

(Print Name of lobbyist)

## STATE OF NEW HAMPSHIRE 2019 Statement of Income and Expenses for LOBBYISTS

(RSA Chapter 15)

## RECEIVED

JUL 3 1 2019

NEW HAMPSHIRE DEPARTMENT OF STATE

L Name of Lobbyist	(s) James P. Monahan; Kathryn M. Horg	an
II. Name of lobbyist	's partnership, firm or corporation, if any:	
The Dupont Group		
(Name of partnership, firm	or corporation)	
	00 Concord, NH 03301	
Business Address: (Street)	(Town/City) (State) (Zip Code)	
(603)228-3322	(603) 228-0713	e-mail imonahan@dupontgroup.com
(Telephone)	(Fax)	
	covers: (Choose one – file separate reports fo s which are not attributable to any one client	r each client, OR you may file a separate report for reportable i).
All reportable t	ransactions occurring in the month prior to the	reporting date relative to the following client:
Elliot Health System	1	
OR	(Full Name of Client as it appears of	n the Lobbyist Registration Form)
<u>OK</u>		
All reportable tra to any particular clien		t's family), or the lobbying firm listed below which are unrelated
IV. Date of Report	April 24, 2019 🔲	July 31, 2019 X
Reports cover	activity from date of registration to 3/31/19	uctivity from 4/1/19 to 6/30/19
	October 30, 2019 activity from 7/1/19 to 9/30/19	January 29, 2020  activity from 10/1/19 to 12/31/19
	no fees received and no reportable transaction, complete just this form and submit it to the Sec	ons made since the last report.   cretary of State's Office, State House, Room 204, Concord, NH
	nal reports are attached: ved fees or made expenditures, you must file Ac	idendum A- Fees and Expenses
☐ If you have paid a	an honorarium or reimbursed expenses, you mu	st file Addendum B- Report of Honorariums or Expense
☐ If you, your firm,	or your family has made political contributions	s, you must file Addendum C- Political Contributions.
Sworn Statement/A I have read RSA 15, best of my knowledg		ffirm that the foregoing information is true and complete to the
ap me		
(Signature of lobbyist)		7/31/2019 (Date)
James P. Monahan		<u></u>



## STATE OF NEW HAMPSHIRE Lobbyist Fees and Expenses Addendum A

(RSA Chapter 15:6

I. Name of Londyist(s)	
James P. Monshan ; Kathryn M. Horgan	_ <del>_</del>
II. Name of lobbyist's partnership, firm or corporation, if any:	
The Dupont Group	
(Name of partnership, firm or corporation)	
III. Name of Client Elliot Health System Date 7/31/2019	
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to including fees for services such as public advocacy, government relations, or plegislation, and related legal work. The gross fee amount reported shall not be	public relations services including research, monitoring
a) Total of all fees received in this reporting period	a) \$10500
b) Total of all fees received this calendar year, prior to this reporting period	b) \$14000
(This should equal the total of all prior monthly reports for this calendar year)	
c) Total of all fees received to date	
(Add lines a and b)	c) \$24500
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$0
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to report reports are to be filed for expenditures made relative to each client and if experimentated to any one client a separate report may be filed for the lobbyist(s)/fir categories of expenses: (a) the aggregate total of all expenses paid during their office expenses; (b) the aggregate total of all individual expenses where the expurchased during a business lunch where the cost was \$25.00 or less, purchase the person being lobbied, purchase of a ceremonial object given to a person be itemized statement of each individual expenditure made during this reporting provered by (a) (for example: purchase of a meal with value of greater than \$25 subject of lobbying with a value greater than \$25, but not greater than \$50, rest for honorariums, expense reimbursement, or political contributions will be reported.	minimum and the management of the lobbyist(s)/firm that are means are to be reported in one of three reporting period for salaries, benefits, support staff, and penditure was of \$25.00 or less (for example: meals of a pen with a value of less than \$10 that is given to sing lobbied with a value of \$25.00 or less); and (c) an operiod of greater than \$25.00 for any purpose not is, purchase of a ceremonial object to be given to the staurant expenses for a legislative reception). Expenses
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$

c) Total of all itemized expenditures reported in detail in section VI. d) Total expenses for this reporting period (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) f) Total of all expenses year to date  VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from lobbying fees during this reporting period, including by whom paid or to whom charged.  Paid to: Amount:  S S S S S S S S S S S S S S S S S S	b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	ed b) \$
(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) f) Total of all expenses year to date  VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from lobbying fees during this reporting period, including by whom paid or to whom charged.  Paid to: Amount:  S S S S S S S S S S S S S S S S S S	c) Total of all itemized expenditures reported in detail in section VI.	c) \$
(This should be the amount on line f of addendum A for last month's report)  f) Total of all expenses year to date  VI. Other Expenses:  Provide the following detail for all expenditures of more than \$25 made from lobbying fees during this reporting period, including by whom paid or to whom charged.  Paid to: Amount:  S  S  S  S  S  S  S  S  S  S  S  S  S	· · · · · · · · · · · · · · · · · · ·	d) \$
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S S S S S S S S S S S S S S S S S S S	Provide the following detail for all expenditures of more than \$25 made from	om lobbying fees during this reporting period, including by
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.  The statement/Affirmation by Lobbyist  [Signature of lobbyist]  [Signature of lobbyist]  [Date]		S
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(Signature of lobbyist)  James P. Monahan	Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm to best of my knowledge and belief.	
(Signature of lobbyist) (Date)  James P. Monahan		31/2019

## State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

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 Income and Expenses for:		
Name of Lobbying partnership, firm, or corporation:	The Dupont G	roup
Name of Client (leave blank if Statement is for the parts	nership, firm, or corpor	ration and not related to any particular
client): Elliot Health System		
Date of Report (check one):		
April 24, 2019	october 30, 2019 🗌	January 29, 2020 🔲
I have read RSA 15, RSA 15-B, RSA 664, the Statement following Addendums submitted with that Statement (in		
1 Addendum A(s).		
0 Addendum B(s).		
QAddendum C(s).		
I hereby swear or affirm that the foregoing information the best of my knowledge and belief.	on the Statement and e	each Addendum is true and complete to
Kathyre Hago		
(Signature of lobbyist)	<u>7/31/2</u> (Date)	<del> </del>
Kathryn M. Horgan (Print Name of lobbyist)		