

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

PLEASE PRINT

I. Name of Lobbyist(s) Jim Merrill, Kathy Corey-Fox, Teresa Rosenberger, Will Craig

II. Name of lobbyist's partnership, firm or corporation, if any:

Bernstein Shur

(Name of parts	ership, firm or corporation)		· · · · · · · · · · · · · · · · · · ·
670 P.O. E	Box 1120 Manchester	NH	03105-1120
Business Address: (Street)	(Town/City)	(State)	(Zip Code)
, 603-623-87	00 ()603-623-7775	e-mail	bernsteinshur.com
(Telephone)	(Fax)		

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:

Beth Israel Lahey Health

(Full Name of Client as it appears on the Lobbyist Registration Form)

<u>OR</u>

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 activity from 4/1/24 to 6/30/24
October 30, 2024	January 29, 2025 activity from 10/1/24 to 12/31/24
V. There have been no fees received and no repor	table 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

V If you, your firm, or your family has made political contributions, you must file Addendum C- Political Contributions

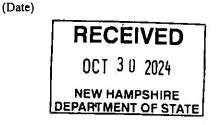
Sworn Statement/Affirmation by Lobbyist

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.

/s/ Jim Merrill

(Signat	ure of lobbyi	st)
Jim	Merrill	

10/25/2024



	STATE OF NEW HA Lobbyists Fees and Addendum	Expenses
	(RSA Chapter)	15:6)
I. Name of Lobbyist(s)	lerrill, Kathy Corey-Fox, Teresa	Rosenberger, Will Craig
II. Name of lobbyist's partne	rship, firm or corporation, if any:	0
Bernstein Shur		
	nip, firm or corporation) srael Lahey Health	_{Date} 10/25/2024
to lobbying, including fees for s	fees received from the client identified abov ervices such as public advocacy, governmer legislation, and related legal work. The g	nt relations, or public relations serv
a) Total of all fees received in th	is reporting period	a) \$ 0.00
b) Total of all fees received this	is reporting period calendar year, prior to this reporting period of all prior monthly reports for this calendar	ы s <u>0.00</u>
b) Total of all fees received this	calendar year, prior to this reporting period of all prior monthly reports for this calendar	ы s <u>0.00</u>

V. Expenses:

Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to report all expenses made from lobbying fees. Separate reports are to be filed for expenditures made relative to each client and if expenditures are made by the lobbyist(s)/firm that are unrelated to any one client a separate report may be filed for the lobbyist(s)/firm. Expenses are to be reported in one of three categories of expenses: (a) the aggregate total of all expenses paid during the reporting period for salaries, benefits, support staff, and office expenses; (b) the aggregate total of all individual expenses where the expenditure was of \$25.00 or less (for example: meals purchased during a business lunch where the cost was \$25.00 or less, purchase of a pen with a value of less than \$10 that is given to the person being lobbied, purchase of a ceremonial object given to a person being lobbied with a value of \$25.00 or less); and (c) an itemized statement of each individual expenditure made during this reporting period of greater than \$25.00 for any purpose not covered by (a) (for example: purchase of a meal with value of greater than \$25, purchase of a ceremonial object to be given to the subject of lobbying with a value greater than \$25, but not greater than \$50, restaurant expenses for a legislative reception). Expenses for honorariums, expense reimbursement, or political contributions will be reported on separate addendums and should not be reported on Addendum A.

a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	ы \$ 0.00
c) Total of all itemized expenditures reported in detail in section VI.	_{c) \$} 0.00

c) Total of all itemized expenditures reported in detail in section VI.

d) Total expenses for this reporting period (Add lines a, b and c)

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)

f)	Total	ofall	expenses	уеаг	to date	
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VI. Other Expenses:

Provide the following detail for all expenditures of more than \$25 made from lobbying fees during this reporting period, including by whom paid or to whom charged.

Paid to:

 	\$
 	\$
 	\$
 ·· ····-	\$
 	\$
	\$

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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.

/s/ Jim Merrill

(Signature of lobbyist)

Jim Merrill

(Print Name of lobbyist)

10/25/2024

(Date)

 $\frac{1,516.67}{0.00}$ $\frac{0.00}{0.5} 1,516.67$

Amount:

*Attachment to Addendum A. Section V.

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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.

