

## STATE OF NEW HAMPSHIRE

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

JAN 3 1 2024

NEW HAMPSHIRE
DEPARTMENT OF STATE

PLEASE PRINT

I. Name of Lobbyist(s) Sandra Ribeiro
II. Name of lobbyist's partnership, firm or corporation, if any:
Glaxo-Smithkline
(Name of partnership, firm or corporation)
Business Address: (Street) (Town/City) (State) (Zip Code)
(Bloo 748-148) () e-mail Sandra X. ribelro
III. This statement covers: (Choose one – file separate reports for each client, OR you may file a separate report for reportable expense transactions which are not attributable to any one client).
All reportable transactions occurring in the months prior to the reporting date relative to the following client:
Sandra Mikibeico
(Full Name of Client as it appears on the Lobbyist Registration Form)
<u>OR</u>
All reportable transactions by the lobbyist (including the lobbyist's family), or the lobbying firm listed below which are unrelated to any particular client.
IV. Date of Report April 26, 2023 July 26, 2023  Reports cover: activity from date of registration to 3/31/23 activity from 4/1/23 to 6/30/23
October 25, 2023 January 31, 2024  activity from 7/1/23 to 9/3 1/23 (activity from 10/1/23 to 12/31/23
V. There have been no fees received and no reportable transactions made since the last report.  If this box is checked, complete just this form and submit it to the Secretary of State's Office. 107 North Main Street.  State House, Room 204, Concord, NH 03301.
VI. Check if additional reports are attached:
If you have received fees or made expenditures, you must file Addendum A-Fees and Expenses
If you have paid an honorarium or reimbursed expenses, you must file Addendum B—Report of Honorariums or Expense Reimbursement
If you, your firm, or your family has made political contributions, you must file Addendum C-Political Contributions
, , , , , , , , , , , , , , , , , , ,
Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15-B, RSA 14-C and RSA 664 and hereby swear or affirm that the foregoing information is true
and complete to the best of my knowledge and belief
(Signature of lobbyist)
Sandra Ribeiro
(Print Name of lobbyist)

## STATE OF NEW HAMPSHIRE



## Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s) Sandra Ribeiro	
II. Name of lobbyist's partnership, firm or corporation, if any:	
<u>UlaxoSmithKline</u> (Name of partnership, firm or corporation)	<del></del>
III. Name of Client bland Smith Kline	
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, governmen including research, monitoring legislation, and related legal work. The gr reduced by any expenses:	t relations, or public relations service
a) Total of all fees received in this reporting period	a) \$
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar y	b) \$
c) Total of all fees received to date (Add lines a and b)	c)\$
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to reffees. Separate reports are to be filed for expenditures made relative to each the lobbyist(s)/firm that are unrelated to any one client a separate report of Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office exindividual expenses where the expenditure was of \$25.00 or less (for example lunch where the cost was \$25.00 or less, purchase of a pen with a value of lebeing lobbied, purchase of a ceremonial object given to a person being lobbied (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greater restaurant expenses for a legislative reception). Expenses for honorariums, contributions will be reported on separate addendums and should not be reported.	client and if expenditures are made may be filed for the lobbyist(s)/fine aggregate total of all expenses particles; (b) the aggregate total of the impact of the expenses; (b) the aggregate total of the meals purchased during a business than \$10 that is given to the persect with a value of \$25.00 or less); a parting period of greater than \$25.00 are of greater than \$25, purchase over than \$25, but not greater than \$25, expense reimbursement, or politically the property of political particles.
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) \$
c) Total of all itemized expenditures reported in detail in section VI	a) e O

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$O
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e)s 8,365.45
f) Total of all expenses year to date	ns 8,365.45
VI. Other Expenses:  Provide the following detail for all expenditures of more than \$25 made from leading by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
•	\$
	\$
	\$
	\$
	\$
	\$
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm	n that the foregoing information
is true and complete to the best of my knowledge and belief.	11291a L
(Signature of lobbyist)	(Date)
Sandra Kibeiro	
(Print Name of lobbyist)	

## 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.

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for: