STATE OF NEW HAMPSHIRE



(Print Name of lobbyist)

PLEASE PRINT

2018 Statement of Income and Expenses RECEIVED

(RSA Chapter 15)

JUL 27 2018

NEW HAMPSHIRE

I. Name of Lobbyist(s) _	Paul J. Phillips		L	DEPARTMENT OF STATE
II. Name of lobbyist's par	rtnership, firm or corp	oration, if any:		
Primmer Piper Egglesto	on & Cramer PC			
(Name of	partnership, firm or corpor	ration)		
900 Elm Street, 19th Fl	oor, PO Box 3600	Manchester	NH	03105-3600
Business Address: (Street)	(Town/City)	(State)	(Zip Code)
(603) 626-3300	(603) 62	6-0997	e-mail pphillips	@primmer.com
(Telephone)	· · · · ·	(Fax)		
reportable expense trans	actions which are not a	ttributable to any or	e client).	nay file a separate report for
All reportable transacti	·	nths prior to the repor	ting date relative to t	he following client:
Insurance Auto Auctions	Il Name of Client as it app	ones on the Labbraiat Da	aintention forms	
<u>OR</u>	iii Name of Cheff as if app	ears on the Lobbytst Re	gistration Form)	
All reportable transaction unrelated to any particular		uding the lobbyist's fa	imily), or the lobbyin	ng firm listed below which are
	pril 25, 2018 om date of registration to	3/31/18 activit	July 25, 2018 🖄 From 4/1/18 to 6/30/1	8
	ctober 31, 2018 [] ity from 7/1/18 to 9/30/18	activi	January 30, 2019 🗌 y <i>from 10/1/18 to 12/3</i>	1/18
V. There have been no If this box is checked, comp Concord, NH 03301.		•		-
VI. Check if additional re	ports are attached:			
	es or made expenditure	s, you must file Adde	ndum A- Fees and I	Expenses
☐ If you have paid an ho Expense Reimbursement	norarium or reimbursed	expenses, you must f	le Addendum B– R	eport of Honorariums or
▼ If you, your firm, or your	our family has made pol	itical contributions, ye	ou must file Addend	um C- Political Contributions
Sworn Statement/Affirms I have read RSA 15, RSA and complete to the best of	15-B, RSA 14-C and RS		ear or affirm that the	foregoing information is true
Youl V			July 25, 2018	
(Signature of lobbyist)		•	(Da	nte)
Paul J. Phillips				



STATE OF NEW HAMPSHIRE

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

, ,	tnership, firm or cor	poration, if any:		
Primmer Piper Egglestor	n & Cramer PC			
(Name of part	tnership, firm or corporation)			
III. Name of Client Insurance Auto Auctions, Inc.			DateApril 1-June 30, 2018	
Political Contributions				
For each political contribuction the contribuction of the contribution of the contribu			oter 664 paid on behalf of the	
chenizioodyist and loodyn	ng tittii, mutcate tile to	niowing.		
Full name of candidate:	Bolton	William		
Tun nume of candidate	(Last Name)	(First Name)	(Middle Name/Initial)	
Amount of contribution \$	300.00	Office Candidate	is Seeking N.H. Senate - District 2	
Full name of candidate:				
Full name of candidate:	(Last Name)	(First Name)	(Middle Name/Initial)	
Amount of contribution \$ If the contribution is an in-ki	nd contribution, provide	Office Candidate i	s Seekingds or services provided, and enter the	
Amount of contribution \$	nd contribution, provide	Office Candidate i	s Seeking ds or services provided, and enter the	
Amount of contribution \$ If the contribution is an in-ki actual cost of the in-kind cor	nd contribution, provide	Office Candidate i	(Middle Name/Initial) s Seeking ds or services provided, and enter the oution. If the actual cost is not known (Middle Name/Initial)	

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. 7/24/18
(Signature of lobbyist) PAUL T. PHILLIPS (Print Name of lobbyist) (Date)