

## STATE OF NEW HAMPSHIRE

## 2019 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

RECEIVED

JUL 2 3 2019

Maliacia M/hitmannah

PLEASE PRINT

NEW HAMPSHIRE DEPARTMENT OF STATE

I. Name of Lobby	ist(s) IVIEIISSIA VVN	ıtmarsn			
II. Name of lobby N/A	ist's partnership, firm or	corporation, if an	ıy:		
(	Name of partnership, firm or	corporation)			
80 Patton D	Orive	Cheshire	CT	06410	
Business Address:	(Street)	(Town/City)	(State)	(Zip Code)	
203, 461-0823	461-0823		melis: c-mail	melissia.whitmarsh@pharma.com	
(Telephon	ne)	(Fax)		_	
reportable expens	e transactions which are	not attributable to	o any one client).	ou may file a separate repo	
	transactions occurring in the	e months prior to t	he reporting date relative	e to the following client:	
Purdue Pha					
<u>OR</u>	(Full Name of Client as	it appears on the Lot	obyist Registration Form)		
		(including the lobb	oyist's family), or the lol	obying firm listed below wh	
IV. Date of Repor	т Аргіl 24, 2019 🛘		July 31, 2019	<b>2</b>	
Reports cover:	_	<u> </u>		ctivity from 4/1/19 to 6/30/19	
	•	October 30, 2019  activity from 7/1/19 to 9/30/19 acti		January 29, 2020 <b>[</b> ivity from 10/1/19 to 12/31/19	
If this box is check	een no fees received an ed, complete just this form 204. Concord, NH 03301	and submit it to the		nce the last report. [2] Jice, 107 North Main Street,	
VI. Check if addit	tional reports are attache	·d:			
	ceived fees or made expend		le Addendum A- Fees	and Expenses	
If you have pa Expense Reimburs		ursed expenses, you	a must file Addendum I	B- Report of Honorariums o	
If you, your fir	rm, or your family has mad	le political contribu	tions, you must file Add	dendum C- Political Contri	
I have read RSA 1:	e best of my knowledge an	nd RSA 664 and he	reby swear or affirm tha	t the foregoing information	
Melissia W	* '		ι /	(Date)	
(Print Name of lot					
,	uuyiatj				