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Bernstein Shur (Name of partnership, firm or corporation) III. Name of Client Political Contributions For each political contribution that is reportable pursuant to RSA C client/lobbyist and lobbying firm, indicate the following: Full name of candidate: Friends of Doug Thomas (Last Name) Amount of contribution \$ 50.00 Office Candidate is Set If the contribution is an in-kind contribution, provide a description of the jactual cost of the in-kind contribution on the line above for amount of content value and the word "estimate." Full name of candidate: Committee to Elect House (First Name) Office Candidate is Set If the contribution \$ 100.00 Full name of candidate: Committee to Elect House (First Name) Office Candidate is Set If the contribution \$ 100.00 Office Candidate: Office Candidate is Set If the contribution \$ 100.00 Full name of candidate: Office Candidate is Set If the contribution \$ 100.00 Amount of contribution \$ 100.00 Office Candidate is If the contribution is an in-kind contribution, provide a description of the \$ actual cost of the in-kind contribution on the line above for amount of contribution is an in-kind contribution, provide a description of the \$ actual cost of the in-kind contribution on the line above for amount of content of the set If the contribution is an in-kind contribution \$ 100.00	eport of ributions 1m C er 15:6)
Association Bernstein Shur Image: Constraint of partnership, firm or corporation) III. Name of Client Beth Israel Lahey Health Beth Israel Lahey Health Political Contributions For each political contribution that is reportable pursuant to RSA Constraint of the partnership, firm, indicate the following: Full name of candidate: Friends of Doug Thomas (Last Name) Amount of contribution \$ 50.00 Office Candidate is Set If the contribution is an in-kind contribution, provide a description of the pactual cost of the in-kind contribution on the line above for amount of content on the word "estimate." Full name of candidate: Committee to Elect House (First Name) Amount of contribution \$ 100.00 Office Candidate is Set If the contribution \$ Full name of candidate: Committee to Elect House (First Name) Amount of contribution \$ 100.00 Office Candidate is Set If the contribution \$ If the contribution \$ 100.00 Office Candidate is Set If the contribution \$	
III. Name of Client Beth Israel Lahey Health R Political Contributions For each political contribution that is reportable pursuant to RSA C client/lobbyist and lobbying firm, indicate the following: Full name of candidate: Friends of Doug Thomas (Last Name) Amount of contribution \$ 50.00 Office Candidate is Set If the contribution is an in-kind contribution, provide a description of the pactual cost of the in-kind contribution on the line above for amount of content and the word "estimate." Full name of candidate: Committee to Elect House (First Name) Amount of contribution \$ 100.00 Office Candidate is an in-kind contribution, provide a description of the pactual cost of the in-kind contribution on the line above for amount of content an estimated value and the word "estimate." Full name of candidate: Committee to Elect House (First Name) Amount of contribution \$ 100.00 Office Candidate is If the contribution is an in-kind contribution, provide a description of the pactual cost of the in-kind contribution on the line above for amount of content an estimated value and the word "estimate."	
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(Last Name) (First Name) Amount of contribution \$ 50.00 Office Candidate is Set If the contribution is an in-kind contribution, provide a description of the pactual cost of the in-kind contribution on the line above for amount of contenter an estimated value and the word "estimate." If the contribution on the line above for amount of contenter an estimated value and the word "estimate." Full name of candidate: Committee to Elect House (Last Name) (First Name) Amount of contribution \$ 100.00 Office Candidate is If the contribution is an in-kind contribution, provide a description of the pactual cost of the in-kind contribution on the line above for amount of contenter an estimated value and the word "estimate."	Chapter 664 paid on behalf of the
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If the contribution is an in-kind contribution, provide a description of the g actual cost of the in-kind contribution on the line above for amount of con enter an estimated value and the word "estimate."	(Middle Name/Initial) Seeking State Representative
	goods or services provided, and enter
Full name of candidate:	
Full name of candidate:(Last Name) (First Name)	(Middle Name/Initial)

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(turn over to continue \rightarrow)

If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter the actual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not known, enter an estimated value and the word "estimate."

(If more than three contributions were made, report additional contributions on separate addendum C forms.)

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.

