

STATE OF NEW HAMPSHIRE

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

PLEASE PRINT

I. Name of Lobbyist's partnership, firm or corporation, if any:				
	(Name of partnership, firm o			
1220 L STF	REET NW STE 500	Washingt	on, D.C.	20005
Business Address:	(Street)	(Town/City)	(State)	(Zip Code)
(301) 906-108)	e-mail eri	ne@rainn.org
(Teleph		(Fax)		
	ent covers: (Choose one – ense transactions which ar			u may file a separate report for
All reportable	le transactions occurring in	the months prior to the	reporting date relative	to the following client:
RAPE ABUSE & INCEST NATIONAL NETWORK (RAINN)				
(Full Name of Client as it appears on the Lobbyist Registration Form)				
	e transactions by the lobbyi particular client.	st (including the lobbyi	st's family), or the lob	bying firm listed below which are
IV. Date of Report April 28, 2021 Reports cover: activity from date of reg		July 28, 2021		
	October 27, 2021 activity from 7/1/21 to		January 26, 2022 activity from 10/1/21 to	
If this box is che	been no fees received a cked, complete just this form om 204, Concord, NH 0330	n and submit it to the S	ansactions made sin ecretary of State's Offi	ice the last report. 🛭 🗷 ice, 107 North Main Street,
VI. Check if add	ditional reports are attach	ned:		
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				
Linaxe read RSA	the best of my knowledge a bbyist)	and RSA 664 and herel	oy swear or affirm that H/19	the foregoing information is true (Date)
(Print Name of	ioodyişt)			APR 2.7 2021