STATE OF NEW HAMPSHIRE

2015 Statement of Income and Expenses RECEIVED for LOBBYISTS (RSA Chapter 15)

APR 0 6 2015

PLEASE PRINT

NEW HAMPSHIRE

I. Name of Lobbyist(s) Amanda Grady Sexton		<u> </u>	DEPARTMENT OF STA	
II. Name of lobbyist's partnersh	ip, firm or corporation, if a	ny:		
New Hampshi	re Coalition Against Dor	nestic and Sexual Violence	<u>;</u>	
	ship, firm or corporation)			
PO Box 353	Concord	NH	03302	
Business Address: (Street)	(Town/City)	(State)	(Zip Code)	
(603) <u>224-8893</u> (Telephone)	(603) <u>228-6096</u> (Fax)	e-mail <u>amanda@</u>	nhcadsv.org	
III. This statement covers: (Cho reportable expense transactions			y file a separate report for	
X All reportable transactions occ	curring in the months prior to	the reporting date relative to the	following client:	
		Oomestic and Sexual Violer	nce	
(Full Name OR	e of Client as it appears on the Lo	popyist Registration Form)		
All reportable transactions by unrelated to any particular client.	the lobbyist (including the lob	obyist's family), or the lobbying	firm listed below which are	
•	, 2015 🔯 e of registration to 3/31/15	July 29, 2015		
	28, 2015 . 1 7/1/15 to 9/30/15	January 27, 2016 [] activity from 10/1/15 to 12/31/	15	
V. There have been no fees re If this box is checked, complete ju Concord, NH 03301.				
VI. Check if additional reports	are attached:			
If you have received fees or r		file Addendum A – Fees and Ex	penses	
☐ If you have paid an honorariu Expense Reimbursement	ım or reimbursed expenses, ye	ou must file Addendum B – Rep	oort of Honorariums or	
-	nily has made political contrib	outions, you must file Addendu	m C- Political Contributions	
Sworn Statement/Affirmation to I have read RSA 15, RSA 15-B a to the best of my knowledge and	nd RSA 664 and hereby swea	or affirm that the foregoing in $4/3/2015$	formation is true and comple	
(Sighature of lobbyist) Amanda Grady Sexton (Print Name of lobbyist)	To a series	(Dat	e)	

LEASE PRINT

STATE OF NEW HAMPSHIRE

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Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s) Amanda Grady Sexton	
II. Name of lobbyist's partnership, firm or corporation, if any:	
New Hampshire Coalition Against Domestic and Sexua	al Violence
(Name of partnership, firm or corporation)	A/2/2015
III. Name of Client New Hampshire Coalition Against Domestic & Sexual Violence	Date 4/3/2015
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) \$
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) \$
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 rep fees. 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 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 lobbie (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 greate 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 busines is than \$10 that is given to the person d with a value of \$25.00 or less); and riting period of greater than \$25.00 for he of greater than \$25, purchase of er 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) \$2,133.65
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) \$0.00
c) Total of all itemized expenditures reported in detail in section VI.	c) \$ 0.00

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$	2,133.65
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) \$	0.00
f) Total of all expenses year to date	f) \$	2,133.65
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	s 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 affir is true and complete to the best of my knowledge and belief.	m that the t	foregoing information
(Signature of lobbyist)		3/2015 Date)
Amanda Grady Sexton (Print Name of lobbyist)		