: 431-0484		lobby	ing@aristotle.com
(Telephone)	()	e-man	
D. This statement covers: (Choos	e one – file senarate rem	orts for each client. OR you	may file a senarate report for
eportable expense transactions w			ining this a separate report to
€ All	ata - Taraharana arawaharan atau a		ate of the color of the sale
All reportable transactions occur	• • •		me ionowing chem;
National Association of M		<u> </u>	
(Full Name of OR	Client as it appears on the I	obbyist Registration Form)	
All reportable transactions by the	lobbyist (including the le	obbyist's family), or the lobby	ing firm listed below which are
mrelated to any particular client.		,	
	f=1		
V. Date of Report April 24, 20 Reports cover: activity from date of	119 L.) Tregistration to 3/31/19	July 31, 2019 X activity from 4/1/19 to 6/30	(19
October 30		January 29, 2020 [_
activity from 7/		activity from 10/1/19 to 12/	
V. There have been no fees reco	rived and no reportab	le transactions made since	e the last report.
lf this box is checked, complete just i			
Concord, NH 03301.			
VI. Check if additional reports are	attached:		
X If you have received fees or made			
I If you have paid an honorarium Expense Reimbursement	or reimbursed expenses.	you must file Addendum B-	Report of Honorariums or
 If you, your firm, or your family 	has made political contri	butions, you must file Adden	dum C- Political Contribution
	·	•	
Sworn Statement/Affirmation by 1	Lobbyist	3 1 1 T	
Thave read RSA 15, RS A 15 -B, RS _A and complete to the best of my know	A 14-C and RSA 664 and cledge and belief.		
		7/20/1	a -
Signature of lobbyist)		-/-/- 0-0-/-/	RECEIVE
Signature of lobbyist) (Print Name of lobbyist)		``	RECEIVEL
(Print Name of lobbyist)	<u>}</u>		JUL 3 1 2019
4			NEW HAMPSHIRE
			DEPARTMENT OF STA

PLEASE PRINT

STATE OF NEW HAMPSHIRE



Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lubbyist(s)	
II. Name of lobbyist's partnership, firm or corporation, if any:	
National Association of Mutual Insurance Companies	(NAMIC)
(Name of purtnership, firm or corporation)	
III. Name of Client National Association of Mutual Insurance Companies (NAM	IC) Date 6/26/2019
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 grareduced by any expenses:	relations, or public relations services
a) Total of all fees received in this reporting period	a) \$ 5208.91
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) \$ 6336.82 ear)
c) Total of all fees received to date (Add lines a and b)	c) \$
 d) Indicate the amount of any such fees that are due, but have not yet been paid 	d) S
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 of 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 lebeing lobbied, purchase of a ceremonial object given to a person being lobbie (c) an itemized statement of each individual expenditure made during this repair 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 aggregate total of all expenses paid expenses; (b) the aggregate total of all expenses; (b) the aggregate total of all le: meals purchased during a business so than \$10 that is given to the person of with a value of \$25.00 or less); and orting period of greater than \$25.00 four of greater than \$25, purchase of iter 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.	u) \$
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) \$ _25.50

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$ <u>32.85</u>
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) \$ <u>790.42</u>
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from begind, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
Postage, USPS	S
	\$
	\$
	\$
	\$
	\$
·	
Sworn Statement/Affirmation by Lobbyist	
Thave read RSA 15, RSA 15-B and RSA 664 and hereby swear or affir is true and complete to the best of my knowledge and belief.	m that the foregoing information
(Signature of lobbyist)	
Cate Paolino	
(Print Name of lobbyist)	