PLEASE PRINT

STATE OF NEW HAMPSHIRE

for LOBBYISTS

APR 14 2021

NEW HAMPSHIRE DEPARTMENT OF STATE

RECEIVED

2021 Statement of Income and Expenses (RSA Chapter 15)

_				
I. Name of Lobbyist(s) Robert J Sculler	4			
II. Name of lobbyist's partnership, firm or corporation, if	any:			
(Name of partnership, firm or corporation)	sport Association			
Business Address: (Street) Concert (Town/City)	(State) (Zip Code)			
(63) 224-7337 (63) 225-936 (Fax	e-mail Jacolley @nhmtagg			
III. This statement covers: (Choose one – file separate repore reportable expense transactions which are not attributable	rts for each client, OR you may file a separate report for to any one client).			
All reportable transactions occurring in the months prior to	the reporting date relative to the following client:			
New Hampshire Motor Trans	sport Association			
(Full Name of Client as it appears on the Lo	obbyist Registration Form)			
[] All reportable transactions by the lobbyist (including the lob unrelated to any particular client.	obyist's family), or the lobbying firm listed below which are			
IV. Date of Report April 28, 2021				
Reports cover: activity from date of registration to 3/31/21	July 28, 2021 [] activity from 4/1/21 to 6/30/21			
October 27, 2021 [] activity from 7/1/21 to 9/30/21	January 26, 2022 [] activity from 10/1/21 to 12/31/21			
V. There have been no fees received and no reportable transactions made since the last report. If this box is checked, complete just this form and submit it to the Secretary of State's Office, 107 North Main Street, State House, Room 204, Concord, NH 03301.				
VI Check if additional reports are attached:				
If you have received fees or made expenditures, you must fi	ile Addendum A- Fees and Expenses			
☐ If you have paid an honorarium or reimbursed expenses, you must file Addendum B — Report of Honorariums or Expense Reimbursement				
If you, your firm, or your family has made political contribution	ations, 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 he and complete to the pest of my knowledge and belief.	creby swear or affirm that the foregoing information is true			
1/44 1/cuy	4-13-21			
(Signature of Jobbyist)	(Date)			
Print Name of lobbyist)				

I. Name of Lobbyist(s) Robert J Sculley L E A S E P

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STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A

APR 1 4 2021

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NEW HAMPSHIRE DEPARTMENT OF STATE

(RSA Chapter 15:6)

II. Name of lobbyist's partnership, firm or corporation, if any:			
Dew Hampshire Motor Transportion (Name of partnership, firm or corporation)	art Association		
III. Name of Client New Hompshire Motor Trave Bate			
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 gro reduced by any expenses:	relations, or public relations services		
a) Total of all fees received in this reporting period	a)\$ 672.00		
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 ye	b) \$ ar)		
c) Total of all fees received to date (Add lines a and b)	c)\$ 672.00		
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 reportees. 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 expenditured under the cost was \$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.	lient and if expenditures are made by hay be filed for the lobbyist(s)/firm. aggregate total of all expenses paid penses; (b) the aggregate total of all e: meals purchased during a business s than \$10 that is given to the person d with a value of \$25.00 or less); and ting period of greater than \$25.00 for e of greater than \$25, purchase of a r 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) \$		
c) Total of all itemized expenditures reported in detail in section VI.	c) \$		

d) Total expenses for this reporting period	d) \$
(Add lines a, b and c)	
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	ns
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from loperiod, including by whom paid or to whom charged.	bbying 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	n that the foregoing information
is true and complete to the best of my knowledge and belief.	
ate Drin	4-13-21
(Signature of lobbyis)	(Date)
(Print Name of lobbyist)	

Lobbyists Report of Political Contributions Addendum C (RSA Chapter 15:6) RECEIVED

APR 14 2021

NEW HAMPSHIRE DEPARTMENT OF STATE

I. Name of Lobbyist(s) _	Robert J Sculley
II. Name of lobbyist's p	partnership, firm or corporation, if any:
	shire Mota Transport Association
	2 Hornpshire Motor Transport Asigne
Political Contributions For each political contrib	-
Full name of candidate:	ROSEPLAND CIDY (Last Name) (First Name) (Middle Name/Initial)
Amount of contribution \$ _	250.00 Office Candidate is Seeking State South
enter an estimated value an Full name of candidate:	Sarry DownA
	,
Amount of contribution \$ _	1, vov. av Office Candidate is Seeking STATE SELAT
If the contribution is an in-lactual cost of the in-kind coenter an estimated value and	kind contribution, provide a description of the goods or services provided, and enter the ontribution on the line above for amount of contribution. If the actual cost is not known, d the word "estimate."
Full name of candidate:	MOISE CHECK (Last Name) (First Name) (Middle Name/Initial)
Amount of contribution \$ _	



