

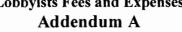
2021 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

PLEASE PRINT

RECEIVED

				,
I. Name of Lobbyist(s)	Jim Merrill and Kathy Co	orey-Fox		JUL 28 2021
II. Name of lobbyist's pa	rtnership, firm or corporation,	, if any:		NEW HAMPSHIRE DEPARTMENT OF STATE
The Bernstein Shur	Group			
(Name o	f partnership, firm or corporation)			
670 N. Commercial	Street, P.O. Box 1120, Man	chester NH 0310	5	
Business Address: (Street	(Town/Cit	ty)	(State)	(Zip Code)
603 665 8853	603 623-7773	e-m	ail jim.merrill@b	ernsteinshur.com
(Telephone)	()	(Fax)	, , , , , , , , , , , , , , , , , , ,	
reportable expense tran	rs: (Choose one – file separate r sactions which are not attributa tions occurring in the months pric	able to any one clien	t).	
	Harbor Care			
OR (I	ull Name of Client as it appears on the	he Lobbyist Registratio	n Form)	
All reportable transact unrelated to any particula	ions by the lobbyist (including the client.	e lobbyist's family),	or the lobbying firm l	isted below which are
Reports cover: activity	April 28, 2021	Januar	3, 2021 1/1/21 to 6/30/21 y 26, 2022 10/1/21 to 12/31/21	
	o fees received and no report aplete just this form and submit it Concord, NH 03301.			
VI. Check if additional	reports are attached:			
If you have received	fees or made expenditures, you m	nust file Addendum	A- Fees and Expense	S
If you have paid an h Expense Reimbursement	onorarium or reimbursed expense	es, you must file Add	lendum B– Report of	Honorariums or
If you, your firm, or	our family has made political co	ntributions, you mus	t file Addendum C-	Political Contributions
	nation by Lobbyist 15-B, RSA 14-C and RSA 664 a of my knowledge and belief.	and hereby swear or a	affirm that the foregoi	ng information is true
(Print Name of lobbyist)				

Lobbyists Fees and Expenses Addendum A



(RSA Chapter 15:6)

•	s partnership, firm or corporation, if any:	
The Bernstein Sl	·	
(Name	of partnership, firm or corporation)	1 1
III. Name of Client	Harbor Care	Date 7 27 24
o lobbying, including f	ant of all fees received from the client identified above fees for services such as public advocacy, government nitoring legislation, and related legal work. The gest:	nt relations, or public relations services
a) Total of all fees recei	ived in this reporting period	a)\$ 7,550.00
	eived this calendar year, prior to this reporting period the total of all prior monthly reports for this calendar	
c) Total of all fees rece (Add lines a and		c)\$ 15,000.00
d) Indicate the amount yet been paid	of any such fees that are due, but have not	d) \$OO
Gees. Separate reports the lobbyist(s)/firm that Expenses are to be reporting per during the reporting per dividual expenses who where the cost was being lobbied, purchase (c) an itemized statement any purpose not covere the remaining the purpose for estationary per posession of the purpose	partnerships, firms, or corporations are required to reare to be filed for expenditures made relative to each at are unrelated to any one client a separate report orted in one of three categories of expenses: (a) the riod for salaries, benefits, support staff, and office are the expenditure was of \$25.00 or less (for examples \$25.00 or less, purchase of a pen with a value of less of a ceremonial object given to a person being lobbent of each individual expenditure made during this report by (a) (for example: purchase of a meal with value given to the subject of lobbying with a value great a legislative reception). Expenses for honorarium prorted on separate addendums and should not be repo	n client and if expenditures are made by may be filed for the lobbyist(s)/firm. he aggregate total of all expenses paid expenses; (b) the aggregate total of all ple: meals purchased during a business ess than \$10 that is given to the person ied with a value of \$25.00 or less); and porting period of greater than \$25.00 for lue of greater than \$25, purchase of a ter than \$25, but not greater than \$50, s, expense reimbursement, or political

c)\$_____O.&D

b) Total aggregate of expenditures during this reporting period, not reported

c) Total of all itemized expenditures reported in detail in section VI.

in a), of \$25 or less.

d) Total expenses for this reporting period (Add lines a, b and c)	d)\$ 1,500.00
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)\$ 7,500.00 f)\$ 15,000.00
f) Total of all expenses year to date	f)\$ 15,000.00
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from leperiod, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
	\$
	\$
	\$
	\$
	\$
	\$
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.	n that the foregoing information
(Signature of lobbyist)	7/27/21 (Date)
Jim Merrill	
(Print Name of lobbyist)	

*Attachment to Addendum A, Section V

The Bernstein Shur Group is a subsidiary business of the Bernstein Shur law firm, with offices in Maine, New Hampshire and Vermont. The Group's lobbying work is only one part of a broad range of work, and the consultants involved in lobbying also perform other consulting work which is completely unrelated to lobbying. All fees for services and reimbursable expenses paid by Bernstein Shur Group clients (including lobbying clients) are deposited into the . operating revenues of the Group and/or law firm. All operating expenses of the Group are paid from operating expenses of the Group and/or law firm. Accordingly, it is impossible to determine with any more specificity how funds placed into our general operating account were later used.



