STATE OF NEW HAMPSHIRE

2018 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

PLEASE PRINT

I. Name of Lobb	yist(s) <u>Mary Kaysen</u>		
II. Name of lobb	oyist's partnership, firm or corporation,	if any:	
Bristol-Mye	rs Squibb Company		
	(Name of partnership, firm or corporation)		
118 Valley St	reet Beverly Farms, M.	A 01915	
Business Address:	(Street) (Town/City	y) (State)	(Zip Code)
(978) <u>232-114</u> (Telepho		e-mail <u>mary.kay</u> (Fax)	rsen@bms.com
	ent covers: (Choose one – file separate ronse transactions which are not attributa		y file a separate report for
•	e transactions occurring in the months prio	or to the reporting date relative to the	following client:
Bristol-M	yers Squibb Company	Labbelist Desistantion Forms	
<u>OR</u>	(Full Name of Client as it appears on the	ne Lobbyist Registration Form)	
	transactions by the lobbyist (including the particular client.	e lobbyist's family), or the lobbying	firm listed below which are
IV. Date of Repo	ort April 25, 2018 🗵 activity from date of registration to 3/31/18	July 25, 2018	
	October 31, 2018 activity from 7/1/18 to 9/30/18	January 30, 2019 \square activity from 10/1/18 to 12/31/1	18
	been no fees received and no reporta- eked, complete just this form and submit it 301.		
VI. Check if add	litional reports are attached:		
	eceived fees or made expenditures, you m	ust file Addendum A – Fees and Exp	penses
☐ If you have p Expense Reimbur	paid an honorarium or reimbursed expenses	s, you must file Addendum B - Rep	ort of Honorariums or
•	firm, or your family has made political cor	ntributions, you must file Addendum	n C- Political Contributions
I have read RSA and complete to t (Signature of lob	at/Affirmation by Lobbyist 15, RSA 15-B, RSA 14-C and RSA 664 and the best of my knowledge and belief. by WWW. by ist)	and hereby swear or affirm that the form $4/20/8$ (Date	oregoing information is true
Mary Kayse (Print Name of lo	en obbyist)		

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STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A

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NEW HAMPSHIRE DEPARTMENT OF STATE



(RSA Chapter 15:6)

I. Name of Lobbyist(s) Mary Kaysen	
II. Name of lobbyist's partnership, firm or corporation, if any:	
Bristol- Myers Squibb Company (Name of partnership, firm or corporation)	
III. Name of Client Bristol-Myers Squibb Company	Date April 20, 2018
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, governmen including research, monitoring legislation, and related legal work. The gr reduced by any expenses:	t relations, or public relations services
a) Total of all fees received in this reporting period	a) \$400.00
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 y	b) \$ <u>0</u> ear)
c) Total of all fees received to date (Add lines a and b)	c) \$400.00
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 ref fees. Separate reports are to be filed for expenditures made relative to each the lobbyist(s)/firm that are unrelated to any one client a separate report 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 exindividual expenses where the expenditure was of \$25.00 or less (for examp lunch where the cost was \$25.00 or less, purchase of a pen with a value of le being lobbied, purchase of a ceremonial object given to a person being lobbied (c) an itemized statement of each individual expenditure made during this report any 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 greater restaurant expenses for a legislative reception). Expenses for honorariums contributions will be reported on separate addendums and should not be reported.	client and if expenditures are made by may be filed for the lobbyist(s)/firm. e aggregate total of all expenses paid xpenses; (b) the aggregate total of all le: meals purchased during a business ss than \$10 that is given to the person ed with a value of \$25.00 or less); and orting period of greater than \$25.00 for ue of greater than \$25, purchase of a er than \$25, but not greater than \$50, expense reimbursement, or political
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$68.95
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) \$0
c) Total of all itemized expenditures reported in detail in section VI.	c) \$ 0

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$ <u>68.95</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)\$
f) Total of all expenses year to date	f) \$68.95
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from loperiod, 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	n that the foregoing information
is true and complete to the best of my knowledge and belief.	
Mary Bayser	4/20/18
(Signature of lobbyist)	(Date)
Mary Kaysen (Print Name of lobbyist)	
(1 Thit Ivaine of loodylst)	

STATE OF NEW HAMPSHIRE

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

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NEW HAMPSHIRE DEPARTMENT OF STATE

I. Name of Lobbyist(s) <u>M</u>	ary Kaysen		
II. Name of lobbyist's par	tnership, firm or cor	poration, if any:	
Bristol- Myers Squibb (Name of part	Company nership, firm or corporation)		
III. Name of Client Bristo	ol-Myers Squibb Co	mpany	Date April 20, 2018
Political Contributions For each political contributions client/lobbyist and lobbyin			oter 664 paid on behalf of the
Full name of candidate:	Friends of Chris Su		
	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$	1000.00	Office Candidate i	s Seeking Governor
Full name of candidate:	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$		Office Candidate is	s Seeking
If the contribution is an in-kir actual cost of the in-kind cont enter an estimated value and t	nd contribution, provide ribution on the line abo	a description of the good	ds or services provided, and enter the ution. If the actual cost is not known,
Full name of candidate:	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$	(====)	,	,
		Office Candidate is Seeking	