STATE OF NEW HAMPSHIRE

2018 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

PLEASE PRINT

I. Name of Lobbyist(s) Janet Schaffer
II. Name of lobbyist's partnership, firm or corporation, if any:
(Name of partnership, firm or corporation)
Proposition Warrer NH 53278
Business Address: (Street) (Town/City) (State) (Zip Code)
() 456-364/ () e-mail jandschaffer 06@gmail. (m
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: Family French Looping Looping (Full Name of Client as it appears on the Loobyist Registration Form)
OR 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 25, 2018 Suly 25, 2
October 31, 2018 \(\sqrt{2018} \) activity from 7/1/18 to 9/30/18 January 30, 2019 \(\sqrt{2019} \) activity from 10/1/18 to 12/31/18
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, 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) (Signature of lobbyist) (Print Name of lobbyist)