2014 Lobbyist Registration Form RSA Chapter 15



A lobbyist registration form reports the existence of a relationship between a single client and either a single lobbyist or a partnership, firm, or corporation with one or more partners, members, or employees who will be acting as lobbyists for that client. A lobbyist is a person employed in a representative capacity to promote or oppose, directly or indirectly, any legislation pending or proposed before the general court, or to promote or oppose, directly or indirectly, any action by the governor, governor and council, or any state agency, where such action concerns legislation or contracts pending or proposed before the general court, any pending administrative rule, or the procurement of goods or services that are being or may be purchased by the state. RSA 15:1: See also RSA 15:1, III (for a description of persons who fall within this definition but who are not required to register).

PLEASE PRINT:

I. Lobbyist(s) Registering

Last Name	First Name		Middle Name/I	nitial
(telephone)	()(fax)		(e-mail)	
(mailing address)		(city)	(state)	(zip code)
l occupation or primary field of bu	siness: (circle one or fill in): Lobbyist	Attorney	Other	
Last Name	First Name		Middle Name/I	nitial
(telephone)	(fax)		(e-mail)	
(mailing address)		(city)	(state)	(zip code)
l occupation or primary field of bu	siness: (circle one or fill in): Lobbyist	Attorney	Other	
Last Name	First Name		Middle Name/I	nitial
	First Name		Middle Name/I	nitial
Last Name)	First Name ()	(city)		
Last Name	First Name ()	(city) Attorney	(e-mail)	(zip code)
Last Name)(telephone) (mailing address) I occupation or primary field of bu	First Name (fax) (fax) siness: (circle one or fill in): Lobbyist		(e-mail) (state) Other	(zip code
Last Name	First Name ()(fax)		(e-mail)	(zip code
Last Name)(telephone) (mailing address) I occupation or primary field of bu	First Name (fax) (fax) siness: (circle one or fill in): Lobbyist		(e-mail) (state) Other	(zip code

(If more than four associated lobbyists are employed by this client, please use a second registration form to register the other lobbyists from the registering partnership, firm, or corporation who will be lobbying for this client. The additional forms should be attached to this page and submitted with this form to the Secretary of State.

Lobbyist's par	rtnership, firm, or corporation name			
()				
(telephone) (fax)		(e-mail)	
(mailing address)	(city)	(state)	(zip code)
If more than of for the different	cter of Employment (circle one or fill in): one lobbyist is being registered for this single client and the nt lobbyists listed above, please attach a separate sheet pro erwise the information below will be applied to all lobbyi	viding this	information for e	each lobbyist being
Lobbyist regis	strant 1:			
a.	Full-time/part-time employee of Client			
b.	Independent Contractor working directly for Client			
c.	Contract between Client and Lobbyist/Lobbyist's Firm	n		
d.	Other:	-		
Lobbyist regis				
a.	Full-time/part-time employee of Client			
b.	Independent Contractor working directly for Client			
c.	Contract between Client and Lobbyist/Lobbyist's Firm			
d.	Other:	_		
Lobbyist regis	strant 3:			
a.	Full-time/part-time employee of Client			
b.	Independent Contractor working directly for Client			
c.	Contract between Client and Lobbyist/Lobbyist's Firm	n		
d.	Other:	-		
Lobbyist regis	strant 4:			
a.	Full-time/part-time employee of Client			
b.	Independent Contractor working directly for Client			
c.	Contract between Client and Lobbyist/Lobbyist's Firm			
d.	Other:	-		
IV. Duratio	on of employment All registrations for the 2014 legis	lative sessio	on END on Dece	mber 31, 2014
Lobbyist regis				
a.	Ongoing full-time employee of Client			
b.	Representation period starts//			
Lobbyist regis	strant 2:			
a.	Ongoing full-time employee of Client			
b.	Representation period starts//			

Lobbyist registr	ant 3: Ongoing full-time employ	vee of Client			
b.	Representation period sta				
Lobbyist registr a. b. V. <u>Client</u>		yee of Client			
committee, or o	nt is a corporation, a regis other legally recognized ent esentative of that client. Wh	ity provide both the nam	e of the entity and	d the name of eithe	
Business, Corpo	oration, Organization, entity	name			
Last Name		First Name	Middl	e Name/Initial	
Usual Occupation	on or primary field of busine	ess:			
Provide business or principal/repr	s address and contact informesentative:	nation or if none, residen	ce address and con	tact information for	individual client
()(te	lephone)	(fax)		(e-mail)	
(m	ailing address)		(city)	(state)	(zip code)
VI. Subject					
Describe the sul	ojects of legislative or execu	ntive branch action to wh	ch the lobbying re	lationship being rep	ported relates:
List the name of lobbying partne	d lobbyists employed by the fany person registered as a rship, firm, or corporation went being registered on this	lobbyist on the date of th	is registration who	is affiliated with or	employed by the
1Last Nan	ne First Na	me	Middle Name/Ini	tial	
2Last Nam	e First Nar	ne	Middle Name/Ini	tial	
Last Nam	e First Nar	me	Middle Name/Ini	tial	

(If there are more than four, please attach a separate sheet listing any additional registered lobbyists who are affiliated with or employed by the registering lobbying entity but who will not be lobbying on behalf of the client being registered on this form.)

VIII. Signatures of Registering Lobbyists

	y swear or affirm that the foregoing information is true and complete to the
best of my knowledge and belief.	
1	
Signature	Date
[
I have read RSA Chapter 15 and hereby best of my knowledge and belief.	swear or affirm that the foregoing information is true and complete to the
best of my knowledge and benef.	
2	
Signature	Date
I have read RSA Chapter 15 and hereby	y swear or affirm that the foregoing information is true and complete to the
best of my knowledge and belief.	, - · · · · · · · · · · · · · · · · · ·
Signatura	
Signature	Date
	y swear or affirm that the foregoing information is true and complete to the
best of my knowledge and belief.	
4	/ /
Signature	Date
Detum to Cometow of State's Office	o State Hauga Daam 204 Canaand N.H. 02201
Return to: Secretary of State's Office	e, State House, Room 204, Concord, N.H. 03301
Fee: \$50 for each lobbyist registering	g on this form.
FOR OFFICE USE ONLY:	
Registration Fee Paid:	Check No Amount
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