

#### STATE OF NEW HAMPSHIRE

2024 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15) RECEIVED

JUL 3 1 2024

NEW HAMPSHIRE
DEPARTMENT OF STATE

PLEASE PRINT

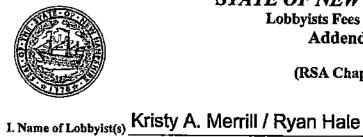
I. Name of Lobbyist(s) Kristy A. Mo	errill / Ryan Hal	e <u></u>	·
II. Name of lobbyist's partnership, firm (	or corporation, if any:		
New Hampshire Bankers As			
(Name of partnership, firm of		<del></del>	
PO Box 2586	Concord	NH	03302-2586
Business Address: (Street)	(Town/City)	(State)	(Zîp Code)
, 603.224.5373	, N/A	<sub>e-mail</sub> kmerrill@nl	bankers.com
(Telephone)	(Fax)	е-шац	<del></del>
III. This statement covers: (Choose one – reportable expense transactions which ar	e not attributable to any	one client).	
All reportable transactions occurring in		porting date relative to the	following client:
New Hampshire Bankers As	sociation		
(Full Name of Client:	as it appears on the Lobbyist	Registration Form)	<del></del>
All reportable transactions by the lobbyi unrelated to any particular client.  IV. Date of Report April 24, 2024  Reports cover: activity from date of registrations.	$\neg$	July 31, 2024 10 6/30/24	firm listed below which a
October 30, 2024  activity from 7/1/24 to 9/3		January 29, 2025 ty from 10/1/24 to 12/31/24	. —
V. There have been no fees received a If this box is checked, complete just this for State House, Room 204, Concord, NH 0330	n and submit it to the Sec	sactions made since the retary of State's Office, 10	e last report. L
VI. Check if additional reports are attack	ied:		
If you have received fees or made expe	nditures, you must file Ac	ldendum A – Fees and Exp	penses
If you have paid an honorarium or reim Expense Reimbursement	bursed expenses, you mu	st file Addendum B–Repo	ort of Honorariums or
If you, your firm, or your family has me	ade political contributions	, you must file Addendun	C-Political Contributio
Sworn Statement/Affirmation by Lobbyis I have read RSA 15, RSA 15-B, RSA 14-C and complete to the best of my knowledge a	and RSA 664 and hereby	swear or affirm that the fo	regoing information is tru
(Sknature of lobbyist)		(Date	<u>,                                      </u>
Kristv Merrill		(Date)	,
(Print Name of Johnviet)			

## P L E A S E P R I N

## STATE OF NEW HAMPSHIRE

#### **Lobbyists Fees and Expenses** Addendum A

(RSA Chapter 15:6)



in a), of \$25 or less.

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

II. Name of lobbyist's partnership, firm or corporation, if any:	
New Hampshire Bankers Association	
(Name of partnership, firm or corporation)	. <u>-</u>
III. Name of Client New Hampshire Bankers Association	7/19/2024
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 granteduced by any expenses:	t relations, or public relations services oss fee amount reported shall not be
a) Total of all fees received in this reporting period	<sub>a) \$</sub> 85,349.88
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.	a) \$ 85,349.88 b) \$ 0.00
c) Total of all fees received to date (Add lines a and b)	o) \$_158,506.92
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$0.00
V. Expenses:  Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to repfecs. Separate reports are to be filted for expenditures made relative to each at 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 exindividual 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.	client and if expenditures are made by may be filed for the lobbyist(s)/firm e aggregate total of all expenses paid expenses; (b) the aggregate total of all le: meals purchased during a business ss than \$10 that is given to the person ed 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 er than \$25, but not greater than \$50 hexpense 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.	a) \$ 57,662.14
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) \$ 0.00

<sub>c)\$</sub> 18,000.00

d) Total expenses for this reporting period (Add lines a, b and c)	<sub>d) \$</sub> 75,662.14
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 of all expenses year to date  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.	<sub>f)\$</sub> 135,771.73
Paid to: Gallagher, Callahan & Gartrell, PC quarterly	Amount: \$ 18,000.00
(monthly \$6,000) lobbying retainer paid	\$
by New Hampshire Bankers Association	\$
	\$ \$
	\$
Sworn Statement/Affirmation by Lobbyist  I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affir is true and complete to the best of my knowledge and belief.  (Signature of lobbyist)	7/19/2024
Kristy A. Merrill	
(Print Name of lobbyist)	



# STATE OF NEW HAMPSHIRE

Lobbyists Report of Political Contributions Addendum C (RSA Chapter 15:6)

I. Name of Lobbyist(s) Krist	y A. Merrill	<del></del>	
II. Name of lobbyist's part	aership, firm or cor	rporation, if any:	
New Hampshire Banke	<del>-</del> ·	,	
	rship, firm or corporation)		·
III. Name of Client New H	ampshire Banker	s Association	Date 7/19/2024
Political Contributions			
For each political contribution client/lobbyist and lobbying	on that is reportable firm, indicate the fo	pursuant to RSA Cha bllowing:	apter 664 paid on behalf of the
<del></del>	<u> </u>		
Full name of candidate:	Birdsell	Regina	
	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$ 52	.05 <sub>c</sub>	Office Candidate is Seek	nn NH Senate
Full constitution of an Italy			
Full name of candidate:	(Last Name)	(First Name)	(Middle Name/Initial)
			eeking
If the contribution is an in-kind actual cost of the in-kind contribution are an estimated value and the	contribution, provide bution on the line abo	a description of the goo	ods or services provided, and enter the bution. If the actual cost is not known,
Full name of candidate:	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution S		Office Candidate is Se	•

If the contribution is an in-kind contribution, provide a descractual cost of the in-kind contribution on the line above for a enter an estimated value and the word "estimate."	iption of the goods or services provided, and enter the mount of contribution. If the actual cost is not known,
(If more than three contributions were made, report additional contribution Sworn Statement/Affirmation by Lobbyist	ibutions on separate addendum C forms.)
I have read RSA 15, RSA 15-B and RSA 664 and herel is true and complete to the best of my knowledge and b	by swear or affirm that the foregoing information elief.
Du & Men	7/19/2024
(Signature of lobbyist)  Kristy A. Merrill  (Print Name of lobbyist)	(Date)

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## 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.

(Print Name of lobbyist)

Sworn Statement/Af Statement of Income	firmation by Lobbyis e and Expenses for:	t		
Name of Lobbying part	nership, firm, or corporat	tion: New Hampsh	nire Bankers As	ssociation
Name of Lobbying partnership, firm, or corporation: New Hampshire Bankers Association Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to particular client):				
Date of Report (check	one):			
April 24, 2024 🛘	July 31, 2024	October 30, 2024 🗆	January 29, 2025	
	SA 15-B, RSA 664, the ims submitted with that			
Addendum A(s	). <b>X</b>			
Addendum B(s	)			
Addendum C(s	). X			
	n that the foregoing info my knowledge and belief		nt and each Addend	um is true and
Come Mi		<u>- 7/1</u>	19/2024	
(Signature of lobbyist)			(Date)	
Ryan Hale				