

STATE OF NEW HAMPSHIRE

2018 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

PLEASE PRINT

I. Name of Lobbyist(s) Peter Bragdon, Andrew Hosmer, Lucas Meyer						
II. Name of lobbyis	t's partnership, firm or corp	oration, if any:				
Preti Strategies						
(N	ame of partnership, firm or corpo	ration)		<u></u>		
PO Box 1318	•	Concord	NH	03302		
Business Address: (S	Street) (Town/City)	(State)	(Zip Code)		
(603) 410-1588	()_		e-mail			
(Telephone)		(Fax)				
	covers: (Choose one – file se transactions which are not a			e a separate report for		
☐ All reportable tra	ansactions occurring in the mo	•	porting date relative to the fol	lowing client:		
		Medical Society				
OR	(Full Name of Client as it app	ears on the Lobbyist	Registration Form)			
	nsactions by the lobbyist (inclicular client.	uding the lobbyist	s family), or the lobbying firm	n listed below which are		
IV. Date of Report Reports cover: act	April 25, 2018 🔼 ivity from date of registration to	3/31/18 aci	July 25, 2018 ivity from 4/1/18 to 6/30/18			
	October 31, 2018 activity from 7/1/18 to 9/30/18	ac	January 30, 2019 tivity from 10/1/18 to 12/31/18			
	en no fees received and no l, complete just this form and s					
VI. Check if additio	onal reports are attached:					
If you have recei	ived fees or made expenditure	s, you must file Ac	dendum A– Fees and Expens	ses		
☐ If you have paid Expense Reimbursen	an honorarium or reimbursed nent	expenses, you mu	st file Addendum B – Report	of Honorariums or		
☐ If you, your firm	, or your family has made pol	itical contributions	, you must file Addendum C	- Political Contributions		
I have read RSA 15, and complete to the	ffirmation by Lobbyist RSA 15-B, RSA 14-C and RS best of my knowledge and beli		April 9, 2018	oing information is true		
(Signature of lobbyi	st)		(Date)			
Peter Bragdon				RECEIVED		
(Print Name of lobby	yist)			APR 2 4 2018		

NEW HAMPSHIRE DEPARTMENT OF STATE

P L E A S E P R I N

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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:						
Preti Strategies						
(Name of partnership, firm or corporation)						
III. Name of Client New Hampshire Medical Society	Date	April 9, 2018				
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 growed by any expenses: a) Total of all fees received in this reporting period 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)	a) \$b) \$	r public relations serv unt reported shall not				
) Total of all fees received to date (Add lines a and b)	c) \$	30,000.00				
Indicate the amount of any such fees that are due, but have not yet been paid	d) \$	10,000.00				
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 othe lobbyist(s)/firm that are unrelated to any one client a separate report rexpenses 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 example lunch where the cost was \$25.00 or less, purchase of a pen with a value of less being lobbied, purchase of a ceremonial object given to a person being lobbied (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 greater restaurant expenses for a legislative reception). Expenses for honorariums, contributions will be reported on separate addendums and should not be reported.	client and if may be filed aggregate agenses; (b) he: meals pu ss than \$10 d with a val orting period he of greate er than \$25, expense re	expenditures are madd for the lobbyist(s)/ft total of all expenses; the aggregate total or rchased during a busing that is given to the pelue of \$25.00 or less); of greater than \$25.00 or than \$25, purchase but not greater than simbursement, or policioners.				
Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$	0.00				
o) Total aggregate of expenditures during this reporting period, not reported n a), of \$25 or less.	b) \$	0.00				
Total of all itemized expenditures reported in detail in section VI.	c) \$	0.00				

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$	0.00
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) \$	0.00
f) Total of all expenses year to date	f) \$	0.00
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from lo period, including by whom paid or to whom charged.	bbying fees o	luring this reporting
Paid to:	Amount:	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
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.	A	2049
(Signature of lobbyist)	April 9, 2	ate)
Peter Bragdon	(D	u.c)
(Print Name of lobbyist)		