

STATE OF NEW HAMPSHIRE

2021 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

PLEASE PRINT

I. Name of Lobbyist(s)					
II. Name of lobbyist's p	artnership, firm	or corporation, if	any:		
(Name	of partnership, firm	or corporation)			
125 Washington	Street, Sui	te 1 Foxbor	· O	N 4 A	2222
Dusiness Address: (Street	1	(Town/City)		MA	02035
(508) 698-4994 (ext. 201	(verill city)		(State)	(Zip Code)
(Telephone)	()	e-m	ail Kbourqu	e@phrma.org
_		- file separate repo re not attributable	orts for each client to any one client	. <i>)</i> .	y file a separate report for
All reportable transact	tions occurring in	the months prior to	the renorting dou	n matual	
Pharmaceutical	Research	and Manufe	o die reporting date	e relative to the	following client:
Œ	ull Name of Client	and Manua	acturers of	America	
		as it appears on the Lo			
All reportable transacti in related to any particular	ons by the lobbyi client.	st (including the lob	obyist's family), or	r the lobbying	firm listed below which are
Reports cover: activity fr	pril 28, 2021 🗾 om date of registra	lion to 3/31/2]	July 28. : activity from 4/1.		
0	ctober 27, 2021	J		26, 2022	
	ity from 7/1/21 to 9		activity from 10/	/1/21 to 12/31/21	
/. There have been no: [This box is checked, comp late House, Room 204, Co	fees received ai lete just this form ncord, NH 03301	nd no reportable and submit it to the	transactions ma e Secretary of Stat	ade since the e's Office, 107	last report. North Main Street,
1. Check if additional re	oorts are attache	d:			
If you have received fee	es or made expens	ditures von must Gt	e Addendum A	Food or J C	
pense Reimbursement	oranimit of termo	ursea expenses, you	must file Addend	dum B– Repor	t of Honorariums or
'If you, your firm, or you	r family has mad	e political contribut	tions, you must file	c Addendum (C- Political Contributions
vorn Statement/Affirmat ave read RSA 15, RSA 15 a complete to the best of it	ion by Lobbyist -B, RSA 14-C an	d RSA 664 and how	chy swon M		
i complete to the best of it	y knowledge and	belief.			
ignatura pi lophyist)			4	26/4	
evin Bourque			•	26/21 (Date)	
rint Name of lobbyist)		 ,			
					RECEIV

APR 27 2021

NEW HAMPSHIRE DEPARTMENT OF STATE

PLEASE PRINT

STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s) Kevin Bourque	
II. Name of lobbyist's partnership, firm or corporation, if any:	
(Name of partnership, firm or corporation)	
III. Name of Client Pharmaceutical Research and Manufacturers of Ame	rica Date 4/19/2021
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 grand reduced by any expenses:	relations, or public relations service oss fee amount reported shall not b
a) Total of all fees received in this reporting period	_{a) \$} <u>799.61</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)	a) \$ 799.61 b) \$ 0.00 ear)
c) Total of all fees received to date (Add lines a and b)	c) \$ 799.61
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 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 exindividual expenses where the expenditure was of \$25.00 or less (for example hunch 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 reportance 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 greater 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 be may be filed for the lobbyist(s)/firm e aggregate total of all expenses par expenses; (b) the aggregate total of a le: meals purchased during a busines so than \$10 that is given to the person and with a value of \$25.00 or less); are porting period of greater than \$25.00 for the of greater than \$25, purchase of the of greater than \$25, purchase of the expense reimbursement, or politic
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, 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
	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)	d) \$ 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) \$ 0.00	
f) Total of all expenses year to date	0.00	
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from leperiod, including by whom paid or to whom charged.	obbying fees during this reporting	
Paid to:	Amount:	
N/A	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
Sworn Statement/Affirmation by Lobbyist		
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm is true and complete to the best of my knowledge and belief.	n that the foregoing information	
CAA	4/26/21	
(Signature of Lybbyist) Kevin Bourque	(1)310)	
(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.

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:
Name of Lobbying partnership, firm, or corporation: Kevin Bourque
Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to an particular client): Pharmaceutical Research and Manufacturers of America
Date of Report (check one):
April 28, 2021 July 28, 2021 October 27, 2021 January 26, 2022
I have read RSA 15, RSA 15-B, RSA 664, the Statement of Income and Expenses described above, and the following Addendums submitted with that Statement (insert the number of Addendum forms being submitted):
1 Addendum A(s).
O: Addendum B(s).
O: Addendum C(s).
I hereby swear or affirm that the foregoing information on the Statement and each Addendum is true and complete to the best of my knowledge and belief.
(Signature of lobbyist) (Signature of lobbyist) (Date)
Kevin Bourque
(Print Name of lobbyist)