STATE OF NEW HAMPSHIRE

2019 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

RECEIVED

OCT 3 0 2019

PLEASE PRINT

NEW HAMPSHIRE

| I. Name of Lobby | rist(s) ROBERT E DUNN JR. DEPARTMENT OF |
|-----------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | vist's partnership, firm or corporation, if any: |
| ~ | |
| KOMAN C | ATHOLIC BUHOL OF MANCHESTER A CORPORATION SOLE (Name of partnership, firm or corporation) |
| | |
| Business Address: | (Street) (Town/City) (State) (Zip Code) |
| (60 3 66 (Telepho | 3-0134 () e-mail rdunnerchm, org |
| | nt covers: (Choose one – file separate reports for each client, OR you may file a separate report for se transactions which are not attributable to any one client). |
| X All reportable | transactions occurring in the months prior to the reporting date relative to the following client: |
| NL | 1 CATHOLIC CHALITIES |
| , , , | (Full Name of Client as it appears on the Lobbyist Registration Form) |
| <u>OR</u> | |
| All reportable unrelated to any p | transactions by the lobbyist (including the lobbyist's family), or the lobbying firm listed below which are articular client. |
| IV. Date of Repo | rt April 24, 2019 🗍 July 31, 2019 🗍 |
| • | activity from date of registration to 3/31/19 activity from 4/1/19 to 6/30/19 |
| | October 30, 2019 |
| | activity from 10/1/19 to 12/31/19 |
| If this box is checi | been no fees received and no reportable transactions made since the last report. ked, complete just this form and submit it to the Secretary of State's Office, 107 North Main Street, m 204, Concord, NH 03301. |
| VI. Check if addi | itional reports are attached: |
| ☐ If you have re | eceived fees or made expenditures, you must file Addendum A- Fees and Expenses |
| If you have pa | aid an honorarium or reimbursed expenses, you must file Addendum B- Report of Honorariums or sement |
| • | irm, or your family has made political contributions, you must file Addendum C- Political Contributions |
| I have read RSA | t/Affirmation by Lobbyist 15, RSA 15-B, RSA 14-C and RSA 664 and hereby swear or affirm that the foregoing information is true best of my knowledge and belief. |
| /m * | E DUNN JR. |
| - C. U | regarding period 7/1/14-8/11/19 is contained on Devine Millingt Filing for NHCC. |



STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

| 1. Name of Lobbyist(s) ROBERT E. DUNN JR | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| II. Name of lobbyist's partnership, firm or corporation, if any: | |
| ROMAN CATHOLIC BISHOP OF MANKHES TO (Name of partnership, firm or corporation) | ER |
| (Name of partnership, firm or corporation) | 1 1 |
| III. Name of Client NH CATHOLIC CHARITIES | Date 10/30/19 |
| 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 granded by any expenses: | t relations, or public relations service |
| 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 year) | b) \$ <u>50</u> € |
| c) Total of all fees received to date (Add lines a and b) | c)s 50 |
| d) Indicate the amount of any such fees that are due, but have not yet been paid | d) s 2062 |
| V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to repfees. 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 at 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 exindividual expenses where the expenditure was of \$25.00 or less (for examp lunch where the cost was \$25.00 or less, purchase of a pen with a value of lebeing 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. | client and if expenditures are made be may be filed for the lobbyist(s)/firm e aggregate total of all expenses pai expenses; (b) the aggregate total of a le: meals purchased during a busines ess than \$10 that is given to the perso ed with a value of \$25.00 or less); an orting period of greater than \$25.00 for ue of greater than \$25, purchase of er than \$25, but not greater than \$56, 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) \$O |
| b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less. | ь) \$О |
| c) Total of all itemized expenditures reported in detail in section VI. | c) \$ |
| | |

| d) Total expenses for this reporting period (Add lines a, b and c) | d) \$ |
|----------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------|
| 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)\$50 |
| f) Total of all expenses year to date | ns <u>50</u> |
| VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from to period, including by whom paid or to whom charged. | bbying fees during this reporting |
| Paid to: | Amount: |
| · | \$ |
| • | s |
| | \$ |
| | \$ |
| | \$ |
| Т. | \$ |
| | |
| | |
| | |
| Sworn Statement/Affirmation by Lobbyist | |
| I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affinistrue and complete to the best of my knowledge and belief. | m that the foregoing information |
| (Signature of loobyist) | 10 30 19 (Date) |
| (Print Name of lobbyist) | |

34 . A.