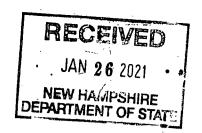


STATE OF NEW HAMPSHIRE

2020 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)



PLEASE PRINT

I. Name of Lobbyist(s)	avia Comins, Oma	- Cowers, Greini W	anace, Richard Fa	rsons, Kyle Baker	
II. Name of lobbyist's part	nership, firm or corpo	ration, if any:			
RYP Granite Strategie	es LLC		•	:	
(Name of p	artnership, firm or corpora	tion)			
One Capital Plaza,	PO Box 1500	Concord	NH	03302-1500	
Business Address: (Street)		own/City)	(State)	(Zip Code)	
(603 <u>410-4307</u> (Telephone)	(603)_22	6-2700 (Fax)	e-mail <u>dgc@rypgranite.com</u>		
III. This statement covers: reportable expense transact				y file a separate report for	
☐ All reportable transaction	s occurring in the month	s prior to the reportir	ng date relative to the f	following client:	
NATIONAL ASSOCIAT	ION OF FUNDRAIS	ING TICKET MAI	NUFACTURERS		
OR (Full	l Name of Client as it appe	ears on the Lobbyist Re	gistration Form)		
☐ All reportable transaction unrelated to any particular co		ling the lobbyist's fa	mily), or the lobbying	firm listed below which are	
IV. Date of Report Reports cover: activity fre	April 29, 2020 \Box rity from date of registration to 3/31/20		July 29, 2020 activity from 4/1/20 to 6/30/20		
activ	October 28, 2020 ity from 7/1/20 to 9/30/20		January 27, 2021 X activity from 10/1/20 to 12/31/20		
V. There have been no fi If this box is checked, comple State House, Room 204, Con	ete just this form and su				
VI. Check if additional rep	orts are attached:				
If you have received fees or		ı must file Addendu ı	m A- Fees and Expens	ses	
If you have paid an honor Expense Reimbursement	arium or reimbursed exp	enses, you must file	Addendum B– Repor	t of Honorariums or	
If you, your firm, or your	family has made politica	al contributions, you	must file Addendum	C- Political Contributions	
Sworn Statement/Affirmat I have read RSA 15, RSA 1: and complete to the best of (Signature of lobbyist) David G. Collins	5-B, RSA 14-C and RSA	f.	ear or affirm that the fo anuary 27, 2021 (Date		