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

### PLEASE PRINT

I. N	ame of Lobbyist(s	Jim Merrill,	Kath	y Corey-Fox		
		partnership, firm				
Be	ernstein Shui	r				
	•	ne of partnership, firm	_			
67	0 P	.O. Box 11	20	Manchester	NH	03105-1120
Busi	iness Address: (Str	,		(Town/City)	(State)	(Zip Code)
(	<sub>)</sub> 603-623	3-8700	) [	603-623-7775 (Fax)	e-mail	bernsteinshur.com
	(Telephone)			(Fax)		
						y file a separate report for
rep	ortable expense tr	ansactions which a	re not	attributable to any one c	lient).	
•	All reportable trans	sactions occurring in	the m	onths prior to the reporting	g date relative to the	e following client:
H	arbor Car	е				
			as it a	opears on the Lobbyist Registr	ration Form)	
OF			'			
	All reportable trans elated to any partic		ist (inc	cluding the lobbyist's famil	ly), or the lobbying	firm listed below which are
**7	Data of Damant		П	To	h. 21, 2024	
	Date of Report orts cover: activity	April 24, 2024 from date of registrate			ily 31, 2024 com 4/1/24 to 6/3 <u>0/24</u>	
_		October 30, 2024	1		ıry 29, 2025	
	act	ivity from 7/1/24 to 9/.	30/24	activity from	10/1/24 to 12/31/24	
<b>v.</b> '	There have been	no fees received	and n	o reportable transactio	ons made since tl	he last report.
		complete just this for 4, Concord, NH 033		submit it to the Secretary	of State's Office, 1	07 North Main Street,
VI.	Check if addition	al reports are attac	hed:			
7	If you have receive	ed fees or made exp	enditu	res, you must file Addendt	am A-Fees and Ex	kpenses
Exp	If you have paid a pense Reimburseme		nburse	ed expenses, you must file	Addendum B– Re	port of Honorariums or
	1		ade p	olitical contributions, you r	must file <b>Addendu</b>	m C-Political Contributions
	90					
_						
		irmation by Lobby SA 15-B, RSA 14-0		RSA 664 and hereby swear	or affirm that the f	oregoing information is true
		st of my knowledge		elief.		
	/s/ Jim Merril			10	0/25/2024	
	gnature of lobbyist	)			(Dat	e)
Ji	m Merrill				1	DECENT -
(Pr	int Name of lobbyi	st)				RECEIVED
						OCT 30 2024

NEW HAMPSHIRE DEPARTMENT OF STATE



### Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

(Name of partnership, firm or corporation)	
III. Name of Client Harbor Care	<sub>Date</sub> 10/25/2024
IV. Fees Received Indicate the gross amount of all fees received from the client identified a to lobbying, including fees for services such as public advocacy, govern including research, monitoring legislation, and related legal work. The reduced by any expenses:	ment relations, or public relations service
a) Total of all fees received in this reporting period	a) \$ 10,000
b) Total of all fees received this calendar year, prior to this reporting per (This should equal the total of all prior monthly reports for this calendary).	
c) Total of all fees received to date (Add lines a and b)	c) \$ 22,500
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 fees. Separate reports are to be filed for expenditures made relative to the lobbyist(s)/firm that are unrelated to any one client a separate reports are to be reported in one of three categories of expenses: (a during the reporting period for salaries, benefits, support staff, and office.)	each client and if expenditures are made boort may be filed for the lobbyist(s)/firma) the aggregate total of all expenses pa

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.

Jim Merrill Kathy Corey-Fox

a) Total	aggregate	e expenses f	or this repo	rting period	d for sala	aries, l	enefits,
support :	staff, and	office expen	ises, relåted	directly or	indirec	tly to l	obbying.

b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.

<sub>b) \$</sub> 0.00 c) \$ 0.00

a) \$ 7,500(see attachment)

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) \$ 7,500
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) \$ 15,000
f) Total of all expenses year to date	<sub>f)\$</sub> 22,500
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from leading period, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
<u> </u>	\$
	\$
	\$
	\$
	\$
	\$
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.	m that the foregoing information
/s/ Jim Merrill	10/25/2024
(Signature of lobbyist)	(Date)
Jim Merrill	
(Print Name of lobbyist)	

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# \*Attachment to Addendum A. Section V

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,

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

I. Name of Lobbyist(s) Kat	ny Corey-Fox		
II. Name of lobbyist's part	: nership, firm or co	rporation, if any:	
Bernstein Shur		•	
	ership, firm or corporation)	·	
III. Name of Client Harbo	r Care <sup>¹</sup>		<sub>Date</sub> 10/25/2024
Political Contributions For each political contribut client/lobbyist and lobbying	ion that is reportable	pursuant to RSA Chap ollowing:	ter 664 paid on behalf of the
Full name of candidate:	riends of Do	ug Thomas	
	(Last Name)	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(Middle Name/Initial)
Amount of contribution \$ 50	<u></u>	Office Candidate is Seekii	ng
If the contribution is an in-kin actual cost of the in-kind contrenter an estimated value and the	ibution on the line abo	e a description of the good ove for amount of contribu	is or services provided, and enter the ation. If the actual cost is not known,
	;		
Full name of candidate:		Elect House F	Republicans
Amount of contribution \$ 10	(Last Name) 00.00	(First Name)  Office Candidate is See	(Middle Name/Initial)  State Representatives
If the contribution is an in-kine actual cost of the in-kind contrenter an estimated value and the	ibution on the line abo	e a description of the good ove for amount of contribu	ls or services provided, and enter the actual cost is not known,
Full name of candidate:			
	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$		Office Candidate is Seel	king

