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
Statem	ient of Income and Exp	enses for:

Name of Lobbying partnership, firm, or corporation: RT Sciency 574 x72513 LUC
Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any
particular client): NOT MOTOR TRANSPORT ASSOCIATION
Date of Report (check one): April 24, 2024 □ July 31, 2024 ☑ October 30, 2024 □ January 29, 2025 □
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 lobovist) (Date)
PORENT J. SC. Leary (Print Name of lobbyist)

P L E A S E P R I N T

STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses

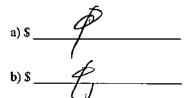
Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s) NOBERT J. Scouley
II. Name of lobbyist's partnership, firm or corporation, if any:
RJ Schum STATEGES LLC (Name of plutnership, firm or corporation)
III. Name of Client NH MOTEL TRANSPORT ASSU Date 7-27-24
IV. Fees Received Indicate the gross amount of all fees received from the client identified above that are related, directly or indirectly to lobbying, including fees for services such as public advocacy, government relations, or public relations service including research, monitoring legislation, and related legal work. The gross fee amount reported shall not be reduced by any expenses:
a) Total of all fees received in this reporting period a) \$ 5, 200
b) Total of all fees received this calendar year, prior to this reporting period b) \$ \(\(\infty \) \(\infty \) \(\infty \) \(\frac{\(\infty \) \(\i
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 report all expenses made from lobbying

fees. Separate reports are to be filed for expenditures made relative to each client and if expenditures are made by the lobbyist(s)/firm that are unrelated to any one client a separate report may be filed for the lobbyist(s)/firm. Expenses are to be reported in one of three categories of expenses: (a) the aggregate total of all expenses paid during the reporting period for salaries, benefits, support staff, and office expenses; (b) the aggregate total of all individual expenses where the expenditure was of \$25.00 or less (for example: meals purchased during a business lunch where the cost was \$25.00 or less, purchase of a pen with a value of less than \$10 that is given to the person being lobbied, purchase of a ceremonial object given to a person being lobbied with a value of \$25.00 or less); and (c) an itemized statement of each individual expenditure made during this reporting period of greater than \$25.00 for any purpose not covered by (a) (for example: purchase of a meal with value of greater than \$25, purchase of a ceremonial object to be given to the subject of lobbying with a value greater than \$25, but not greater than \$50, restaurant expenses for a legislative reception). Expenses for honorariums, expense reimbursement, or political contributions will be reported on separate addendums and should not be reported 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.
- b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.
- 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)	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)\$
f) Total of all expenses year to date	ns
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from leading by whom paid or to whom charged.	bbbying fees during this reporting
Paid to:	Amount:
	\$
	\$
	\$
/	\$
<u> </u>	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
AND DUL	7-22.24
(Signature of lobbyist) (Print Name of lobbyist)	(Date)
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STATE OF NEW HAMPSHIRE

Lobbyists Report of Political Contributions Addendum C (RSA Chapter 15:6)

•	I. Name of Lobbyist(s) ROBERT J. Scotter		
3	II. Name of lobbyist's partnership, firm or corporation, if any:		
k G	RJSCULL STRATEGIES LLC (Name of partnership, firm or corporation)		
,	III. Name of Client NH MOKEN THATSPENT ASSN Date 7-22-24		
	Political Contributions For each political contribution that is reportable pursuant to RSA Chapter 664 paid on behalf of the		
Γ	client/lobbyist and lobbying firm, indicate the following:		
	Full name of candidate: ALTSAIUM DOBNA (Last Name) (First Name) (Middle Name/Initial)		
	(
	Amount of contribution \$ 250 Office Candidate is Seeking Straff		
	If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter the actual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not known, enter an estimated value and the word "estimate."		
	Full name of candidate: AUALU (Eirst Name) (Middle Name/Initial)		
	Amount of contribution S 250 Office Candidate is Seeking Stratt		
	Amount of contribution S Office Candidate is Seeking JUPATE		
	If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter the actual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not known, enter an estimated value and the word "estimate."		
	Full name of candidate: DAUGALDIO Los		
	(Last Name) (First Name) (Middle Name/Initial)		
	Amount of contribution \$ 050 Office Candidate is Seeking SELATE		

If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter the actual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not known, enter an estimated value and the word "estimate."
(If more than three contributions were made, report additional contributions on separate addendum C forms.)
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.
(Signature of lobbyist) (Date)
(Print Name of lobbyist)

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STATE OF NEW HAMPSHIRE

Lobbyists Report of Political Contributions Addendum C (RSA Chapter 15:6)

P	I. Name of Lobbyist(s) ROBENT J. SCOLLEY
L E	II. Name of lobbyist's partnership, firm or corporation, if any:
A S E	RJSCOLLES STRATEGIES LLC (Name of partnership, firm or corporation)
P	III. Name of Client NH MOTOR THANKETH ASSN Date 7. 22.24
R I N T	Political Contributions For each political contribution that is reportable pursuant to RSA Chapter 664 paid on behalf of the client/lobbyist and lobbying firm, indicate the following:
	Full name of candidate: CAASBU SHOACA (Middle Name/Initial)
	Amount of contribution \$ 5000 Office Candidate is Seeking South
	If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter the actual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not known, enter an estimated value and the word "estimate."
	Evil name of andidays APR Day A
	Full name of candidate: ABAS (Last Name) (Middle Name/Initial)
	Amount of contribution \$ 250 Office Candidate is Seeking 550/12
	If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter the actual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not known, enter an estimated value and the word "estimate."
	Full name of candidate: SEVATE REPUBLICATION PAC (Last Name) (First Name) (Middle Name/Initial)
	Amount of contribution \$ 2,500 Office Candidate is Seeking

If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter the actual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not known, enter an estimated value and the word "estimate."
(If more than three contributions were made, report additional contributions on separate addendum C forms.)
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. (Signature of lobbyist) (Print Name of lobbyist) (Print Name of lobbyist)

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STATE OF NEW HAMPSHIRE

Lobbyists Report of Political Contributions Addendum C (RSA Chapter 15:6)

I. Name of Lobbyist(s)	IDOBELL ELI	SCULLON	·
II. Name of lobbyist's p	artnership, firm or c	orporation, if any:	
A		OUES LLC	
III. Name of Client &	MOTEN TRAL	Sport ASSN	Date 7.22.24
Political Contributions For each political contributions client/lobbyist and lobby			er 664 paid on behalf of the
			0
Full name of candidate:	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$ _	11000	Office Candidate is Seeking	
If the contribution is an in- actual cost of the in-kind co enter an estimated value an	ontribution on the line at	de a description of the goods bove for amount of contribut	or services provided, and enter the ion. If the actual cost is not known,
Full name of candidate:	ROCHEFONT	- DAULD	
			(Middle Name/Initial)
Amount of contribution \$_	920	Office Candidate is Seek	ing
	ontribution on the line ab		or services provided, and enter the ion. If the actual cost is not known,
Full name of candidate:	<u> </u>		
run name of candidate:	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$		Office Candidate is Seek	ing

If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter the actual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not known, enter an estimated value and the word "estimate."
(If more than three contributions were made, report additional contributions on separate addendum C forms.)
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.
(Signature of lobbyist) (Signature of lobbyist)
(Print Name of lobbyist)

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