

(Print Name of lobbyist)

STATE OF NEW HAMPSHIRE 2018 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

RECEIVED

OCT 29 2018

NEW HAMPSHIRE DEPARTMENT OF STATE

| I. Name of Lobbyist(s) Stuart D. Trachy | | | | |
|---|--|---|--------------------------|--|
| II. Name of lobbyist's partnershi | o, firm or corporation, if a | nny: | | |
| (Name of partners | hip, firm or corporation) | | | |
| Two Eagle Square, Suite 300 | Concord | NH | 03301 | |
| Business Address: (Street) | (Town/City) | (State) | (Zip Code) | |
| (603) 520 0922 (603) | | a-ail strachu@aal aa | email_strachy@aol.com | |
| (603) 520-0822 (Telephone) | (Fax) | eman <u>suachy@aor.co</u> | <u>'1111</u> | |
| • | urring in the months prior to | to any one client). the reporting date relative to the | following client: | |
| Coalition of NH Chain Drug | <u>Stores</u> Name of Client as it annear | s on the Lobbyist Registration Fo | | |
| unrelated to any particular client. IV. Date of Report April 25, Reports cover: activity from date | 2018 ☐ of registration to 3/31/18 1, 2018 ☑ | July 25, 2018 activity from 4/1/18 to 6/30/16 January 30, 2019 activity from 10/1/18 to 12/3 | 8 | |
| V. There have been no fees receiv If this box is checked, complete just Concord, NH 03301. | | | | |
| If you have paid an honor Expense Reimbursement | or made expenditures, you arium or reimbursed expen | must file Addendum A- Fees and ses, you must file Addendum B-contributions, you must file Adden | Report of Honorariums or | |
| (Bigilater of 1000) tool | RSA 664 and hereby swea | r or affirm that the foregoing info | / | |
| Stuart D. Trachy | | | | |