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

Jim Merrill, Kathy Corey-Fox I. Name of Lobbyist(s) II. Name of lobbyist's partnership, firm or corporation, if any: E The Bernstein Shur Group S (Name of partnership, firm or corporation) E Date P III. Name of Client R **Political Contributions** For each political contribution that is reportable pursuant to RSA Chapter 664 paid on behalf of the client/lobbyist and lobbying firm, indicate the following: Charles Morse Full name of candidate: (Middle Name/Initial) (Last Name) (First Name) State Senate 100.00 Office Candidate is Seeking Amount of contribution \$ 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." NH Senate Democratic Caucus Full name of candidate: (Last Name) (First Name) (Middle Name/Initial) PAC 250.00 Amount of contribution \$ Office Candidate is Seeking 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." Full name of candidate: Ricciardi Denise (Middle Name/Initial) (Last Name) (First Name)

100.00

Amount of contribution \$

Office Candidate is Seeking

State Senate

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.
(Signature of lobbyist) \[\begin{align*} a
Jim Merrill (Print Name of lobbyist)

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

I. Name of Lobbyist(s)			
II. Name of lobbyist's pa	urtnershin, firm or cor	noration, if any:	
	_	porucion, n unj	
The Bernstein	artnership, firm or corporation)		
III Name of Client			Date
III. Name of Client			Date
Political Contributions For each political contrib client/lobbyist and lobby			ter 664 paid on behalf of the
Full name of candidate:	Hennessey	Erin	
	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$	100.00	Office Candidate i	s Seeking State Senate
Full name of candidate:	Carson	Sharon	(Middle Name/Initial)
Amount of contribution \$ _	(Last Name) 100.00	(First Name)Office Candidate is	DAC
	ontribution on the line abo		ds or services provided, and enter the ution. If the actual cost is not known,
Full name of candidate:	Bradley	Jeb	
	(Last Name)	(First Name)	(Middle Name/Initial)
	100.00		State Senate

actual cost of the 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.
(Signature of lobbyist) (Date)
Jim Merrill (Print Name of lobbyist)



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

The Bernstein S	Shur Group		
(Name of par	tnership, firm or corporation)		
III. Name of Client			Date
Political Contributions For each political contributions client/lobbyist and lobbyir			ter 664 paid on behalf of the
Full name of candidate:	Bradley	Jeb	
	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$	200.00	Office Candidate is	s Seeking State Senate
	Bradley	Jeb	
Full name of candidate: _	Bradley (Last Name)	Jeb	(Middle Name/Initial)
_	Bradley (Last Name) 250.00	(First Name)	(Middle Name/Initial) Seeking State Senate
Amount of contribution \$ If the contribution is an in-ki actual cost of the in-kind con	(Last Name) 250.00 nd contribution, provide tribution on the line abo	(First Name) Office Candidate is a description of the good	Seeking State Senate ds or services provided, and enter th
	(Last Name) 250.00 nd contribution, provide stribution on the line about the word "estimate." Carson	(First Name)Office Candidate is a description of the good we for amount of contributions.	s Seeking State Senate ds or services provided, and enter the open on the services is not known the services are the services provided, and enter the open of the services is not known the services are the serv
Amount of contribution \$ If the contribution is an in-ki actual cost of the in-kind con enter an estimated value and	(Last Name) 250.00 Ind contribution, provide attribution on the line about the word "estimate."	(First Name) Office Candidate is a description of the good ve for amount of contributions.	· ·

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.
(Signature of lobbyist) $\sqrt{2}$ (Date)
Jim Merrill (Print Name of lobbyist)



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

I. Name of Lobbyist(s)			
II. Name of lobbyist's par	rtnership, firm or cor	poration, if any:	
The Bernstein S		,	
	rtnership, firm or corporation)	-	
III. Name of Client			Date
Political Contributions For each political contributions client/lobbyist and lobbyist			ter 664 paid on behalf of the
Full name of candidate:	French	Harold	
_	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$	50.00	Office Candidate is	s Seeking State Senate
	Ward	Ruth	
Full name of candidate: _	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$	50.00		Seeking State Senate
			
actual cost of the in-kind cor enter an estimated value and	ntribution on the line abo	a description of the good	ds or services provided, and enter the
	ntribution on the line abo the word "estimate."	a description of the good we for amount of contribu	ds or services provided, and enter the ation. If the actual cost is not known
enter an estimated value and	ntribution on the line abo the word "estimate."	a description of the good ve for amount of contribu	ds 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.
(Signature of lobbyist) 7/27/21 (Date)
(Print Name of lobbyist)
(



