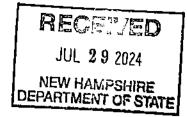


STATE OF NEW HAMPSHIRE 2024 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)



PLEASE PRINT

I. Name of Lobbyist(s) Elizabe	th C. Sargent		
II. Name of lobbyist's partnership	, firm or corporation, if an	y:	
Sheehan Phinney Capitol Gro	tın		
	ip, firm or corporation)		
Two Eagle Square	Concord	NH	03301
Business Address: (Street)	(Town/City)	(State)	(Zip Code)
(603) 228-2370		email esargent@sheel	nan.com
(Telephone)	(Fax)		
III. This statement covers: (Choos reportable expense transactions w All reportable transactions occur	hich are not attributable t	o any one client).	
NH Funeral Directors Associa	ation		
(Full i	Name of Client as it appears	on the Lobbyist Registration Fo	m)
OR ☐ All reportable transactions by to unrelated to any particular client.	he lobbyist (including the lo	bbyist's family), or the lobbying	firm listed below which are
IV. Date of Report April 24, 2 Reports cover: activity from date of October 30 activity from 7/1	f registration to 3/31/24 , 2024	July 31, 2024 ⊠ activity from 4/1/24 to 6/30/24 January 29, 2025 □ activity from 10/1/24 to 12/3 i	
V. There have been no fees receive If this box is checked, complete just t Concord, NH 03301.	d and no reportable trans his form and submit it to the	actions made since the last rep e Secretary of State's Office, Stat	ort. House, Room 204,
☐ If you have paid an honora Expense Reimbursement	r made expenditures, you mail rium or reimbursed expense	nust file Addendum A- Fees and is, you must file Addendum B- ntributions, you must file Adder	Report of Honorariums or
Sworn Statement/Affirmation by I I have read RSA 15, RSA 15-B and the best of my knowledge and belief Eliabeth C Largent	obbyist RSA 664 and hereby swear	July 31, 2024	rmation is true and complete to
(Signature of lobbyist)		(Date)	
Elizabeth C. Sargent (Print Name of lobbyist)			



STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

P	I. N	iame of Lobbyist(s) Elizabeth C. Sargent				
L E	11,	Name of lobbyist's partnership, firm or corporation, if any:				
A	Sh	eehan Phinney Capitol Group				
(Name of partnership, firm or corporation)						
E	III.	Name of Client NH Funeral Directors Association	Date <u>July 31, 2024</u>			
P			-			
R						
I N T	Ind incl	IV. Fees Received Indicate the gross amount of all fees received from the client identified above that are related, directly or indirectly, to lobbying, including fees for services such as public advocacy, government relations, or public relations services including research, monitoring legislation, and related legal work. The gross fee amount reported shall not be reduced by any expenses:				
	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 b) \$ 10,000.00 (This should equal the total of all prior monthly reports for this calendar year)					
	c)	Total of all fees received to date (Add lines a and b)	c) \$ <u>10,000.00</u>			
	d)	Indicate the amount of any such fees that are due, but have not yet been paid	1 d) \$			
	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) b)	Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying. Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	a) \$ 6,173.00 b) \$			
	c)	Total of all itemized expenditures reported in detail in section VI	2 (0			

d)	Total expenses for this reporting period (Add lines a, b and c)	d) \$ 6,173.00			
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>6,111.00</u> nt)			
f)	Total of all expenses year to date	F) \$ <u>12,284.00</u>			
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from lobbying fees during this reporting period, including by whom paid or to whom charged.					
Paid	l:	Amount:			
		s			
		\$			
_		\$			
		\$			
		\$			
		S			
S.w.	orn Statement/Affirmation by Labbuist				
Sworn Statement/Affirmation by Lobbyist					
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm that the foregoing information is true and complete to the best of my knowledge and belief.					
	Mideth C baseint July nature of lobbyist) July	731, 2024 (Date)			
	zabeth C. Sargent nt Name of lobbyist)				