

## STATE OF NEW HAMPSHIRE

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

PLEASE PRINT

I. Name of Lobbyist(s) Jennifer Lynn Stowe		
II. Name of lobbyist's partnership, firm or corporation, if any:		·
(Name of partnership, firm or corporation)		<del></del>
3033 Wilson Blvd. Suite 700 Arlington	, VA	22201
Business Address: (Street) (Town/City)	(State)	(Zip Code)
(703) 875-0634 (Fax)	e-mail jstowe@ca	arpet-rug.org
(Telephone) (Fax)		
III. This statement covers: (Choose one – file separate reports for expense transactions which are not attributable to any o		file a separate report for
All reportable transactions occurring in the months prior to the repo	rting date relative to the	following client:
The Carpet and Rug Institute		
(Full Name of Client as it appears on the Lobbyist Re	egistration Form)	<del></del>
OR  ☐ All reportable transactions by the lobbyist (including the lobbyist's funrelated to any particular client.	amily), or the lobbying t	firm listed below which are
October 27, 2021	July 28, 2021	1
V. There have been no fees received and no reportable transa If this box is checked, complete just this form and submit it to the Secretate House, Room 204, Concord, NH 03301.	actions made since the tary of State's Office, 10	e last report. 🗸 7 North Main Street,
VI. Check if additional reports are attached:  If you have received fees or made expenditures, you must file Add  If you have paid an honorarium or reimbursed expenses, you must Expense Reimbursement  If you, your firm, or your family has made political contributions, you have paid an honorarium or reimbursed expenses, you must expense Reimbursement	file Addendum B- Repo	ort of Honorariums or
Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15-B, RSA 14-C and RSA 664 and hereby so and complete to the best of my knowledge and belief.  (Signature of lobbyist)  Jeńnifer Lynn Stowe  (Print Name of lobbyist)	4/23/21 (Date	CEIVED R 25 2021

NEW HAMPSHIRE DEPARTMENT OF STATE