STATE OF NEW HAMPSHIRE

2019 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

RECEIVED

APR 2 1 2020

NEW HAMPSHIRE

DEPARTMENT OF STATE

PLEASE PRINT J. Sculley I Name of Labbridge Robert

1. I tame of Loody	31(3) 11010011	<u>Juney</u>	
11. Name of lobbyis	st's partnership, firm or corporation, if	anv:	
Energy	Marly ters associat		as hund
7,6	Name of partnership, firm or corporation)	AUM	Comre.
19 Ne	nnitar Street, Con	cord NH D3301	
Business Address: (Street) (Town/City)	(State)	(Zip Code)
(COB 415-	8330 (603 <u>415-83</u> (Fa)	e-mail 1.) Sculley @	energymarketors association NH.com
III. This statement reportable expense	covers: (Choose one – file separate repo transactions which are not attributable	orts for each client. OR you may file	separate report for
All reportable tra	ansactions occurring in the months prior to	the reporting date relative to the follow	wing client;
Ene	ray marketors Associat	twon of New Hamach	100
OP	Tay Marketers Associated Name of Client as it appears on the Lo	obbyist Registration Form)	<i>I.</i> C
OR All reportable training unrelated to any part.	nsactions by the lobbyist (including the lob icular client.	bbyist's family), or the lobbying firm li	sted below which are
	¥_/		
IV. Date of Report Reports cover: act	April 24, 2019 💢 ivity from date of registration to 3/31/19	July 31, 2019	
	October 30, 2019 activity from 7/1/19 to 9/30/19	January 29, 2020 [] activity from 10/1/19 to 12/31/19	
V. There have bee If this box is checked, Concord, NH 03301.	n no fees received and no reportable complete just this form and submit it to th	e transactions made since the last he Secretary of State's Office, State Hot	report. use, Room 204.
VL-Check if addition	nal reports are attached:		
	ved fees or made expenditures, you must f	ile Addendum A - Fees and Expenses	
☐ If you have paid : Expense Reimbursem	an honorarium or reimbursed expenses, yo	ou must file Addendum B- Report of F	lonorariums or
If you, your firm,	or your family has made political contribu	utions, you must file Addendum C- Po	olitical Contributions
	6		
have read RSA 15, I	ffirmation by Lobbyist RSA 15-B, RSA 14-C and RSA 664 and ho হ্বা of my knowledge and belief.	creby swear or affirm that the foregoing	g information is true
Variat)	rus	4-14-2	,
(Signature of loobyis	1)	. <u>リー1</u> ソーナン (Date)	•
Resider	555000		
Print Name of John	ier)		



STATE OF NEW HAMPSHIRE

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

I. Name of Lobbyist(s) <u>Rob</u> (
II. Name of lobbyist's partner	ship, firm or corp	oration, if any:	
Energy Marketers As	SSOCIATION O ip, firm or corporation)	f New Hampsh	nire.
III. Name of Client Every N	lurketers Assoc	iation of NH	Date
Political Contributions For each political contribution client/lobbyist and lobbying fir	that is reportable I	oursuant to RSA Chap	
		• • • • • • • • • • • • • • • • • • • •	
Full name of candidate:	THE.	STIVE F	PAC
	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$5	00, W	Office Candidate is	s Seeking
		e for amount of contribu	ation. If the actual cost is not known
enter an estimated value and the v			
Full name of candidate:		(First Name)	
Full name of candidate:	(Last Name)		
Full name of candidate: Amount of contribution \$ If the contribution is an in-kind contribution in in-kind contribution is an in-kind contribution in in-kind contribution i	(Last Name) ontribution, provide	Office Candidate is	(Middle Name/Initial) s Seeking ds or services provided, and enter the
Full name of candidate: Amount of contribution \$ If the contribution is an in-kind coactual cost of the in-kind contribu	(Last Name) ontribution, provide tion on the line aboverd "estimate."	Office Candidate is a description of the good we for amount of contribution	(Middle Name/Initial) s Seeking ds or services provided, and enter the ution. If the actual cost is not known
Full name of candidate: Amount of contribution \$ If the contribution is an in-kind coactual cost of the in-kind contribuenter an estimated value and the v	(Last Name) ontribution, provide	Office Candidate is	(Middle Name/Initial) s Seeking ds or services provided, and enter the ution. If the actual cost is not known (Middle Name/Initial)

If the contribution is an in-kind contribution, provide a description actual cost of the in-kind contribution on the line above for amount enter an estimated value and the word "estimate."	of the goods or services provided, and enter the of contribution. If the actual cost is not known,
(If more than three contributions	
(If more than three contributions were made, report additional contributions	s on separate addendum C forms.)
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swe is true and complete to the best of my knowledge and belief.	ar or affirm that the foregoing information
(Signature of lopopyist)	4-14-20
ROBERT T. STALLEY	(Date)
(Print Name of lobbyist)	

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PLEASE PRIN

STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

1. Name of Lobbyist(s) Robert J Sculley				
II. Name of lobbyist's partnership, firm or corporation, if any: Energy Maketers association of New (Name of partnership, firm or corporation)	Hampshiee			
III. Name of Client <u>Frergy Marketers association</u> of N				
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:	t relations, or public relations services			
a) Total of all fees received in this reporting period	a)s 2,850.00			
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) \$			
c) Total of all fees received to date (Add lines a and b)	c) \$			
 d) Indicate the amount of any such fees that are due, but have not yet been paid 	d) \$ 2, 850.00			
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) \$			
o) Total aggregate of expenditures during this reporting period, not reported n a), of \$25 or less.	b) \$			

c) \$ ____

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) \$
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) \$
f) Total of all expenses year to date	ns
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:
	\$
	s_
	s
	\$
	\$
	\$
·	
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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 is true-and complete to the best of my knowledge and by the	that the foregoing information
to the best of my knowledge and belief.	mer are rotogoing information
(Signature of lobbyist)	4-14-20
\cap \parallel \cup	(Date)
(Print Name of lobbyist)	