

STATE OF NEW HAMPSHIRE

2023 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15) RECEIVED
FEB 1 3 2024
NEW HAMPSHIRE
DEPARTMENT OF STATE

PLEASE PRINT

I. Name of Lobbyist(s) Maura	M Weston		
II. Name of lobbyist's partnership	· • • • • • • • • • • • • • • • • • • •		
MM Weston & Associat	-		
	p, firm or corporation)		-
PO Box 990	Concord	NH	03302
Business Address: (Street)	(Town/City)	(State)	(Zip Code)
() 603-491-2853	()	maurawesto e-mail	n@comcast.net
(Telephone)	(Fax)		-
III. This statement covers: (Choos	e one – file senarate reports for	each client. OR von ma	v file a senarate report fo
reportable expense transactions w	hich are not attributable to any	one client).	y me a separate report to
7 .,,			
All reportable transactions occur	ring in the months prior to the rep	orting date relative to the	following client:
Docen	Medical		
	f Client as it appears on the Lobbyist I	Registration Form)	
OR			
All reportable transactions by the unrelated to any particular client.	lobbyist (including the lobbyist's	family), or the lobbying	firm listed below which ar
massace to any paradellar onone.			
IV. Date of Report April 26, 20	023	July 26, 2023	
		ivity from 4/1/23 to 6/30/23	
October 25,	2023	January 31, 2024	
activity from 7/1/2		from 10/1/23 to 12/31/23	
V. There have been no feet rec	nivad and no renewtable trans	aationa mada sinas Ab	
V. There have been no fees reco If this box is checked, complete just i	this form and submit it to the Secre	actions made since in etary of State's Office 10	e last report
State House, Room 204, Concord, N		y <i>0, 0,410 b 0,,100</i> , 10	Troisi Plans Bireet,
VL Check if additional reports are	attachad.		
<u> </u>	le expenditures, you must file Add	Andum A Fees and Ev	nancac
	or reimbursed expenses, you must		
Expense Reimbursement	or roundarson expenses, you must	me Addendum D- Kep	ort of Honorathinis of
If you, your firm, or your family	has made political contributions,	you must file Addendun	n C- Political Contribution
Sworn Statement/Affirmation by I	Lobbyist		
l have read RSA 15, RSA 15-B, RSA	A 14-C and RSA 664 and hereby s	wear or affirm that the fo	regoing information is true
and complete to the best of my know	rledge and belief.		
[[] [] [] \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		01/31/23	
(Signature of lobbyist)		(Date	
Maura M Weston		·	
(Print Name of lobbyist)			