

STATE OF NEW HAMPSHIRE

2023 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

RECEIVED FEB 0 1 2024 NEW HAMPSHIRE DEPARTMENT OF STATE

PLEASE PRINT

I. Name of Lol	obyist(s) Rebe	ecca Hanson			
II. Name of lol	obyist's partners	ship, firm or corporati	on, if any:		
	(Name of partne	ership, firm or corporation))		
Business Address	s: (Street)	(Town/	(City)	(State)	(Zip Code)
()(Telep	ohone)	()	(Fax)	e-mail	
reportable exp	pense transaction ple transactions o	ns which are not attrib ccurring in the months p	utable to any one cl	ient).	y file a separate report for e following client:
Newfound		on Association			
<u>or</u>	(Full Nar	ne of Client as it appears o	on the Lobbyist Registra	ation Form)	
All reportab	le transactions by particular client	the lobbyist (including	the lobbyist's famil	y), or the lobbying	; firm listed below which are
IV. Date of Re Reports cover:		5, 2023 de of registration to 3/31/2		y 26, 2023 om 4/1/23 to 6/30/2	<i>3</i>
		25, 2023 7/1/23 to 9/30/23		y 31, 2024 V 10/1/23 to 12/31/23	
If this box is ch		received and no repo cust this form and submi d, NH 03301.			
VI. Check if a	dditional reports	s are attached:			
		made expenditures, you			
If you have Expense Reimb		ium or reimbursed expe	nses, you must file A	addendum B – Rej	port of Honorariums or
		mily has made political	contributions, you m	ust file Addendu	m C- Political Contributions
I have read RS		RSA 14-C and RSA 66	4 and hereby swear o	or affirm that the f	oregoing information is true
and complete to	the desi of my k	nowledge and belief.	1/3	30/2024	
(Signature of le	oblevist)		173	DU/2024 (Dat	<u> </u>
Rebecca	•			(Dat	c)
(Print Name of					

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

(Print Name of lobbyist)

Statement of Income and Expenses for:	
Name of Lobbying partnership, firm, or corporation:	
Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to particular client): Newfound Lake Region Association	any
Date of Report (check one):	
April 26, 2023 □ July 26, 2023 □ October 25, 2023 □ January 31, 2024 ☑	
I have read RSA 15, RSA 15-B, RSA 664, the Statement of Income and Expenses described above the following Addendums submitted with that Statement (insert the number of Addendum forms by submitted):	
Addendum A(s)	
Addendum $A(s)$. O Addendum $B(s)$.	
Addendum C(s)	
I hereby swear or affirm that the foregoing information on the Statement and each Addendum is true complete to the best of my knowledge and belief.	; and
$\frac{1}{3\delta / 2\delta 24}$ (Signature of loobyist) (Date)	
febecca Hanson	