

## STATE OF NEW HAMPSHIRE 2018 Statement of Income and Expenses for LOBBYISTS

(RSA Chapter 15)

## RECEIVED

APR 2 6 2018

		NEW HAMPSHIRE
I. Name of Lobbyist(s)	James P. Monahan ; Kathryn M. Horga	n DEPARTMENT OF STATE
II. Name of lobbyist's	partnership, firm or corporation, if any:	
The Dupont Group		
(Name of partnership, firm or	corporation)	
	01 Concord, NH 03301	
Business Address: (Street) (To	own/City) (State) (Zip Code)	
(603 )228-3322	(603) 228-0713	e-mail jmonahan@dupontgroup.com
(Telephone)	(Fax)	
_	which are not attributable to any one client) associations occurring in the month prior to the re-	
New England Tower C	(Full Name of Client as it appears on	the Lobbyist Registration Form)
OR		
All reportable transa to any particular client.	actions by the lobbyist (including the lobbyist	s family), or the lobbying firm listed below which are unrelated
IV. Date of Report	April 25, 2018 X	July 25, 2018
	activity from date of registration to 3/31/18	activity from 4/1/18 to 6/30/18
	October 31, 2018	January 30, 2019
	activity from 7/1/18 to 9/30/18	activity from 10/1/18 to 12/31/18
	fees received and no reportable transaction omplete just this form and submit it to the Section 1.	ns made since the last report.   retary of State's Office, State House, Room 204, Concord, NH
VI. Check if additional  If you have received	l reports are attached: fees or made expenditures, you must file Add	lendum A- Fees and Expenses
If you have paid an Reimbursement	honorarium or reimbursed expenses, you mus	t file Addendum B- Report of Honorariums or Expense
☐ If you, your firm, or	your family has made political contributions,	you must file Addendum C-Political Contributions.
Sworn Statement/Affir I have read RSA 15, RS best of my knowledge a	A 15-B and RSA 664 and hereby swear or aff	firm that the foregoing information is true and complete to the
17 -	and the same of th	

(Signature of lobbyist)

James P. Monahan (Print Name of lobbyist) 4/25/2018

(Date)



## STATE OF NEW HAMPSHIRE Lobbyist Fees and Expenses Addendum A

(RSA Chapter 15:6

I Name of Labbriot(a)	
I. Name of Lobbyist(s)	
James P. Monahan; Kathryn M. Horgan	
II. Name of lobbyist's partnership, firm or corporation, if any:	
The Dupont Group	
(Name of partnership, firm or corporation)	
III. Name of Client New England Power Generators Association	<u>Date</u> 4/25/2018
IV. Fees Received  Indicate the gross amount of all fees received from the client identified above the including fees for services such as public advocacy, government relations, or public legislation, and related legal work. The gross fee amount reported shall not be received.	ublic relations services including research, monitoring
a) Total of all fees received in this reporting period	a) \$15000
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)\$0
c) Total of all fees received to date (Add lines a and b)	c)\$15000
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$0
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to report reports are to be filed for expenditures made relative to each client and if expenditures are to be filed for the lobbyist(s)/firms categories of expenses: (a) the aggregate total of all expenses paid during the resoffice expenses; (b) the aggregate total of all individual expenses where the expenses during a business lunch where the cost was \$25.00 or less, purchase the person being lobbied, purchase of a ceremonial object given to a person being itemized statement of each individual expenditure made during this reporting percovered by (a) (for example: purchase of a meal with value of greater than \$25, subject of lobbying with a value greater than \$25, but not greater than \$50, rest for honorariums, expense reimbursement, or political contributions will be reported addendum A.	ditures are made by the lobbyist(s)/firm that are in. Expenses are to be reported in one of three exporting period for salaries, benefits, support staff, and benditure was of \$25.00 or less (for example: meals of a pen with a value of less than \$10 that is given to ing lobbied with a value of \$25.00 or less); and (c) an eriod of greater than \$25.00 for any purpose not a purchase of a ceremonial object to be given to the aurant expenses for a legislative reception). Expenses
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$

b) Total aggregate of expenditures during this reporting period, not rep in a), of \$25 or less.	b) \$
c) Total of all itemized expenditures reported in detail in section VI.	c) \$
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 re-	
f) Total of all expenses year to date	f) \$
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made whom paid or to whom charged.	e from lobbying fees during this reporting period, including b
Paid to: Amount:	\$
	<u> </u>
	\$
	\$
<u> </u>	\$
	\$
Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affir best of my knowledge and belief.	
Ja The	
(Signature of lobbyist)	<u>4/25/2018</u> (Date)
James P. Monahan	
(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.

		nation by Lobbyi d Expenses for:	st					
Name of Lobbying partnership, firm, or corporation: The Dupont Group								
Name of Client	(leave bla	nk if Statement is	for the p	partnership, firm, or corpor	ration and not related t	to any particular		
client): New F	England P	ower Generators	Associa	tion				
Date of Report	(check on	e):						
April 25, 2018	X	July 25, 2018		October 31, 2018	January 30, 2019			
				ment of Income and Exper t (insert the number of Ad				
1 Addendum A	(s).							
0 Addendum B	(s).							
<u>0</u> Addendum C(	s).							
I hereby swear the best of my l			informati	ion on the Statement and e	ach Addendum is true	and complete to		
Kathyre	Hag							
(0)	4.4			4/25/2				
(Signature of lo	bbyist)			(Date)				
Kathryn M. Ho								
(Print Name of	lobbyist)							