

## STATE OF NEW HAMPSHIRE 2019 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

#### **RECEIVED**

OCT 3 0 2019

NEW HAMPSHIRE DEPARTMENT OF STATE

· - · · · · · · · · · · · · · · · ·	st's partnership, firm or corporatio	on, If any:	
ML Stratagles, LLC	•		
	Name of partnership, firm or corporation)		<del></del>
701 Panneylvenie Ave NW	Weshir	ngton DC-	20004
	(Street) (Town/C		(Zip Code)
) 202-434-730	00 ( ) 202-434-	7400e-mail_fcguin	ta@mistrategies.com
(Telephone	······································	(Fax)	
eportable expens	t covers: (Choose one – file separate e transactions which are not attribu	stable to any one client).	
All reportable to	ransactions occurring in the months p	rior to the reporting date relative	e to the following client:
1st Alliance Lending		a table to the stands of Table 1	
OR	(Full Name of Client as it appears of	n the Loadylst Kegismulon Form)	
	ansactions by the lobbyist (including rticular client.	the lobbyist's family), or the lob	obying firm listed below w
rV. Data of Banc≃	t April 24, 2019 🗍	July 31, 2019	ם
A TORKE OF WELDIN			
	ctivity from date of registration to 3/31/1	9 activity from 4/1/19 to 6	30/19
IV. Date of Report Reports cover: A	ctivity from date of registration to 3/31/1 October 30, 2019 @ activity from 7/1/19 to 9/30/19	•	<i>3019</i> 0 🛘
Reports cover: A V. There have be If this box is checke	October 30, 2019 @ activity from 7/1/19 to 9/30/19 een no fees received and no repo ed, complete just this form and submit	g activity from 4/1/19 to 6.  January 29, 202: activity from 10/1/19 to  reactivity from made si	30/19 0 □ 12/31/19 nce the last report. □
Reports cover: A V. There have be If this box Is checke Concord, NH 0330	October 30, 2019 @ activity from 7/1/19 to 9/30/19 een no fees received and no repo ed, complete just this form and submit 1.	g activity from 4/1/19 to 6.  January 29, 202: activity from 10/1/19 to  reactivity from made si	30/19 0 □ 12/31/19 nce the last report. □
V. There have be If this box is checke Concord. NH 0330 VI. Check if addit	October 30, 2019  activity from 7/1/19 to 9/30/19 een no fees received and no repo ed, complete just this form and submit  1. innal reports are attached:	January 29, 202 January 29, 202 activity from 10/1/19 to estable transactions made significant to the Secretary of State's Offi	30/19 0  12/31/19 nce the last report. Tice, State House, Room 26
V. There have be lifthis box is checke Concord, NH 0330 VI. Check if addit	October 30, 2019  activity from 7/1/19 to 9/30/19  een no fees received and no reported, complete just this form and submit  ional reports are attached: elved fees or made expenditures, you dan honorarium or reimbursed exper	January 29, 202:  January 29, 202:  activity from 10/1/19 to  retable transactions made single to the Secretary of State's Officents  must file Addendum A-Fees to	30/19 0 [] 12/31/19 nce the last report. [] Tice, State House, Room 26

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#### STATE OF NEW HAMPSHIRE

### Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

ML Strategies, LLC	
(Name of permership, firm or corporation)	
III. Name of Client 1st Allianca Lending	Date 10/28/19
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, government including research, monitoring legislation, and related legal work. The greeduced by any expenses:	relations, or public relations services is fee amount reported shall not be
a) Total of all fees received in this reporting period	a) \$ <u>0.00</u>
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) \$ <u>22,500.00</u>
c) Total of all fees received to date (Add lines a and b)	c) \$ 22,500.00
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$ 22,500.00
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 of 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 an individual 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 lebeing lobbied, purchase of a ceremonial object given to a person being lobbie (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 greate restaurant expenses for a legislative reception). Expenses for honorariums contributions will be reported on separate addendums and should not be reported.	may be filed for the lobbyist(s)/firm aggregate total of all expenses paid epenses; (b) the aggregate total of all expenses; (b) the aggregate total of all expenses; (b) the aggregate total of all expenses; than \$10 that is given to the person of with a value of \$25.00 or less); and orting period of greater than \$25.00 for each of greater than \$25, purchase of er than \$25, but not greater than \$50, expense reimbursement, or political
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	B) \$ 0.00
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) \$ <u>0.00</u>

c) 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)	a) \$ 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) \$ <u>0.00</u>
f) Total of all expenses year to date	ŋ s <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:
	5
	\$
	\$
	\$
	\$
	\$
Sworp Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affi is true and complete to the best of my knowledge and belief.	rm that the foregoing information
(Signature of lobbyist)	10/28/19
(Signature of lobbyist)	(Date)
Frank Guinte	
(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.

	Affirmation by Lobby no and Expenses for:	•		
Name of Lobbying pa	artnership, firm, or corpo	oration: ML Strategies, LLC		
Name of Client (leav	e blank if Statement is fo	or the partnership, firm, or	corporation and not related to	any
particular client): 1st	Alliance Lending			—
Date of Report (chec	k one):			
April 24, 2019 🗆	July 31, 2019 🛛	October 30, 2019 🖼	January 29, 2020 🛚	
I have read RSA 15, the following Adden submitted):	RSA 15-B, RSA 664, the dums submitted with the	he Statement of Income as at Statement (insert the n	nd Expenses described above, umber of Addendum forms be	and sing
x Addendum A	.(s).			
Addendum B	o(s).			
Addendum C	c(s).			
I hereby swear or afficomplete to the best	irm that the foregoing ir of my knowledge and be	lief.	nt and each Addendum is true	and
nul	yu.	<u> 10/2</u>	(Date)	
(Signature of lobbyis	ŋ. •		(Date)	
Frank Guinta				
(Print Name of lobby	rist)			