

STATE OF NEW HAMPSHIRE 2018 Statement of Income and Expenses for LOBBYISTS

(RSA Chapter 15)

RECEIVED

APR 26 2018

NEW HAMPSHIRE DEPARTMENT OF STATE

I. Name of Lobbyis	t(s) Susan H. Paschell ; James P. Monahan	
II. Name of lobbyis	t's partnership, firm or corporation, if any:	
The Dupont Group (Name of partnership, firm		
114 N Main St. Suit	te 401 Concord, NH 03301	
) (Town/City) (State) (Zip Code)	
(603)228-3322 (Telephone)	(603) 228-0713 (Fax)	e-mail <u>jmonahan@dupontgroup.com</u>
	,	
	covers: (Choose one – file separate reports for s which are not attributable to any one client	r each client, OR you may file a separate report for reportable).
All reportable	transactions occurring in the month prior to the	reporting date relative to the following client:
Bi State Primary C		
OR	(Full Name of Client as it appears or	the Lobbyist Registration Form)
All reportable tra		e's family), or the lobbying firm listed below which are unrelated
IV. Date of Report	April 25, 2018 X	July 25, 2018
Reports cover	activity from date of registration to 3/31/18	activity from 4/1/18 to 6/30/18
	October 31, 2018	January 30, 2019 □
	activity from 7/1/18 to 9/30/18	activity from 10/1/18 to 12/31/18
	no fees received and no reportable transaction in the second complete just this form and submit it to the Second complete just this form and submit it is submit it to the Second complete just the Second compl	ons made since the last report. cretary of State's Office, State House, Room 204, Concord, NH
Check if additional If you have received	onal reports are attached: ved fees or made expenditures, you must file Ad	Idendum A- Fees and Expenses
If you have paid Reimbursement	an honorarium or reimbursed expenses, you mus	st file Addendum B- Report of Honorariums or Expense
☐ If you, your firm	, or your family has made political contributions	, you must file Addendum C- Political Contributions.
		firm that the foregoing information is true and complete to the
puraw H. Pase	hell	
,		4/25/2018
(Signature of lobbyist)		(Date)
Susan H. Paschell		
(Print Name of lobbyist)		



STATE OF NEW HAMPSHIRE Lobbyist Fees and Expenses Addendum A

(RSA Chapter 15:6

I. Name of Lobbyist(s)	
Susan H. Paschell ; James P. Monahan	
II. Name of lobbyist's partnership, firm or corporation, if any:	
The Dupont Group	
(Name of partnership, firm or corporation)	
III. Name of Client Bi State Primary Care Association	Date 4/25/2018
IV. Fees Received Indicate the gross amount of all fees received from the client identified above t including fees for services such as public advocacy, government relations, or p legislation, and related legal work. The gross fee amount reported shall not be	ublic relations services including research, monitoring
a) Total of all fees received in this reporting period	a) \$6000
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)\$0
c) Total of all fees received to date (Add lines a and b)	c)\$600 0
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$0
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to report reports are to be filed for expenditures made relative to each client and if expert unrelated to any one client a separate report may be filed for the lobbyist(s)/firmicategories of expenses: (a) the aggregate total of all expenses paid during the resoffice expenses; (b) the aggregate total of all individual expenses where the experimentary purchased during a business lunch where the cost was \$25.00 or less, purchase the person being lobbied, purchase of a ceremonial object given to a person being termized statement of each individual expenditure made during this reporting provered by (a) (for example: purchase of a meal with value of greater than \$25 subject of lobbying with a value greater than \$25, but not greater than \$50, rest for honorariums, expense reimbursement, or political contributions will be reported and addendum A.	ditures are made by the lobbyist(s)/firm that are m. Expenses are to be reported in one of three eporting period for salaries, benefits, support staff, and penditure was of \$25.00 or less (for example: meals of a pen with a value of less than \$10 that is given to ing lobbied with a value of \$25.00 or less); and (c) an eriod of greater than \$25.00 for any purpose not purchase of a ceremonial object to be given to the caurant expenses for a legislative reception). Expenses
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$

in a), of \$25 or less.	
c) Total of all itemized expenditures reported in detail in section VI.	b) \$
c) Total of all termized expenditures reported in detail in section v1.	
d) Total expenses for this reporting period	d) \$
(Add lines a, b and c)	
e) Total of expenses paid this calendar year, prior to this reporting period	e) \$
(This should be the amount on line f of addendum A for last month's report)	
f) Total of all expenses year to date	f) \$
VI. Other Expenses:	
Provide the following detail for all expenditures of more than \$25 made from l	lobbying fees during this reporting period, including b
whom paid or to whom charged.	
Paid to: Amount:	
	\$
	\$
	\$
	\$
	\$
	\$
	3
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.	and the second of the second of the second
purautt. Parchell 4/25/2	2018
(Signature of lobbyist) (Date)	
Susan H. Paschell	
(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.

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:
Name of Lobbying partnership, firm, or corporation: The Dupont Group
Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any particular
client): Bi State Primary Care Association
Date of Report (check one):
April 25, 2018 X July 25, 2018
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).
0 Addendum B(s).
OAddendum 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 lobbyist) 4/25/2018 (Date)
James P. Monahan (Print Name of lobbyist)