

STATE OF NEW HAMPSHIRE

2025 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

PLEASE PRINT

I. Name of Lobbyist(s) James Burn	ett	
II. Name of lobbyist's partnership, fir	m or corporation, if any:	
Sight Line Public Affairs		
(Name of partnership, fir	rm or corporation)	
PO Box 97	Concord	NH 03302
Business Address: (Street)	(Town/City)	(State) (Zip Code)
, 603-686-3909	()	_{e-mail} jamie@sight-line.us
(Telephone)	(Fax)	c-man
III. This statement covers: (Choose or reportable expense transactions which		client, OR you may file a separate report for lient).
All reportable transactions occurring	g in the months prior to the reporting	date relative to the following client:
Centene Corportation on beha	lf of its affiliates and subsid	liaries
	ent as it appears on the Lobbyist Registr	ration Form)
OR		
All reportable transactions by the lob unrelated to any particular client.	byist (including the lobbyist's famil	y), or the lobbying firm listed below which are
IV. Date of Report April 30, 20 Reports cover: activity from date of registr October 29, 202 activity from 7/1/25 to	ration to 3/31/25 activity fro 25 Janua	y 30, 2025 m 4/1/25 to 6/30/25 ry 28, 2026 10/1/25 to 12/31/25
V. There have been no fees receive If this box is checked, complete just this State House, Room 204, Concord, NH 0	form and submit it to the Secretary	ons made since the last report. of State's Office, 107 North Main Street,
VI. Check if additional reports are at	tached:	
<u> </u>	xpenditures, you must file Addendu	ım A– Fees and Expenses
If you have paid an honorarium or r Expense Reimbursement	eimbursed expenses, you must file	Addendum B – Report of Honorariums or
If you, your firm, or your family ha	s made political contributions, you r	nust file Addendum C-Political Contribution
	4-C and RSA 664 and hereby swear	or affirm that the foregoing information is true
and complete to the best of my knowled	The second of th	
tans 1 Duit II	4/2 	25/2025
(Signature of lobbyist)		(Date)
James Burnett		
(Print Name of lobbyist)	 	

STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A

I. Name of Lobbyist(s)	· · · · · · · · · · · · · · · · · · ·	
II. Name of lobbyist's partnership, firm or corporat	ion, if any:	
Sight Line Public Affairs		
(Name of partnership, firm or corporation)		
III. Name of Client Centene Corporation on beha	If of its affiliates a	4/25/2025
III. I value of Cheft		Jale
IV. Fees Received		
Indicate the gross amount of all fees received from the clier to lobbying, including fees for services such as public adve including research, monitoring legislation, and related leg reduced by any expenses:	ocacy, government relat	ions, or public relations ser
a) Total of all fees received in this reporting period	a) (§ <u>24,000</u>
b) Total of all fees received this calendar year, prior to this (This should equal the total of all prior monthly reports		\$
c) Total of all fees received to date (Add lines a and b)	c) :	24,000
d) Indicate the amount of any such fees that are due, but ha yet been paid	ve not	\$
Lobbyist(s)/Lobbying partnerships, firms, or corporations afees. Separate reports are to be filed for expenditures mad the lobbyist(s)/firm that are unrelated to any one client a Expenses are to be reported in one of three categories of during the reporting period for salaries, benefits, support sindividual expenses where the expenditure was of \$25.00 clunch where the cost was \$25.00 or less, purchase of a pen being lobbied, purchase of a ceremonial object given to a p (c) an itemized statement of each individual expenditure ma any purpose not covered by (a) (for example: purchase of ceremonial object to be given to the subject of lobbying v restaurant expenses for a legislative reception). Expenses	e relative to each client a separate report may be expenses: (a) the aggrestaff, and office expenses or less (for example: me with a value of less that erson being lobbied with de during this reporting f a meal with value of with a value greater that is for honorariums, expe	and if expenditures are made filed for the lobbyist(s) regate total of all expenses es; (b) the aggregate total cals purchased during a bust is 10 that is given to the ph a value of \$25.00 or less period of greater than \$25.00 greater than \$25.00 purchases in \$25, but not greater than ense reimbursement, or po
contributions will be reported on separate addendums and sh	ould not be reported on	Addendum A.
 a) Total aggregate expenses for this reporting period for sal support staff, and office expenses, related directly or indirec 	aries, benefits, tly to lobbying. a) §	24,000
b) Total aggregate of expenditures during this reporting per	•	,

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

d) Total expenses for this reporting period	_{d)} \$ 24,000	
(Add lines a, b and c)		
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	_{f)} \$ 24,000	
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from 1 period, 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 affir is true and complete to the best of my knowledge and belief.	m that the foregoing information	
Jana & Brutt DI	4/25/2025	
(Signature of lobbyist)	(Date)	
James Burnett		
(Print Name of lobbyist)		