

STATE OF NEW HAMPSHIRE

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

RECEIVED

OCT 06 2023

NEW HAMPSHIRE DEPARTMENT OF STATE

PLEASE PRINT

I. Name of Lobbyist(s) Michael (D'Brien		
II. Name of lobbyist's partnership, firm Preti Strategies	or corporation, if any:		
(Name of partnership, firm	or corporation)		
PO Box 1318	Concord	NH	03301
Business Address: (Street)	(Town/City)	(State)	(Zip Code)
, 603-410-1588	`	_{e-mail} lmeyer@	preti.com
(Telephone)	(Fax)	e-man	
III. This statement covers: (Choose one reportable expense transactions which a	re not attributable to any	one client).	
All reportable transactions occurring in	n the months prior to the rep	orting date relative to the	following client:
American Civil Libertie	es Union of Ne	w Hampshire	
•	t as it appears on the Lobbyist l	Registration Form)	
OR All reportable transactions by the lobby unrelated to any particular client.	rist (including the lobbyist's	family), or the lobbying f	īrm listed below which are
IV. Date of Report April 26, 2023 Reports cover: activity from date of registe October 25, 2023 activity from 7/1/23 to 9,	/30/23 activit	July 26, 2023 tivity from 4/1/23 to 6/30/23 January 31, 2024 y from 10/1/23 to 12/31/23	
V. There have been no fees received If this box is checked, complete just this fo State House, Room 204, Concord, NH 033	rm and submit it to the Secr		
VI. Check if additional reports are attac	ched:		
If you have received fees or made exp	• •	_	
If you have paid an honorarium or rein Expense Reimbursement	mbursed expenses, you mus	t file Addendum B– Repo	ort of Honorariums or
If you, your firm, or your family has r	nade political contributions,	you must file Addendum	C-Political Contribution
Sworn Statement/Affirmation by Lobby I have read RSA 15, RSA 15-B, RSA 14-0 and amplete to the best of my knowledge	C and RSA 664 and hereby s	swear or affirm that the for	regoing information is true
My mul O Bru	_	October 5, 2	023
(Signature of lobbyist)		(Date)	
Michael O'Brien			
(Print Name of lobbyist)			