/s/ Kathy Corey-Fox

10/25/2024

(Date)

(Signature of lobbyist) Kathy Corey-Fox

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		STATE	E OF NEW HAM Lobbyists Report o Political Contributio Addendum C (RSA Chapter 15:6	f ns
P L	I. Name of Lobbyist(s) Jim	Merrill		
E	II. Name of lobbyist's part	nership, firm or cor	poration, if any:	
A S	Bernstein Shur			
2		ership, firm or corporation)		40/05/000
	III. Name of Client Beth Is	rael Lahey Health	ו יייי	_Date 10/25/2024
	Political Contributions For each political contributi client/lobbyist and lobbying	on that is reportable firm, indicate the fo	pursuant to RSA Chapter 6 llowing:	564 paid on behalf of the
	Full name of candidate: B	(Last Name)	(First Name)	(Middle Name/Initial)
	Amount of contribution $\frac{10}{100}$ If the contribution is an in-kind actual cost of the in-kind contrenter an estimated value and the	d contribution, provide ibution on the line above	ffice Candidate is Seeking a description of the goods or we for amount of contribution	services provided, and ent
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	If the contribution is an in-kind actual cost of the in-kind contr enter an estimated value and th	d contribution, provide ibution on the line above ne word "estimate." <u>ohn Stephen</u> (Last Name) 0.00 d contribution, provide ibution on the line above	a description of the goods or ve for amount of contribution (First Name) Office Candidate is Seeking a description of the goods or	services provided, and en If the actual cost is not i (Middle Name/Initial) Executive Cour services provided, and en
	If the contribution is an in-kind actual cost of the in-kind contr enter an estimated value and th Full name of candidate: <u>Jo</u> Amount of contribution \$ <u>20</u> If the contribution is an in-kind actual cost of the in-kind contr enter an estimated value and th	d contribution, provide ibution on the line above ne word "estimate." <u>ohn Stephen</u> (Last Name) 0.00 d contribution, provide ibution on the line above	a description of the goods or ve for amount of contribution (First Name) Office Candidate is Seeking a description of the goods or	services provided, and ent If the actual cost is not k (Middle Name/Initial) Executive Cour services provided, and ent
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		Lobbyis Political (Adde	W HAMPSHIRE ts Report of Contributions endum C hapter 15:6)
P L E A	II. Name of lobbyist's part	Merrill nership, firm or corporation, if a	
S E P	(Name of partning)	ership, firm or corporation) srael Lahey Health	_{Date} 10/25/202
r R I N T	Political Contributions For each political contributi		SA Chapter 664 paid on behalf of th
		(Last Name) (First Na 0.00 Office Candidat d contribution, provide a description c ibution on the line above for amount	me) (Middle Name/Initial) e is Seeking State Senate of the goods or services provided, and en of contribution. If the actual cost is not
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	Full name of candidate: T Amount of contribution \$ 20	(Last Name) (First Nat	State Senate
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		ibution on the line above for amount	
	actual cost of the in-kind contr	ibution on the line above for amount	of the goods or services provided, and export of contribution. If the actual cost is not

If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter the actual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not known, enter an estimated value and the word "estimate."

Additional Contribution - \$1,000 to Kelly Ayotte for Governor

(If more than three contributions were made, report additional contributions on separate addendum C forms.)

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.

/s/ Jim Merrill

10/25/2024

(Signature of lobbyist)

(Date)

Jim Merrill

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		STATE	COF NEW HAM Lobbyists Report Political Contribut Addendum C (RSA Chapter 15)	of ions
I.	Name of Lobbyist(s) V	Villiam Craig		
	Bernstein Shur	artnership, firm or corj	ooration, if any:	
IJ		artnership, firm or corporation) I Israel Lahey Health		_{Date} 10/25/202
F		oution that is reportable pring firm, indicate the fol		664 paid on behalf of t
F	ull name of candidate:	Jim O'Connell		
	mount of contribution \$ _	(Last Name)	(First Name) fice Candidate is Seeking	(Middle Name/Initial) Executive Counsi
ac	the contribution is an in- tual cost of the in-kind content ater an estimated value an	ontribution on the line abov	a description of the goods of e for amount of contribution	or services provided, and e on. If the actual cost is not
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Fi An If ac	etual cost of the in-kind conter an estimated value and ull name of candidate: mount of contribution \$ the contribution is an in-litual cost of the in-kind conter an estimated value and	Pat Long (Last Name) 200.00 kind contribution, provide a outribution on the line abov	e for amount of contributio (First Name) Office Candidate is Seekin description of the goods c e for amount of contributio	(Middle Name/Initial) g State Senate or services provided, and e

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If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter the actual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not known, enter an estimated value and the word "estimate."

(If more than three contributions were made, report additional contributions on separate addendum C forms.)

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.

/s/ William Craig (Signature of lobbyist)

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10/25/2024

(Date)

William Craig