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

Political Contributions For each political contribution that is reportable pursuant to RSA Chapter 664 paid on behalf of the client/lobbyist and lobbying firm, indicate the following: Giuda	The Bernstein S	Shur Group mership, firm or corporation)		
Political Contributions For each political contribution that is reportable pursuant to RSA Chapter 664 paid on behalf of the client/lobbyist and lobbying firm, indicate the following: Full name of candidate: Giuda Bob (Last Name) (Last Name) (First Name) (Office Candidate is Seeking State Senate If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter tactual 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." Full name of candidate: Hennessey Erin (Last Name) (First Name) (Middle Name/Initial) Office Candidate is Seeking State Senate If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter tactual 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." Full name of candidate: Ricciardi Denise	•	•		
For each political contribution that is reportable pursuant to RSA Chapter 664 paid on behalf of the client/lobbyist and lobbying firm, indicate the following: Full name of candidate: Giuda Bob (Last Name) (First Name) (Middle Name/Initial) State Senate If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter tactual 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." Full name of candidate: Hennessey Erin (Last Name) (First Name) (Middle Name/Initial) Office Candidate is Seeking State Senate If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter tactual 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." Full name of candidate: Ricciardi Denise	III. Name of Client			Date
Amount of contribution \$ \frac{(\text{Last Name})}{50.00} \frac{(\text{First Name})}{(\text{Middle Name/Initial})} \frac{\text{State Senate}}{\text{State Senate}} \frac{(\text{Last Name})}{(\text{State Senate})} \frac{\text{State Senate}}{\text{State Senate}} \frac{(\text{Last Name})}{(\text{State Senate})} \frac{\text{State Senate}}{\text{State Senate}} \frac{(\text{Last Name})}{(\text{Last Name})} \frac{\text{First Name}}{(\text{State Senate})} \frac{(\text{Middle Name/Initial})}{(\text{Middle Name/Initial})} \frac{\text{Full name of candidate}}{(\text{State Senate})} \frac{\text{Hennessey}}{(\text{Last Name})} \frac{(\text{First Name})}{(\text{Middle Name/Initial})} \frac{\text{State Senate}}{(\text{State Senate})} \frac{\text{State Senate}}{(\text{State Senate})} \frac{\text{State Senate}}{(\text{State Name})} \frac{\text{State Senate}}{(\text{State Senate})} \frac{\text{State Senate}}{(\text{State Name})} \frac{\text{State Senate}}{(\text{State Senate})} \frac{\text{State Senate}}{(\text{State Name})} \frac{\text{State Senate}}{(\text{State Senate})} \text{State Senate	For each political contribu	• •		eer 664 paid on behalf of the
Amount of contribution \$ \frac{(Last Name)}{50.00} \frac{(First Name)}{(Office Candidate is Seeking} \frac{State Senate}{State Senate} \] If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter to 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." Full name of candidate:	Full name of candidate:	Giuda	Bob	
If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter to 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." Hennessey Erin (Last Name) (First Name) (Middle Name/Initial)		<u>`</u>	. ,	
(Last Name) (First Name) (Middle Name/Initial) Amount of contribution \$ 50.00 Office Candidate is Seeking State Senate 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 that an estimated value and the word "estimate." Full name of candidate: Ricciardi Denise	enter an estimated value and	the word "estimate."		
Amount of contribution \$ Office Candidate is Seeking State Senate If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter to actual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not known tenter an estimated value and the word "estimate." Full name of candidate: Ricciardi Denise	enter an estimated value and		C-in	
actual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not known that an estimated value and the word "estimate." Full name of candidate: Ricciardi Denise		Hennessey		
an name of canadate.	Full name of candidate: _	Hennessey (Last Name)	(First Name)	(Middle Name/Initial)
an name of canadate.	Full name of candidate: Amount of contribution \$ f the contribution is an in-kinctual cost of the in-kind con	Hennessey (Last Name) 50.00 nd contribution, provide a detribution on the line above for	(First Name) Office Candidate is escription of the goods	(Middle Name/Initial) Seeking State Senate s or services provided, and enter t
(Last Name) (First Name) (Middle Name/Initial)	Full name of candidate: Amount of contribution \$ f the contribution is an in-kinctual cost of the in-kind con	Hennessey (Last Name) 50.00 nd contribution, provide a detribution on the line above for	(First Name) Office Candidate is escription of the goods	(Middle Name/Initial) Seeking State Senate s or services provided, and enter the
Amount of contribution \$ 50.00 Office Condidate is Seeking State Senate	Full name of candidate: Amount of contribution \$ If the contribution is an in-kinactual cost of the in-kind con	Hennessey (Last Name) 50.00 Ind contribution, provide a detribution on the line above for the word "estimate."	(First Name) _Office Candidate is escription of the goods or amount of contribu	(Middle Name/Initial) Seeking State Senate s or services provided, and enter the state of the actual cost is not known.

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."
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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 Jobbyist) Jim Merrill
(Print Name of lobbyist)