

STATE OF NEW HAMPSHIRE

2019 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

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APR 24 2019

PLEASE PRINT

NEW HAMPSHIRE

I. Name of Lobbyist(s) Frank Gul	nta	·	DEPARTMENT (
II. Name of lobbyist's partnersh	lp, firm or corporation, if	any:			
ML Strategies, LLC					
(Name of partners	hip, firm or corporation)	·			
701 Pennsylvenia Ave NW	Washington	DC	20004		
Business Address: (Street)	(Town/City)	(State)	(Zip Code)		
() 202-434-7300	() 202-434-7400	c-mail fcguinta@rr	ilstrategies.com		
(Telephone)	(Fax		<u></u>		
III. This statement covers: (Chooreportable expense transactions All reportable transactions occ	which are not attributable	to any one client).			
1st Alliance Lending	arring in the months prior to	the reporting date relative to th	e ronowing citent:		
	of Client as it appears on the L	obbyisi Registration Form)			
<u>OR</u>	••	, w,			
All reportable transactions by the inrelated to any particular elient.	ne lobbyist (including the lot	obyist's family), or the lobbying	, firm listed below w		
IV. Date of Report April 24, 3 Reports cover: activity from date	2019 🗹 of registration to 3/31/19	July 31, 2019 🗍 activity from 4/1/19 to 6/30/19			
	October 30, 2019 activity from 7/1/19 to 9/30/19		January 29, 2020 [activity from 10/1/19 to 12/31/19		
V. There have been no fees red If this box is checked, complete just Concord, NH 03301.	ceived and no reportable this form and submit it to the	e transactions made since the Secretary of State's Office, St	nc last report. [] ate House, Room 20		
VI. Check if additional reports as	re attached:				
If you have received fees or ma		ile Addendum A- Fees and Ex	penses		
		ou must file Addendum B- Rep	•		
· If you, your firm, or your famil	y has made political contrib	utions, you must file Addendur	n C Political Contr		
worn Statement/Affirmation by have read RSA 15, RSA 15-B, RS indecomplete to the bist of my kno-		ereby swear or affirm that the fo	oregoing information		
X My Mut		4/22/19			
Signature of lobbyist)		(Date)		
Frank Guinta					
Print Name of lobbyist)					

LEASE PRINT



STATE OF NEW HAMPSHIRE

Lobbyists Fccs and Expenses Addendum A

(RSA Chapter 15:6)

ML Strategies, LLC	
(Name of partnership, firm or corporation)	
III. Name of Client 1st Alliance Lending	Date 4/22/19
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, governmen including research, monitoring legislation, and related legal work. The gr reduced by any expenses:	t relations, or public relations service
a) Total of all fees received in this reporting period	a) \$ 7,500.00
n) 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	b) \$ 0.00 ear)
:) Total of all fees received to date	
(Add lines a and b)	c) \$ 7,500.00
findicate the amount of any such fees that are due, but have not yet been paid	J) \$ 7.500.00
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to reffees. 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 of 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 example unth where the cost was \$25.00 or less, purchase of a pen with a value of lesting lobbied, purchase of a ceremonial object given to a person being lobbied; an itemized statement of each individual expenditure made during this report only purpose not covered by (a) (for example: purchase of a meal with value eremonial object to be given to the subject of lobbying with a value greate estaturant 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 a aggregate total of all expenses paic expenses; (b) the aggregate total of all le; meals purchased during a business as than \$10 that is given to the person all with a value of \$25.00 or less); and orting period of greater than \$25.00 for the of greater than \$25, purchase of a cr than \$25, but not greater than \$50, expense reimbursement, or political
t) Total aggregate expenses for this reporting period for salaries, benefits, opport stuff, and office expenses, related directly or indirectly to lobbying.	a) \$ 0.00
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) \$ 0.00
). Total of all itemized expenditures reported in detail in section VI	0.000

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$ 0.00
c) 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)	c) \$ 0.00
n Total of all expenses year to date	Ŋ\$_ <u>0.00</u>
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from period, including by whom paid or to whom charged.	lobbying fees during this reporting
Paid to:	Amount:
	\$
	\$
	s
	s
	s
	\$
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affin is true and complete to the best of my knowledge and belief.	m that the foregoing information
Signature of lobbyist)	4/22/19
(Signature of lobbyist)	(Date)
Frank Guinta (Print Name of lebbriet)	

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 Incom	ne and Expenses for		
Name of Lobbying pa	ntnership, firm, or corpo	oration: ML Strategies, LLC	
Name of Client (leave	blank if Statement is f	or the partnership, firm, or	corporation and not related to an
particular client): 1st	Alliance Lending		·
Date of Report (check	cone):		
April 24, 2019 🗹	July 31, 2019 🛚	October 30, 2019 🗆	January 29, 2020 🗇
I have read RSA 15, I the following Addend submitted):	RSA 15-B, RSA 664, the turns submitted with the	he Statement of Income ar at Statement (insert the no	nd Expenses described above, an umber of Addendum forms bein
× Addendum A(s).		
Addendum B(s).		
Addendum C(s).		
I hereby swear or affir complete to the best of	m that the foregoing in my knowledge and bel	formation on the Statementicf.	at and each Addendum is true and
Kral	Must	4/22/1	9
(Signature of lobbyist)	12.10		(Date)
Farati Cuinta			
Frank Guinta		<u> </u>	
(Print Name of lobbyis	Ŋ		