## STATE OF NEW HAMPSHIRE

2019 Statement of Income and Expenses for LOBBYISTS

(RSA Chapter 15)

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### PLEASE PRINT

Margaret M.L. Byrnes, Cordell A. Johnston, Barbara T. Reid, Natch Greyes, Timos F. Hones, P. Hipe

( ) <u>603.22</u> (Telephon	(Street) 4.7447	Concord (Town/City)	NH	03301
) 603.22 (Telephon	4.7447	(Town/City)		
(Telephon	4.7447		(State)	(Zip Code)
(Telephon	<del></del> \	•	e-mail	
III. This statemen	e)	(Fax)	¢-man	<del></del>
	e transactions which are	not attributable to any	each client, OR you may one client). porting date relative to the	·
	shire Municipal .		porting date relative to the	totiowing chent:
<u>-</u> -		it appears on the Lobbyist	Registration Form)	
<u>OR</u>				
All reportable to nrelated to any pa		(including the lobbyist's	s family), or the lobbying	firm listed below w
V. Date of Repor	•		July 31, 2019 🔲	
eports cover: a	ctivity from date of registrati	on to 3/31/19 acti	activity from 4/1/19 to 6/30/19	
	October 30, 2019 activity from 7/1/19 to 9/		January 29, 2020 ☐ activity from 10/1/19 to 12/31/19	
f this box is checke		and submit it to the Seci	sactions made since the retary of State's Office, 10	
f this box is checke State House, Room	ed, complete just this form	and submit it to the Sect		
f this box is checker tate House, Room 'I. Check if addit	ed, complete just this form 204, Concord, NH 03301 ional reports are attache	and submit it to the Sect d:		7 North Main Stree
f this bax is checked State House, Room VI. Check if addit If you have rec	ed, complete just this form 204, Concord, NH 03301. ional reports are attache eived fees or made expend d an honorarium or reimb	and submit it to the Sectors  d: ditures, you must file Ad	retary of State's Office, 10	7 North Main Stree penses

# STATE OF NEW HAMPSHIRE

# Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s) Margaret M.L. Byrnes, Cordell A. Johnston, Barbara T. Rei	d, Natch Greyes, Timothy W. Fortier
II. Name of lobbyist's partnership, firm or corporation, if any:	
New Hampshire Municipal Association	
(Name of partnership, firm or corporation)	
III. Name of Client New Hampshire Municipal Association	on <sub>Date</sub> July 31, 2019
<ul> <li>IV. Fees Received</li> <li>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:</li> <li>a) Total of all fees received in this reporting period</li> <li>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 yet)</li> <li>c) Total of all fees received to date (Add lines a and b)</li> <li>d) Indicate the amount of any such fees that are due, but have not yet been paid</li> </ul>	relations, or public relations services see amount reported shall not be a) \$\frac{38,430.60}{0.0}\$
V. Expenses:  Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to repefees. 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 exception individual 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 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 nay be filed for the lobbyist(s)/firm aggregate total of all expenses paid penses; (b) the aggregate total of all ex meals purchased during a business s than \$10 that is given to the persond with a value of \$25.00 or less); and tring period of greater than \$25.00 for e of greater than \$25, purchase of a than \$25, but not greater than \$50 expense reimbursement, or politicated on Addendum A.
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$ 38,430.60
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) \$ 0.0
c) Total of all itemized expenditures reported in detail in section VI.	c) \$ 0.0

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$ 38,430.60
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) \$ 0.0
f) Total of all expenses year to date	0.5 <u>38,430.60</u>
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from leperiod, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
	s
	\$
	s
	\$
	\$
	s
	*******************************
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm is true and complete to the best of my knowledge and belief.	n that the foregoing information
Natol J. Barrell	July 31, 2019
(Signature of lobbyist)	(Date)
Margaret M.L. Brynes	
(Print Name of lobbyist)	

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn Statement/Affirmation by Lobbyist

(Print Name of lobbyist)

Statement of Income and Expenses for: Name of Lobbying partnership, firm, or corporation: Cordell A. Johnston Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any particular client): New Hampshire Municipal Association Date of Report (check one): April 24, 2019 💂 July 31, 2019 🔲 October 30, 2019 📮 January 29, 2020 I have read RSA 15, RSA 15-B, RSA 664, the Statement of Income and Expenses described above, and the following Addendums submitted with that Statement (insert the number of Addendum forms being submitted); Addendum A(s). Addendum B(s). Addendum C(s). I hereby swear or affirm that the foregoing information on the Statement and each Addendum is true and complete to the best of my knowledge and belief. (Signature of lebby 1st) July 31, 2019 (Date) Cordell A. Johnston

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn Statement/Affirmation by Lobbyist

Statement of Incom	ne and Expenses for:	-		
Name of Lobbying pa	rtnership, firm, or corpo	oration: Barbara T.	Reid	
Name of Client (leave		or the partnership, firm, or	corporation and not related to a	iny
Date of Report (checi	k one):			
April 24, 2019 🗐	July 31, 2019 🛚	October 30, 2019 🗆	January 29, 2020 □	
			nd Expenses described above, a number of Addendum forms be	
X Addendum A	(s).			
Addendum Bo	(s).			
Addendum Co	(s).			
· ·	rm that the foregoing ir f my knowledge and be		nt and each Addendum is true a	ınd
	Sec.	Jul	y 31, 2019	
(Signature of lobbyist			(Date)	
Barbara T. R	eid			
(Print Name of lobbyi	st)			

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn Statement/Affirmation by Lobbyist

(Print Name of lobbyist)

Statement of Income and Expenses for:

Name of Lobbying partnership, firm, or corporation:

Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any particular client):

New Hampshire Municipal Association

Date of Report (check one):

April 24, 2019 July 31, 2019 October 30, 2019 January 29, 2020 Inlied the following Addendums submitted with that Statement of Income and Expenses described above, and the following Addendums submitted with that Statement (insert the number of Addendum forms being submitted):

X Addendum A(s).

Addendum B(s).

Addendum C(s).

(Signature of lobbyist)

Natch Greyes

July 31, 2019

(Date)

I hereby swear or affirm that the foregoing information on the Statement and each Addendum is true and

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn Statement/Affirmation by Lobbyist

(Print Name of lobbyist)

Statement of Income and Expenses for: Name of Lobbying partnership, firm, or corporation: Timothy W. Fortier Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any particular client): New Hampshire Municipal Association Date of Report (check one): April 24, 2019 July 31, 2019 🔲 October 30, 2019 January 29, 2020 □ I have read RSA 15, RSA 15-B, RSA 664, the Statement of Income and Expenses described above, and the following Addendums submitted with that Statement (insert the number of Addendum forms being submitted): Addendum A(s). Addendum B(s). Addendum C(s). I hereby swear or affirm that the foregoing information on the Statement and each Addendum is true and complete to the best of my knowledge and belief. Timothy W. Fortier