STATE OF NEW HAMPSHIRE

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

OCT 30 2025

NEW HAMPSHIRE
DEPARTMENT OF STATE

PLEASE PRINT

| I. Name of Lobbyist | (s) Sarah Scott | | | LUEPARIMENT OF |
|---|---|--|---|--|
| II. Name of lobbyist | 's partnership, firm or co | rnoration, if any: | | |
| (D) | r Prosperity New I | 10 T | | |
| | me of partnership, firm or cor | • | 750 P 10 10 10 10 10 10 10 10 10 10 10 10 10 | <u> </u> |
| 8025 s | outh Willow St Suite 205 | Manchester | NH | 03103 |
| | treet) | (Town/City) | (State) | (Zip Code) |
| (603) 31 | 5-2710 | | _{e-mail} sscott@ | afphq.org |
| (Telephone) | \\\\ | (Fax) | e-man | |
| III. This statement of | covers: (Choose one – file | separate reports for ea | ch client, OR you may | y file a separate report for |
| | transactions which are no | | | A DISTRIBUTION STATE BUSINESS ON TO VIACONISCH DOCUM |
| ✓ All reportable tra | nsactions occurring in the r | nonths prior to the renor | ting data relative to the | following aligns |
| F29 NOS 228 | 020 | ,,, | ting date relative to the | nonowing chent. |
| Americans ioi | Prosperity New I | | | |
| OR | (Full Name of Client as it a | appears on the Lobbyist Re | gistration Form) | |
| | sactions by the lobbyist (in | cluding the lobbyist's fa | mily), or the lobbying t | firm listed below which are |
| unrelated to any part | | overconstantial and a second year. Consustantial Processor Seeds | | |
| | April 30, 2025 of from date of registration to October 29, 2025 ctivity from 7/1/25 to 9/30/25 | Ja | July 30, 2025 of from 4/1/25 to 6/30/25 unuary 28, 2026 from 10/1/25 to 12/31/25 | |
| If this box is checked, | n no fees received and a complete just this form an 04, Concord, NH 03301. | | | |
| VI. Check if addition | nal reports are attached: | | | |
| If you have recei | ved fees or made expenditu | ıres, you must file Adde | ndum A-Fees and Ex | penses |
| If you have paid Expense Reimbursem | an honorarium or reimburs nent | ed expenses, you must f | ile Addendum B – Rep | ort of Honorariums or |
| If you, your firm, | , or your family has made p | political contributions, ye | ou must file Addendur | n C-Political Contributions |
| I have read RSA 15, I and complete to the b | est of my knowledge and b | pelief. | 10/30/25 | oregoing information is true |
| (Signature of lobbyis | it) | | (Date | ;) |
| Sarah Scott | | | | |
| (Print Name of lobby | rist) | | | |

PLEASE PRINT

STATE OF NEW HAMPSHIRE



Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

RECEIVED

OCT 30 2025

NEW HAMPSHIRE DEPARTMENT OF STATE

| I. Name of Lobbyist(s) Sarah Scott | |
|---|---|
| II. Name of lobbyist's partnership, firm or corporation, if any: | |
| Americans for Prosperity New Hampshire | |
| (Name of partnership, firm or corporation) | |
| III. Name of Client Americans for Prosperity New Hampshire | _{Date} 10/30/25 |
| 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 granduced by any expenses: a) Total of all fees received in this reporting period 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) c) Total of all fees received to date (Add lines a and b) d) Indicate the amount of any such fees that are due, but have not yet been paid | t relations, or public relations services oss fee amount reported shall not be a) \$\frac{1,269.12}{12,691.20}\$ |

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)/firm 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 expenses: (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 of less than \$10 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 of greater than \$25, purchase of a ceremonial object to be given to the subject of lobbying with a value greater than \$25, but not greater than \$50, 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)\$0.00 |
|---|-----------------------|
| 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 in section VI. | 0.00 |

| d) Total expenses for this reporting period | d) \$ 0.00 |
|---|---|
| (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) f) Total of all expenses year to date 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. | e) \$ 6,665.36 f) \$ 6,665.36 bibbying 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. | |
| \$ | 10/30/25 |
| (Signature of lobbyist) | (Date) |
| Sarah Scott | |
| (Print Name of lobbyist) | |

STATE OF NEW HAMPSHIRE

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

RECEIVED

OCT 30 2025

NEW HAMPSHIRE DEPARTMENT OF STATE

| I. Name of Lobbyist(s) Sara | h Scott | | DEPARTMENT |
|---|----------------------------|--------------------------|---|
| II. Name of lobbyist's parti | iership, firm or co | orporation, if any: | |
| Americans for Prosperi | tv New Hampsh | ire | |
| | rship, firm or corporation | | |
| III. Name of Client Americ | ans for Prosper | ity New Hampshire | Date 10/30/25 |
| Political Contributions For each political contributical contributical contributions and lobbying | | | pter 664 paid on behalf of the |
| Full name of candidate: St | ullivan, Victori | a | |
| | (Last Name) | (First Name) | (Middle Name/Initial) |
| Amount of contribution \$ 10 | 4.48 | Office Condidate is Sock | NH Senate |
| | | | |
| Full name of candidate: | | 77 - XI - X | 0.0111.37 |
| | | | (Middle Name/Initial) |
| Amount of contribution \$ | | Office Candidate is Se | eking |
| | ibution on the line ab | | ods or services provided, and enter the oution. If the actual cost is not known |
| Full name of candidate: | | | |
| | (Last Name) | (First Name) | (Middle Name/Initial) |
| Amount of contribution \$ | | Office Candidate is Se | aking |

| actual cost of the in-kind contribution on the line above | a description of the goods or services provided, and enter the e 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 | al contributions on separate addendum C forms.) |
| Sworn Statement/Affirmation by Lobbyist | |
| | hereby swear or affirm that the foregoing information |
| is true and complete to the best of my knowledge | and belief. |
| is true and complete to the best of my knowledge | and belief. 10/30/25 |
| (Signature of lobbyist) | |
| is true and complete to the best of my knowledge (Signature of lobbyist) Sarah Scott | 10/30/25 |