STATE OF NEW HAMPSHIRE

2019 Statement of Income and Expenses for LOBBYISTS

(RSA Chapter 15)

PLEASE PRINT

I. Name of Lob	obyist(s) Madthew Si Ho	oude	
II. Name of lob	bbyist's partnership, firm or corporation, if	any:	
Darton	(Name of partnership, firm or corporation)		-
Business Address	Lical Center Orive Le S: (Street) (Town/City)	banan, NH 03756 (State) (Zip Code	′ (
603 <u>65</u>	3-1910 (W3 653- phone) (W3 653-	1906 e-mail Matthews S. Larde	10 hitchcocking
	nent covers: (Choose one – file separate rep ense transactions which are not attributabl	oorts for each client, OR you may file a separate r le to any one client).	eport for
All reportab	ole transactions occurring in the months prior t	to the reporting date relative to the following client:	
Darto	mouth-Hitchcock		
~ ~~~~	(Full Name of Client as it appears on the	Lobbyist Registration Form)	
	le transactions by the lobbyist (including the leg particular client.	obbyist's family), or the lobbying firm listed below	which are
IV. Date of Rep Reports cover:	port April 24, 2019 activity from date of registration to 3/31/19	July 31, 2019 (2019) activity from 4/1/19 to 6/30/19	
	October 30, 2019 activity from 7/1/19 to 9/30/19	January 29, 2020 ☐ activity from 10/1/19 to 12/31/19	
If this box is che	-	ole transactions made since the last report. The Secretary of State's Office, 107 North Main Stre	□ eet,
VI. Check if ad	dditional reports are attached:		
•	received fees or made expenditures, you mus	•	
☐ If you have Expense Reimb	•	you must file Addendum B- Report of Honorarium	s or
		ributions, you must file Addendum C- Political Cor	ntributions
I have read RSA	o the best of my knowledge and belief.	I hereby swear or affirm that the foregoing information $\frac{7}{600}$	on is true
Matthew	S. Houde	REC	EIVED
(Print Name of	i ioddyisi)	JUL 1	1 5 2019

NEW HAMPSHIRE DEPARTMENT OF STATE

P L E A S E P R I N T

STATE OF NEW HAMPSHIRE



Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

1. Name of Lobbyist(s) Matthew S. Houde	<u>.</u> .			
II. Name of lobbyist's partnership, firm or corporation, if any:				
Dartmouth-Hitchcock				
(Name of partnership, firm or corporation) III. Name of Client Dartmutt - Hitchcock	Date	7/11/19		
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 groreduced by any expenses:	relations, or	r public relations service		
a) Total of all fees received in this reporting period	a) \$	5,000.00		
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) \$ ear)	00.00,21		
c) Total of all fees received to date (Add lines a and b)	c) \$	<u>30,000.0</u> 0		
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 rep fees. Separate reports are to be filed for expenditures made relative to each of 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 expenditure was of \$25.00 or less (for example lunch where the cost was \$25.00 or less, purchase of a pen with a value of less being lobbied, purchase of a ceremonial object given to a person being lobbied (c) an itemized statement of each individual expenditure made during this reposition and 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 greate restaurant expenses for a legislative reception). Expenses for honorariums, contributions will be reported on separate addendums and should not be reported.	elient and if of may be filed aggregate to penses; (b) es meals pure to than \$10 to d with a valurting period e of greater than \$25, in expense rei	expenditures are made by for the lobbyist(s)/firm otal of all expenses paid the aggregate total of all echased during a business that is given to the personue of \$25.00 or less); and of greater than \$25.00 fo than \$25, purchase of abut not greater than \$50 imbursement, or politica		
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 reported in a), of \$25 or less.				
c) Total of all itemized expenditures reported in detail in section VI.	c) \$	\mathcal{O}		

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	n s
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from leading by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
	s
	\$
	\$
	\$
	\$
	\$
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm	n that the foregoing information
is true and complete to the best of my knowledge and belief.	1 ,
SA	7/4/19
(Signature of lobbyist)	(Date)
Matthews, House	
(Print Name of lobbyist)	

STATE OF NEW HAMPSHIRE

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

I. Name of Lobbyist(s)	Matthew S. House	
II. Name of lobbyist's pa	tnership, firm or corporation, if any:	
Dartmorth	-HITCHOCK	
	nership, firm or corporation)	Mulia
III. Name of Client Lys	tmouth-Hitchcock	Date
	tion that is reportable pursuant to RSA Chapter ag firm, indicate the following:	664 paid on behalf of the
Full name of candidate:	Chandley Shano (Last Name) (First Name)	(Middle Name/Initial)
Amount of contribution \$	Office Candidate is Se	eeking <u>Senator</u> (state)
	nd contribution, provide a description of the goods of tribution on the line above for amount of contribution the word "estimate."	
Full name of candidate:	Shahara Janas	
ruii name oi candidate	(Last Name) (First Name)	(Middle Name/Initial)
Amount of contribution \$ _	250 Office Candidate is Se	ceking Senator (U)
	nd contribution, provide a description of the goods of tribution on the line above for amount of contribution the word "estimate."	
Full name of candidate: _	Shurtleff Steve (First Name)	(Middle Name/Initial)
Amount of contribution \$	Office Candidate is Se	eking Representative / spe

If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter the actual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not known, enter an estimated value and the word "estimate."
(If more than three contributions were made, report additional contributions on separate addendum C forms.)
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.
7/11/19
(Signature of lobbyist) (Date)
Matthew & Harde
(Print Name of lobbyist)