Lobbyists Report of Political Contributions Addendum C (RSA Chapter 15:6)

		<u> </u>	
II. Name of lobbyist's pa	artnership, firm or co	rporation, if any:	
		•	Association
III. Name of Client	s Hemoshire r	Notor Transport	A State
Political Contributions	oution that is reportable	pursuant to RSA Chapt	ter 664 paid on behalf of the
Full name of candidate: Amount of contribution \$	B MD SELL (Last Name)	REGINA (First Name)	(Middle Name/Initial)
Amount of contribution \$	500.00	,	Seeking SNATE SOWAT
Eull game of an did a	CARSON	<#A0-1	
Full name of candidate:	CANSON (Last Name)	SHARA) (First Name)	(Middle Name/Initial)
Full name of candidate: Amount of contribution \$			(Middle Name/Initial) Seeking SNATE SELATE
Amount of contribution \$ If the contribution is an in-k actual cost of the in-kind cost	ind contribution, provide	Office Candidate is	
Amount of contribution \$ If the contribution is an in-k	ind contribution, provide	Office Candidate is	Seeking SNATE SELAT

If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter the actual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not known, enter an estimated value and the word "estimate."
(If more than three contributions were made, report additional contributions on separate addendum C forms.)
Sworn Statement/Affirmation by Lobbyist
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm that the foregoing information is true and complete to the best of my knowledge and belief. (Signature of Jobbyist) (Date)
(Print Name of lobbyist)

Lobbyists Report of Political Contributions Addendum C (RSA Chapter 15:6)

I. Name of Lobbyist(s)	Robert J S	sculey	
II. Name of lobbyist's pa	rtnership, firm or co	rporation, if any:	
		Transport	Association
III. Name of Client			
Political Contributions	ution that is reportable	pursuant to RSA Char	oter 664 paid on behalf of the
Full name of candidate:	LUAND	Roat	
Amount of contribution \$ _	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$	<u> </u>	Office Candidate i	s Seeking STATE SELATI
Full name of candidate:	AUAND	Keuin	
_	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$	250.00	Office Candidate is	Seeking STATE SELATE
If the contribution is an in-ki actual cost of the in-kind cor enter an estimated value and	tribution on the line abo	a description of the good	ds or services provided, and enter the ation. If the actual cost is not known,
Full name of candidate: _	(Last Name)	Girst Name)	(Middle Name/Initial)
Amount of contribution \$	250.00	Office Candidate is	

(If more than three contributions were made	de, report additional contributions on separate addendum C forms.)
Sworn Statement/Affirmation by	Lobbyist
I have read RSA 15, RSA 15-B an	d RSA 664 and hereby swear or affirm that the foregoing informatio
is true and complete to the best of	my knowledge and belief.
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Pari Deur	4-13-21



Lobbyists Report of Political Contributions Addendum C (RSA Chapter 15:6)

I. Name of Lobbyist(s)	Sobert JS	culky		
II. Name of lobbyist's par	rtnership, firm or cor	poration, if any:		-
Wame of part	nership, firm or corporation)	Transport	Association	<u>x</u>
III. Name of Client	Hampshire M	bloc Transport	A SS pate	
Political Contributions For each political contribu client/lobbyist and lobbyin	tion that is reportable i	pursuant to RSA Chapte	•	of the
Full name of candidate:	ENDESSEY (Last Name)	(First Name)	(Middle Name/Initia	
Amount of contribution \$ _c	250,00	Office Candidate is S	Seeking STARE	•
If the contribution is an in-kir actual cost of the in-kind contenter an estimated value and the contenter and estimated value and the contribution is an in-kir actual value and the contenter and estimated value and	tribution on the line abov	a description of the goods re for amount of contributi	or services provided, an	nd enter the not known,
Full name of candidate:	(Last Name)	DENISE (First Name)	(Middle Name/Initial	
Amount of contribution \$ 2	50.00	Office Candidate is S	eeking SNATE	
If the contribution is an in-kin actual cost of the in-kind cont enter an estimated value and t	ribution on the line above	description of the goods	or services provided, an	d enter the
Full name of candidate:				
	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$		Office Candidate is Se	eeking	

If the contribution is an in-kind contribution, provide a description of actual cost of the in-kind contribution on the line above for amount of enter an estimated value and the word "estimate."	
(If more than three contributions were made, report additional contributions	s on separate addendum C forms.)
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swe is true and complete to the best of my knowledge and belief.	ear or affirm that the foregoing information
(Signature of lobbyist)	(Date)
REBERT J. SCOLLEY (Print Name of lobbyist)	

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