

STATE OF NEW HAMPSHIRE

2018 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

PLEASE PRINT

I. Name of Lobbyist(s) Elizabeth C. Sargent

RECEIVED

JAN 3 0 2019

NEW HAMPSHIRE DEPARTMENT OF STATE

II. Name of lobbyist's partnership, firm or corporation, if any:						
Sheehan Phinney C	apitol Group					
(Name of partnership, firm or corporation)						
m n			0000			
Two Eagle Square	Concord	NH (St. 1)	03301			
Business Address: (Str	ect) (Town/City)	(State)	(Zip Code)			
(603) 228-2370	(603) 224-8899	email esargent@sheel	nan.com			
(Telephone	(Fax)	· · · · · · · · · · · · · · · · · · ·				
reportable expense tra	ers: (Choose one – file separate repo nsactions which are not attributable	to any one client).				
	actions occurring in the months prior to	o the reporting date relative to the	following client:			
New Hampshire Ph	armacists Association					
		s on the Lobbyist Registration For	m)			
OR ☐ All reportable transunrelated to any particu	sactions by the lobbyist (including the l lar client.	obbyist's family), or the lobbying	firm listed below which are			
IV. Date of Report	April 25, 2018	July 25, 2018				
	from date of registration to 3/31/18	activity from 4/1/18 to 6/30/18	}			
	October 31, 2018 🔲	January 30, 2019 🛛				
activ	vity from 7/1/18 to 9/30/18	activity from 10/1/18 to 12/31	/18			
	fees received and no reportable tran emplete just this form and submit it to the					
If you have pa Expense Reimbursemen	ceived fees or made expenditures, you id an honorarium or reimbursed expen	ses, you must file Addendum B-	Report of Honorariums or			
Sworn Statement/Affir I have read RSA 15, RS the best of my knowledg	A 15-B and RSA 664 and hereby swea	r or affirm that the foregoing infor	mation is true and complete to			
Eljabeth (Signature of lobbyist)	Chargent	January 30, 2019 (Date)				
Elizabeth C. Sargen						



STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

P	1. 1	Name of Lobbyist(s) Elizabeth C. Sargent		
L E	u.	Name of lobbyist's partnership, firm or corporation, if any:		
4	Sh	eehan Phinney Capitol Group		
S		(Name of partnership, firm or corporation)		
ઇ >	1[1.	Name of Client New Hampshire Pharmacists Association	Date January 30, 2019	
₹				
Ν Γ	IV. Fees Received Indicate the gross amount of all fees received from the client identified above that are related, directly or indirectly, to lobbyi including fees for services such as public advocacy, government relations, or public relations services including resear monitoring legislation, and related legal work. The gross fee amount reported shall not be reduced by any expenses:			
	a)	Total of all fees received in this reporting period	a) \$ <u>1,875.00</u>	
	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) \$ <u>5,625.00</u> ar)	
	c)	Total of all fees received to date (Add lines a and b)	c) \$ <u>7,500.00</u>	
	d)	Indicate the amount of any such fees that are due, but have not yet been paid	d d) \$	
	Lob repo unre cate and mea give less any to b	Expenses: obyist(s)/Lobbying partnerships, firms, or corporations are required to report orts are to be filed for expenditures made relative to each client and if experelated to any one client a separate report may be filed for the lobbyist(s)/figories of expenses: (a) the aggregate total of all expenses paid during the report office expenses; (b) the aggregate total of all individual expenses where the als purchased during a business lunch where the cost was \$25.00 or less, purcent to the person being lobbied, purchase of a ceremonial object given to a purpose not covered by (a) (for example: purchase of a meal with value of a purpose not covered by (a) (for example: purchase of a meal with value of a person to the subject of lobbying with a value greater than \$25, but not greater to the subject of lobbying with a value greater than \$25, but not greater than \$25	nditures are made by the lobbyist(s)/firm that are rm. Expenses are to be reported in one of three porting period for salaries, benefits, support staff, expenditure was of \$25.00 or less (for example: hase of a pen with a value of less than \$10 that is person being lobbied with a value of \$25.00 or g this reporting period of greater than \$25.00 for greater than \$25, purchase of a ceremonial object ter than \$50, restaurant expenses for a legislative	
	a)	Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$ <u>6,798.00</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) \$	

d)	Total expenses for this reporting period (Add lines a, b and c)	d) \$ 6,798.00
	(Add tines a, b and c)	
c)	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 repo	e) \$ <u>17,835.00</u> n)
f)	Total of all expenses year to date	F) \$ <u>24,633.00</u>
Pro	Other Expenses: vide the following detail for all expenditures of more than \$25 made from leuding by whom paid or to whom charged.	obbying fees during this reporting period,
Paid	! :	Amount:
_		\$
		\$
		\$
		\$
		\$
		s
Swo	orn Statement/Affirmation by Lobbyist	
is tr	ve read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm that the and complete to the best of my knowledge and belief.	ne foregoing information
_Sig	Liabeth Chargent Jan	(Date)
	zabeth C. Sargent	
(Pn	nt Name of lobbyist)	