STATE OF NEW HAMPSHIRE

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

JUL 27 2015

RECEIVED

NEW HAMPSHIRE DEPARTMENT OF STATE

PLEASE PRINT

II Name of Johnvist's nartne	ership, firm or corporation, if a	Barbara T. Reid, Timothy W.	
		any.	
New Hampshire Mur (Name of part	nership, firm or corporation)		
•	. ,	NIII	02201
25 Triangle Park Dri Business Address: (Street)	ve Concord (Town/City)	NH (State)	(Zip Code)
	•		•
(603) <u>224-7447</u> (Telephone)	(603) <u>224-5406</u> (Fax		affairs@nhmunicipal.org
reportable expense transacti	ons which are not attributable	orts for each client, OR you may to any one client). or to the reporting date relative to	
	Municipal Association		
(Full N OR	ame of Client as it appears on the L	obbyist Registration Form)	
		bbyist's family), or the lobbying	firm listed below which ar
	29, 2015 date of registration to 3/31/15	July 29, 2015 X activity from 4/1/15 to 6/30/15	
	per 28, 2015 From 7/1/15 to 9/30/15	January 27, 2016 activity from 10/1/15 to 12/31/	715
		e transactions made since the he Secretary of State's Office, Sta	
VI. Check if additional repor	ts are attached:		
X If you have received:	fees or made expenditures, you	must file Addendum A - Fees an	d Expenses
		ou must file Addendum B – Rep	
If you, your firm, or your	amily has made political contrib	butions, you must file Addendun	n C— Political Contribution



STATE OF NEW HAMPSHIRE

Lobbyist Fees and Expenses Addendum A

Please Print

(RSA Chapter 15:6)

I. Nan	ne of Lobbyist(s)	Judy A. Silva; Cordell A. Johnston; Barbara T.	Reid; Timothy	W. Fortier	
II. Nai	me of lobbyist's par	tnership, firm or corportation, if any New Ham	pshire Municip		
III. Na	ıme of Client	New Hampshire Municipal Association	• • •	7/24/2015	
Indicate lobbyin includii	g, including fees for	f all fees received from the client identified above services such as public advocacy, government rel ing legislation, and related legal work. The gross	ations, or publi	ic relations services	
a) Tot	al of all fees receive	d in this reporting period		a) \$	\$37,642.20
		d this calendar year, prior to this reporting period otal of all prior monthly reports for this calendar y	ear)	b) \$	\$44,687.46
c) Tot	al of all fees receive	d to date (Add lines a and b)		c) \$	\$82,329.66
d) Ind	icate the amount of a	any such fees that are due, but have not yet been po	aid	d) \$	\$0.00
Separate lobbyis to be reperiod the exporter or less, ceremo individuexample of lobb Expens	st(s)/Lobbying partner reports are to be find t(s)/firms that are unsupported in one of three for salaries, benefits, enditure was of \$25. purchase of a pen would object given to a ual expenditure made e: purchase of a mean ying with a value green.	erships, firms, or corporations are required to reported for expenditures made relative to each client a related to any one client, a separate report may be see categoriees of expense: (a) the aggregate total of support staff, and office expenses; (b) the aggreg 00 or less (for example: meals purchased during a sith a value less than \$10.00 that is given to the peraperson being lobbied with a value of \$25.00 or lest eduring this reporting period of greater than \$25.01 with value greater than \$25.00, purchase of a centarer than \$25.00, but not greater than \$50.00, rest expense reinbursement, or political contributions on Addendum A.	nd if expenditude filed for the lost fall expenses pate total of all industries business lunchers on being lobbess); and (c) and 00 for any purpremonial object aurant expenses	ares are made by the obbyist(s)/firm. Exploid during the repoindividual expenses a where the cost was nied, purchase of a itemized statement dose not covered by to be given to the sets for a legislative resulting the sets of a legislative resulting to the sets for a legislative resulti	enses are rting where \$25.00 of each (a) (for subject sception).
•		es for this reporting period for salaries, benefits, expenses, related directly or indirectly to lobbyin	g.	a) \$	\$37,642.20
,	tal aggregate of expe of \$25 or less.	nditures during this reporting period, not reported	in	b) \$	\$0.00
c) Tot	al of all itemized ex	penditures reported in detail section VI.		c) \$	\$0.00

d) Total expenses for this reportting period (Add lines a, b, and c)	d) \$	\$37,642.20
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) \$	\$44,687.46
f) Total of all expenses year to date	f) \$	\$82,329.66
VI. Other Expense: Provide the following detail for all expenditures of more than \$25 made from lobbying for including by whom paid or to whom charged.	ees during this reporting	period,
Paid to:	Amour	nt:
N/A	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
Sworn Statement/Affirmation by Lobbyist		
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm that the forego: complete to the best of my knowledge and belief.	ing information is true a	nd
July Wille	y 24, 2015	
(Signature of Lobbyist)	(Date)	
Judy A. Silva, Executive Director		
(Print Name of Lobbyist)		

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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.

	me and Expenses fo	· ·	ell A. Johnston
Name of Lobbying p	partnership, firm, or cor	poration: New Hampshire	e Municipal Association
Name of Client (leav	ve blank if Statement is	s for the partnership, firm, o	r corporation and not related to any
particular client):			
Date of Report (che	ck one):		
April 29, 2015 □	July 29, 2015 X	October 28, 2015 □	January 27, 2016 □
			and Expenses described above, and number of Addendum forms being
X Addendum A	\(\s) .		
Addendum B	B(s).		
Addendum C	C(s).		
	firm that the foregoing of my knowledge and l		ent and each Addendum is true and
Ondell a.	led		July 24, 2015
(Signature of lebby)	st)		(Date)
Cordell A. Joh	nston		

(Print Name of lobbyist)

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.

	/Affirmation by Lot ome and Expenses fo	*	arbara T. Reid
Name of Lobbying p	partnership, firm, or cor	rporation: New Hamp	shire Municipal Association
Name of Client (lea	ve blank if Statement is	s for the partnership, fir	m, or corporation and not related to any
particular client):			
Date of Report (che	ck one):		
April 29, 2015 🗆	July 29, 2015 X	October 28, 2015 □	January 27, 2016 □
			ome and Expenses described above, and the number of Addendum forms being
X Addendum A	u(s).		
Addendum B	B (s).		
Addendum C	C(s).		
=	firm that the foregoing of my knowledge and the	belief.	Itement and each Addendum is true and July 24, 2015
(Signature of lobbyi	st)		(Date)
Barbara T. Rei	d		
(Print Name of lobb	yist)		

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.

	Affirmation by Lob	•	
Statement of Inco	me and Expenses fo	r: Tin	nothy W. Fortier
Name of Lobbying p	artnership, firm, or cor	poration: <u>New Hampsh</u>	ire Municipal Association
Name of Client (leav	e blank if Statement is	for the partnership, firm	, or corporation and not related to any
particular client):			
Date of Report (chec	ck one):		
April 29, 2015 □	July 29, 2015 X	October 28, 2015 □	January 27, 2016 □
	•		ne and Expenses described above, and ne number of Addendum forms being
X Addendum A	(s).		
Addendum B	(s).		
Addendum C	(s).		
•	firm that the foregoing of my knowledge and		ment and each Addendum is true and
Thur	What	_	July 24, 2015
(Signature of lobbyis	st)		(Date)
Timothy W. Fo	ortier		
(Print Name of lobby	yist)		