STATE OF NEW HAMPSHIRE

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

PLEASE PRINT

Name of Lobbyist(s) James Bu	inen		· · · · · · · · · · · · · · · · · · ·
. Name of lobbyist's partnership, fir	m or corporation, if any:		
Sight Line Public Affairs			
(Name of partnership, fi	_		
PO Box 97	Concord	NH NH	03302
usiness Address: (Street)	(Town/City)	(State)	(Zip Code)
) 603-686-3909	()	_{e-mail} jamie@s	sight-line.us
(Telephone)	(Fax)		•
II. This statement covers: (Choose or			file a separate report
eportable expense transactions which	h are not attributable to any o	ne client).	•
All reportable transactions occurring	in the months prior to the repo	rting date relative to the	following client:
American Property Ca	· .		
	ient as it appears on the Lobbyist R		· · · · · · · · · · · · · · · · · · ·
)R	ient as it appears on the Lobbyist N	egistiation Form)	• •
All reportable transactions by the lob	byist (including the lobbyist's	family), or the lobbying	firm listed below which
nrelated to any particular client.			
		T-1-21-2024	
V. Date of Report April 24, 20 Reports cover: activity from date of regist		July 31, 2024 ity from 4/1/24 to 6/30/24	
October 30, 20		anuary 29, 2025	•
activity from 7/1/24 to		from 10/1/24 to 12/31/24	
V. There have been no fees receive	ad and no vanavtable trong	ations made singe th	a last report
f this box is checked, complete just this			
State House, Room 204, Concord, NH 0			
VI. Check if additional reports are at	tached:		
If you have received fees or made e		endum A – Fees and Exp	penses
If you have paid an honorarium or i	eimbursed expenses, you must	file Addendum B- Rep	ort of Honorariums or
Expense Reimbursement	41.4 4 2 45 .4		
If you, your firm, or your family ha	s made political contributions,	you must file Addendun	n C- Political Contribu
Sworn Statement/Affirmation by Lob	hviet		
I have read RSA 15, RSA 15-B, RSA 1		wear or affirm that the fo	regoing information is
and complete to the best of my knowled	ge and belief.		
Jans V Smoth III		10/28/24	
(Signature of lobbyist)		(Date)
James Burnett			
(Print Name of lobbyist)			

RECEIVED

OCT 2 9 2024

NEW HAMPSHIRE DEPARTMENT OF STATE

P L E A S E P R I N



STATE OF NEW HAMPSHIRE Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

Sight Line Public Affairs	
(Name of partnership, firm or corporation)	
III. Name of Client American Property Casualty Insurance As	soc _{Date} 10/28/24
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 greduced by any expenses:	relations, or public relations ser oss fee amount reported shall no
a) Total of all fees received in this reporting period	_{a) \$} 9,000
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 y	a) \$ 9,000 b) \$ 18,000
c) Total of all fees received to date	27 000
(Add lines a and b)	_{c)\$} 27,000
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to reffees. Separate reports are to be filed for expenditures made relative to each 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 examplunch 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 lobbied (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 greater restaurant expenses for a legislative reception). Expenses for honorariums contributions will be reported on separate addendums and should not be reported.	chient and if expenditures are many be filed for the lobbyist(s), aggregate total of all expenses expenses; (b) the aggregate total ele: meals purchased during a busts than \$10 that is given to the ped with a value of \$25.00 or less) orting period of greater than \$25.00 purchase or than \$25, but not greater than \$25, but not greater than expense reimbursement, or pol
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying. b) Total aggregate of expenditures during this reporting period, not reported	a) \$ 9,000
support staff, and office expenses, related directly or indirectly to lobbying.	a) \$ 9,000 b) \$

d) Total expenses for this reporting period (Add lines a, b and c)	_{d)\$} 9,000
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) \$ 18,000
f) Total of all expenses year to date	_{1) \$} 27,000
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from I 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
Jana & Brust Al	10/28/24
(Signature of lobbyist)	(Date)
James Burnett	,
(Print Name of lobbyist)	