

## 2021 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

RECEIVED

OCT 20 2021

NEW HAMPSHIRE DEPARTMENT OF STATE

## (RSA Chapter 15) PLEASE PRINT

| I. Name of Lobbyist(s) Janet 5  | haffer   | ·   | DEPARTMENT OF STATE               | ΓΕ |
|---|--|---|-----------------------------------|----|
| II. Name of lobbyist's partnership, firm or c   | //   |   |                                   |    |
| CVIX Strategic  | orporauou, n'any:<br>5 (Consa/ta)                  | nt)   |                                   |    |
| (Name of partnership, form or co  | rporation)   | . [ ]   |                                   |    |
| 1/4 N Main 51. Business Address: (Street)   | (Sn COV)   | (State)   | (Zip Code)                        |    |
|   | (Iowii City)                                       | (State)   | (24) (32)                         |    |
| (W3) <u>573-966</u> ( ) (Telephone)   | (Fax)  | e-mail/appe7  | schafferdo@gnail.com              | _  |
| III. This statement covers: (Choose one – file reportable expense transactions which are n  |  |   | may file a separate report for    |    |
| All reportable transactions occurring in the  | months prior to the re                             | oorting date relative t   | o the following client:           |    |
| Civix/  | NH AFL-CI  | 0   |                                   |    |
| (Full Name of Client as it  | appears on the Lobbyist                            | Registration Form)  |                                   |    |
| OR  |  |   |                                   |    |
| All reportable transactions by the lobbyist (i unrelated to any particular client.  | including the lobbyist'                            | s family), or the lobby   | ying firm listed below which are  |    |
| IV. Date of Report April 28, 2021  Reports cover: activity from date of registration  | n_to 3/31/21 act                                   | July 28, 2021 with from 4/1/21 to 6/3   | <u> </u>                          |    |
| October 27, 2021  |  | January 26, 2022  |                                   |    |
| activity from 7/1/21 to 9/30  | V21 ac   | tivity from 10/1/21 to 12   | 2/31/21                           |    |
| V. There have been no fees received and If this box is checked, complete just this form a State House, Room 204, Concord, NH 03301. | no reportable tran<br>nd submit it to the Sec      | sactions made sinc<br>retary of State's Offic   | ce the last report.               |    |
| VI. Check if additional reports are attached  | •  |   |                                   |    |
| If you have received fees or made expendit  |  | dendum A-Fees an  | d Expenses                        |    |
| If you have paid an honorarium or reimbur Expense Reimbursement   |  |   |                                   |    |
| If you, your firm, or your family has made  | political contributions                            | , you must file Adde  | ndum C- Political Contributions   |    |
|   |  |   |                                   |    |
| Sworn Statement/Affirmation by Lobbyist   |  |   |                                   |    |
| I have read RSA 15, RSA 15-B, RSA 14-C and and complete to the best of my knowledge and   | RSA 664 and hereby                                 | swear or affirm that t  | the foregoing information is true |    |
| Jant Shather  |  | 10/5  | 20/2/                             |    |
| (Signature of lobbyist)   |  | v. sanskarisk or (  | Date                              |    |
| (Print Name of lobbyist)  | og til store er e | gan salah |                                   |    |