



STATE OF NEW HAMPSHIRE

Lobbyist Fees and Expenses

Addendum A

(RSA Chapter 15:6)

Please Print

I. Name of Lobbyist(s) Judy A. Silva; Cordell A. Johnston; Barbara T. Reid; Timothy W. Fortier

II. Name of lobbyist's partnership, firm or corporation, if any New Hampshire Municipal Association

(Name of partnership, firm, or corporation)

III. Name of Client New Hampshire Municipal Association

Date: 3/31/2015

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) \$ \$44,687.46
- b) Total of all fees received this calendar year, prior to this reporting period b) \$ _____
(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) \$ \$44,687.46
- 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 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)/firms 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 expense: (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 less than \$10.00 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 greater than \$25.00, purchase of a ceremonial object to be given to the subject of lobbying with a value greater than \$25.00, but not greater than \$50.00, 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) \$ \$44,687.46
- b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less. b) \$ \$0.00
- c) Total of all itemized expenditures reported in detail section VI. c) \$ \$0.00

d) Total expenses for this reporting period (Add lines a, b, and c)	d) \$	<u> \$44,687.46</u>
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> \$0.00</u>
f) Total of all expenses year to date	f) \$	<u> \$44,687.46</u>

VI. Other Expense:

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 to:	Amount:
N/A	\$
_____	\$
_____	\$
_____	\$
_____	\$
_____	\$
_____	\$

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.



 (Signature of Lobbyist)

 April 20, 2015

 (Date)

Judy A. Silva, Executive Director

 (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.

Sworn Statement/Affirmation by Lobbyist
Statement of Income and Expenses for:

Cordell A. Johnston

Name of Lobbying partnership, firm, or corporation: New Hampshire Municipal Association

Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any particular client): _____

Date of Report (check one):

April 29, 2015 July 29, 2015 October 28, 2015 January 27, 2016

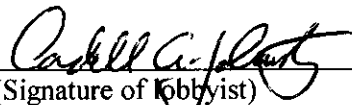
I have read RSA 15, RSA 15-B, RSA 664, the Statement of Income and Expenses described above, and the following Addendums submitted with that Statement (insert the number of Addendum forms being submitted):

X Addendum A(s).

_____ Addendum B(s).

_____ Addendum C(s).

I hereby swear or affirm that the foregoing information on the Statement and each Addendum is true and complete to the best of my knowledge and belief.



(Signature of Lobbyist)

April 20, 2015
(Date)

Cordell A. Johnston

(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.

Sworn Statement/Affirmation by Lobbyist
Statement of Income and Expenses for:

Barbara T. Reid

Name of Lobbying partnership, firm, or corporation: New Hampshire Municipal Association

Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any particular client): _____

Date of Report (check one):

April 29, 2015 July 29, 2015 October 28, 2015 January 27, 2016

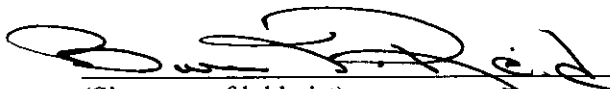
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X Addendum A(s).

_____ Addendum B(s).

_____ Addendum C(s).

I hereby swear or affirm that the foregoing information on the Statement and each Addendum is true and complete to the best of my knowledge and belief.



(Signature of lobbyist)

April 20, 2015
(Date)

Barbara T. Reid

(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.

Sworn Statement/Affirmation by Lobbyist
Statement of Income and Expenses for:

Timothy W. Fortier

Name of Lobbying partnership, firm, or corporation: New Hampshire Municipal Association

Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any particular client): _____

Date of Report (check one):

April 29, 2015 July 29, 2015 October 28, 2015 January 27, 2016

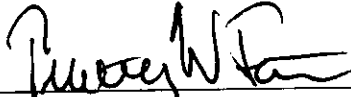
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X Addendum A(s).

_____ Addendum B(s).

_____ Addendum C(s).

I hereby swear or affirm that the foregoing information on the Statement and each Addendum is true and complete to the best of my knowledge and belief.



(Signature of lobbyist)

April 20, 2015
(Date)

Timothy W. Fortier

(Print Name of lobbyist)