



**STATE OF NEW HAMPSHIRE**  
**2024 Statement of Income and**  
**Expenses for LOBBYISTS**  
**(RSA Chapter 15)**

PLEASE PRINT

**I. Name of Lobbyist(s)** James Burnett

**II. Name of lobbyist's partnership, firm or corporation, if any:**  
Sight Line Public Affairs  
(Name of partnership, firm or corporation)

PO Box 97 Concord NH 03302  
Business Address: (Street) (Town/City) (State) (Zip Code)  
 ( ) 603-686-3909 ( ) jamie@sight-line.us  
(Telephone) (Fax) e-mail

**III. This statement covers: (Choose one – file separate reports for each client, OR you may file a separate report for reportable expense transactions which are not attributable to any one client).**

All reportable transactions occurring in the months prior to the reporting date relative to the following client:  
Wine Institute  
(Full Name of Client as it appears on the Lobbyist Registration Form)

**OR**

All reportable transactions by the lobbyist (including the lobbyist's family), or the lobbying firm listed below which are unrelated to any particular client.

**IV. Date of Report** April 24, 2024  July 31, 2024   
*Reports cover: activity from date of registration to 3/31/24 activity from 4/1/24 to 6/30/24*  
 October 30, 2024  January 29, 2025   
*activity from 7/1/24 to 9/30/24 activity from 10/1/24 to 12/31/24*

**V. There have been no fees received and no reportable transactions made since the last report.**   
*If this box is checked, complete just this form and submit it to the Secretary of State's Office, 107 North Main Street, State House, Room 204, Concord, NH 03301.*

**VI. Check if additional reports are attached:**  
 If you have received fees or made expenditures, you must file **Addendum A– Fees and Expenses**  
 If you have paid an honorarium or reimbursed expenses, you must file **Addendum B– Report of Honorariums or Expense Reimbursement**  
 If you, your firm, or your family has made political contributions, you must file **Addendum C– Political Contributions**

**Sworn Statement/Affirmation by Lobbyist**  
 I have read RSA 15, RSA 15-B, RSA 14-C and RSA 664 and hereby swear or affirm that the foregoing information is true and complete to the best of my knowledge and belief.

James P. Burnett  
 (Signature of lobbyist)  
**James Burnett**  
 (Print Name of lobbyist)

10/28/24  
 (Date)

