STATE OF NEW HAMPSHIRE

2022 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

PLEASE PRINT

I. Name of Lobbyist(s) Christ	opher Kent		
II. Name of lobbyist's partnershi	p, firm or corporation, if any:		
N/A			
	nip, firm or corporation)		00000
18 Draper Road	Dover	MA	02030
Business Address: (Street)	(Town/City)	(State)	(Zip Code)
(401) 465-2106	()	e-mail CKentu1	@amgen.com
(Telephone)	(Fax)		
III. This statement covers: (Choo			y file a separate report fo
reportable expense transactions	which are not attributable to any	one client).	
All reportable transactions occ	arring in the months prior to the re	porting date relative to the	e following client:
Amgen, Inc.			,-
	of Client as it appears on the Lobbyist	Registration Form)	
OR	or enem as it appears on the Boosylot	registration rottin)	
All reportable transactions by th	ne lobbyist (including the lobbyist'	s family), or the lobbying	firm listed below which a
unrelated to any particular client.			
October 2	of registration to 3/31/22 act. 6, 2022	July 27, 2022	222
V. There have been no fees re If this box is checked, complete jus State House, Room 204, Concord,	t this form and submit it to the Sec.		
VI. Check if additional reports a	re attached:		
	ade expenditures, you must file Ad		
	n or reimbursed expenses, you mus	st file Addendum B– Rep	port of Honorariums or
Expense Reimbursement	ly has made political contributions	you must file Addendu	m C- Political Contributio
ii jou, jour iiiii, or jour iaiii	ij nas made pontical contributions	, jou must me Addendu	C Tondear Contributio
Sworn Statement/Affirmation by I have read RSA 15, RSA 15-B, R and complete to the best of my kno (Signature of lobbyist) Christopher Kent	SA 14-C and RSA 664 and hereby	swear or affirm that the f	
(Print Name of lobbyist)			