

STATE OF NEW HAMPSHIRE

2024 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

PECEIVED JUL 3 1 2024 NEW HAMPSHIRE DEPARTMENT OF STATE

PLEASE PRINT

		
II. Name of lobbyist's partnership, firm or corporation, it Bernstein Shur	fany:	
(Name of partnership, firm or corporation)		
	ootor NU	50407 4400
T TOT BOX 1 120 maner.		03105-1120
(,	• •	(Zip Code)
) 603-623-8700 () 603-62	23-7775 e-mail jim.merrill@	gbernsteinshur.com
(Telephone) (F	ax)	
III. This statement covers: (Choose one – file separate rep		ay file a separate re _l
eportable expense transactions which are not attributable	le to any one client).	
All reportable transactions occurring in the months prior	to the reporting date relative to th	e following client:
Camp Robin Hood	and the forming white termine to the	
(Full Name of Client as it appears on the	Tablesia Danisa da E. A	
OR	Loodyist Registration Form)	
All reportable transactions by the lobbyist (including the I	lobbyist's family), or the lobbying	g firm listed below w
mrelated to any particular client.	, , , , , , , , , , , , , , , , , , ,	,
IV. Date of Report April 24, 2024 Reports cover: activity from date of registration to 3/31/24	July 31, 2024 4 activity from 4/1/24 to 6/30/2-	
October 30, 2024		ĺ
activity from 7/1/24 to 9/30/24	January 29, 2025 activity from 10/1/24 to 12/31/24	,
V. There have been no fees received and no reportable of this box is checked, complete just this form and submit it to		
State House, Room 204, Concord, NH 03301.	The Secretary of State's Office, 1	or North Main Stree
VI Chook if additional various are attacked.		
VI. Check if additional reports are attached: If you have received fees or made expenditures, you mus	st file Addendum A_Fees and F	vnenses
If you have paid an honorarium or reimbursed expenses,		
Expense Reimbursement		-
If you, your firm, or your family has made political contr	ributions, you must file Addendu	m C-Political Cont
Sworn Statement/Affirmation by Lobbyist	11 1	
I have read R&A 15, RSA 15-B, RSA 14-C and RSA 664 and and complete to the lest of my knowledge and belief.	d hereby swear or affirm that the i	toregoing information
	7/29/2024	
(Signature of Jobbyist)		<u> </u>
	(Dat	ie)
Jim Merrill		

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)

II. Name of lobbyist's partnership, firm or corporation, if any: Bernstein Shur	
(Name of partnership, firm or corporation)	
III. Name of Client Camp Robin Hood	_{Date} 7/29/2024
IV. Fees Received Indicate the gross amount of all fees received from the client identified abov to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The greduced by any expenses:	at relations, or public relations service ross fee amount reported shall not b
a) Total of all fees received in this reporting period	_{a) \$} 3,500
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 y	a) \$ 3,500 b) \$ 500
c) Total of all fees received to date (Add lines a and b)	_{c)\$} _4,000
 Indicate the amount of any such fees that are due, but have not yet been paid 	c) \$ 4,000 d) \$ 0.00
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to refees. Separate reports are to be filed for expenditures made relative to each the lobbyist(s)/firm that are unrelated to any one client a separate report 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 expenses where the expenditure was of \$25.00 or less (for examplunch 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 lobbied (c) an itemized statement of each individual expenditure made during this repany 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 great 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 by may be filed for the lobbyist(s)/firm he aggregate total of all expenses paid expenses; (b) the aggregate total of all expenses; (c) the person has \$10 that is given to the person 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 the 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) \$ 3,500 (see attachment)
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	0.00 _{2 (d}
c) Total of all itemized expenditures reported in detail in section VI.	b) \$ 0.00 c) \$ 0.00

d) Total expenses for this reporting period (Add lines a, b and c)	_{d) \$} 3,500
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) \$ 500
f) Total of all expenses year to date	_{ns} 4,000
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 during this reporting
Paid to:	Amount:
	\$
<u></u>	\$
	\$
	\$
	\$
	\$
~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	
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
	7/29/2024
(Signature of lobbyist)	(Date)
Jim Merrill	
(Print Name of lobbyist)	

# *Attachment to Addendum A, Section V

The Bernstein Shur Group is a subsidiary business of the Bernstein Shur law firm, with offices in Maine, New Hampshire and Vermont. The Group's lobbying work is only one part of a bread range of work, and the consultants involved in lobbying also perform other consulting work which is completely unrelated to lobbying. All fees for services and reimbursable expenses paid by Bernstein Shur Group clients (including lobbying clients) are deposited into the . operating revenues of the Group and/or law firm. All operating expenses of the Group are paid from operating expenses of the Group and/or law firm. Accordingly, it is impossible to determine with any more specificity how funds placed into our general operating account were later used.

# STATE OF NEW HAMPSHIRE

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

I. Name of Lobbyist(s) Kat	hy Corey-Fox		
II. Name of lobbyist's part	tnership, firm or co	orporation, if any:	
Bernstein Shur	•		
(Name of parts	nership, firm or corporation	ı)	
III. Name of Client Camp	Robin Hood		_{Date} 07/29/2024
Political Contributions For each political contribut client/lobbyist and lobbying			ter 664 paid on behalf of the
Full name of candidate:	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$ 25	00.Ud	Office Candidate is Seekir	_{ng} State Senate
Full name of candidate:			
run name of candidate:	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$ 15	50.00	Office Candidate is See	State Senate
	tribution on the line al		ds or services provided, and enter the ution. If the actual cost is not known,
Full name of candidate:	Denise Ri	cardi	
4	(Last Name) 50.00	(First Name)	(Middle Name/Initial)  State Senate

(If more than three contributions were made, report additions	al contributions on separate addendum C forms.)
Sworn Statement/Affirmation by Lobbyist	
•	I hereby swear or affirm that the foregoing informatio and belief.
I have read RSA 15, RSA 15-B and RSA 664 and	

### STATE OF NEW HAMPSHIRE

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

I. Name of Lobbyist(s) Jim	Merrill	·	
II. Name of lobbyist's part	nership, firm or co	orporation, if any:	
Bernstein Shur	• ′	•	
(Name of partn	ership, firm or corporation)	)	<del></del>
III. Name of Client Camp	Robin Hood		Date 07/29/2024
Political Contributions For each political contributi	on that is reportable	e nursuant to RSA Chan	oter 664 paid on behalf of the
client/lobbyist and lobbying			p
	<del> </del>		
Full name of candidate: R	egina Birds	ell	
	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution $\$ \frac{52}{}$	2.05	Office Candidate is Seeki	_{ng} State Senate
			ds or services provided, and enter the
			ution. If the actual cost is not known,
enter an estimated value and the			ŕ
Full name of candidate:	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$		Office Candidate is See	eking
If the contribution is an in-kin	d contribution, provid	le a description of the good	ds or services provided, and enter the
actual cost of the in-kind conti	ribution on the line ab		ution. If the actual cost is not known,
enter an estimated value and the	ne word "estimate."		
Full name of candidate:			
	(Last Name)	(First Name)	(Middle Name/Initial)
		Office Candidate is See	

If the contribution is an in-kind contribution, provide a de- actual cost of the in-kind contribution on the line above fo enter an estimated value and the word "estimate."	scription of the goods or services provided, and enter the ramount of contribution. If the actual cost is not known,
(If more than three contributions were made, report additional co	ontributions on separate addendum C forms.)
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and he is true and complete to the best of my knowledge and	
/s/ Jim Merrill	07/29/2024
(Signature of lobbyist)	(Date)
Jim Merrill	
(Print Name of lobbyist)	