If the contribution is an in-kind contribution, provide a desc actual cost of the in-kind contribution on the line above for enter an estimated value and the word "estimate."	cription of the goods or services provided, and enter the amount of contribution. If the actual cost is not known,
(If more than three contributions were made, report additional con	tributions on separate addendum C forms.)
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and here is true and complete to the best of my knowledge and	
/s/ Kathy Corey-Fox	10/25/2024
(Signature of lobbyist)	(Date)
Kathy Corey-Fox (Print Name of lobbyist)	

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

I. Name of Lobbyist(s) Jim	Merrill	- <u></u>	
II. Name of lobbyist's partn	ership, firm or co	orporation, if any:	
Bernstein Shur	7		
	rship, firm or corporation	)	<del></del>
III. Name of Client Harbor	Care <sub>.</sub>		Date 10/25/2024
Political Contributions For each political contribution client/lobbyist and lobbying			ter 664 paid on behalf of the
Full name of candidate: Bi	Il Ganon (Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$ 10	0.00	Office Candidate is Seekin	State Senate
	bution on the line ab		s or services provided, and enter the tion. If the actual cost is not known,
Full name of candidate:	hn Stephei	n	
	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$ 20	0.00	Office Candidate is Seel	Executive Council
If the contribution is an in-kind actual cost of the in-kind contri enter an estimated value and the	bution on the line ab	de a description of the good pove for amount of contribu	s or services provided, and enter the tion. If the actual cost is not known,
	·		<del></del>
Full name of candidate:	David	Rochefort	
4.4	(Last Name) 0.00	(First Name)	(Middle Name/Initial)

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

II. Name of lobbyist's partnership, firm or corporation  (Name of partnership, firm or corporation)  III. Name of Client  Harbor Care  Political Contributions  For each political contribution that is reportable purclient/lobbyist and lobbying firm, indicate the following firm, indicate the following firm (Last Name)  Amount of contribution \$ 100.00 Office	Date 10/25/2024  Date 10/25/2024  Date 10/25/2024
(Name of partnership, firm or corporation)  III. Name of Client Harbor Care  Political Contributions  For each political contribution that is reportable pur client/lobbyist and lobbying firm, indicate the follow  Full name of candidate:  Dan Innis  (Last Name)	ursuant to RSA Chapter 664 paid on behalf of the owing:  (First Name) (Middle Name/Initial)
Political Contributions For each political contribution that is reportable pur client/lobbyist and lobbying firm, indicate the followard formula for the following firm in the followard formula for the following firm in the followard formula for the following firm in the following firm	ursuant to RSA Chapter 664 paid on behalf of the owing:  (First Name) (Middle Name/Initial)
Political Contributions For each political contribution that, is reportable pur client/lobbyist and lobbying firm, indicate the followard forms  Full name of candidate:  Dan Innis  (Last Name)	ursuant to RSA Chapter 664 paid on behalf of the owing:  (First Name) (Middle Name/Initial)
Political Contributions For each political contribution that, is reportable pur client/lobbyist and lobbying firm, indicate the followard forms  Full name of candidate:  Dan Innis  (Last Name)	(First Name) (Middle Name/Initial)
(Last Name)	(First Name) (Middle Name/Initial) Fice Candidate is Seeking State Senate
Amount of contribution \$ 100.00 Office	Tice Candidate is Seeking State Senate
If the contribution is an in-kind contribution, provide a dactual cost of the in-kind contribution on the line above tenter an estimated value and the word "estimate."	description of the goods or services provided, and enter t
Full name of candidate: Tim Lang	
(Last Name)	(First Name) (Middle Name/Initial)  State Senate
If the contribution is an in-kind contribution, provide a d actual cost of the in-kind contribution on the line above f enter an estimated value and the word "estimate."	description of the goods or services provided, and enter t for amount of contribution. If the actual cost is not know
Full name of candidate: Howard	Pearl

Additional Contribution - \$1,000 to h	Celly Avotte for Governor
7 Idalia de la	telly Ayotte for Governor
(If more than three contributions were made, report addition	onal contributions on separate addendum C forms.)
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 are is true and complete to the best of my knowledge	nd hereby swear or affirm that the foregoing information ge and belief.
/s/ Jim Merrill	10/25/2024
(Signature of lobbyist)	(Date)
Jim Merrill	
(Print Name of lobbyist)	<del></del>

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."