

STATE OF NEW HAMPSHIRE

2020 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

PLEASE PRINT

RECEIVEL CCT 29 0920
NEW HAMPSHIRE DEPARTMENT OF STA
03301 (Zip Code)
ski@americavotes.org
ay file a separate report for
he following client:
ng firm listed below which are
1/20
the last report. 🔯 107 North Main Street,
Expenses eport of Honorariums or
um C- Political Contributions
foregoing information is true

I. Name of Lobbyist(s) Rosema	ry Danelski		NEW HAMPSHIR DEPARTMENT OF S
II. Name of lobbyist's partnershi	p, firm or corporation, if a	ny:	CEL MINIMENT OF S
America Votes			
	nip, firm or corporation)		
10 Dixon Ave	Concord	NH	03301
Business Address: (Street)	(Town/City)	(State)	(Zip Code)
603) 225-1932	()	e-mail rdanels	ski@americavotes.org
(Telephone)	(Fax))	
III. This statement covers: (Choo reportable expense transactions			ay file a separate report for
All reportable transactions occur	arring in the months prior to	the reporting date relative to the	ne following client:
(Full Name	of Client as it appears on the Lo	hhvist Registration Form)	
OR	or Chem as it appears on the Lo	ooyisi registation i omij	
☐ All reportable transactions by the unrelated to any particular client.	ne lobbyist (including the lob	byist's family), or the lobbying	g firm listed below which are
IV. Date of Report April 29, 3 Reports cover: activity from date of	2020 registration to 3/31/20	July 29, 2020 activity from 4/1/20 to 6/30/26	
	8, 2020 🖟 7/1/20 to 9/30/20	January 27, 2021 activity from 10/1/20 to 12/31	//20
V. There have been no fees red If this box is checked, complete just State House, Room 204, Concord,	this form and submit it to th		
VI. Check if additional reports a	re attached:		
☐ If you have received fees or ma		ile Addendum A- Fees and E	xpenses
☐ If you have paid an honorarium Expense Reimbursement	n or reimbursed expenses, yo	ou must file Addendum B – Re	port of Honorariums or
☐ If you, your firm, or your famil	ly has made political contrib	utions, you must file Addendu	m C- Political Contributions
Sworn Statement/Affirmation by I have read RSA 15, RSA 15-B, RS and complete to the best of my kno	SA 14-C and RSA 664 and he	ereby swear or affirm that the 10-26-2020 (Da	
(Sygnature of lobbyist// Rosemary Danelski		(Da	ic)
(Print Name of lobbyist)		,	



STATE OF NEW HAMPSHIRE

2020 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

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II. Name of lobbyist's partn	ership, firm or corporation, if	any:	
America Votes			
(Name of par	tnership, firm or corporation)		- · · - ·
10 Dixon Ave	Concord	NH	03301
Business Address: (Street)	(Town/City)	(State)	(Zip Code)
() 202-962-7270 (Telephone)	()	_{e-mail} kcorrive	au@americavotes.org
(Telephone)	(Fa		``````````````````
reportable expense transact	Choose one – file separate repoints which are not attributable soccurring in the months prior to	e to any one client).	
(Full I	Name of Client as it appears on the L	obbyist Registration Form)	
All reportable transactions unrelated to any particular clients	by the lobbyist (including the le ent.	obbyist's family), or the lobbying	ng firm listed below which ar
IV. Date of Report April	29, 2020 🗍	July 29, 2020 🛚	
	date of registration to 3/31/20	activity from 4/1/20 to 6/30/2	0
	her 28, 2020 [x] from 7/1/20 to 9/30/20	January 27, 2021 🖸 activity from 10/1/20 to 12/3	1/20
	es received and no reportable just this form and submit it to ord, NH 03301.		
VI. Check if additional repo	rts are attached:		
-	or made expenditures, you must	file Addendum A- Fees and I	Expenses
☐ If you have paid an honor Expense Reimbursement	arium or reimbursed expenses, y	you must file Addendum B – R	eport of Honorariums or
☐ If you, your firm, or your	family has made political contri	butions, you must file Addend	um C– Political Contribution
and complete to the best of m	B, RSA 14-C and RSA 664 and y knowledge and belief.	hereby swear or affirm that the	foregoing information is true
Mowel	eer	10/26/2020	
(Signature of lobbyist)		(Da	ate)
Kate Corrveau			
(Print Name of lobbyist)			

PLEASE PRIN

STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A



(RSA Chapter 15:6)

II. Name of lobbyist's partnership, firm or corporation, if any:	
America Votes	
(Name of partnership, firm or corporation)	
III. Name of Client	Date
IV. Fees Received Indicate the gross amount of all fees received from the client identified abo to lobbying, including fees for services such as public advocacy, governme including research, monitoring legislation, and related legal work. The reduced by any expenses:	ent relations, or public relations service
a) Total of all fees received in this reporting period	a) \$ <u>0.00</u>
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar	
c) Total of all fees received to date (Add lines a and b)	c) \$ <u>0.00</u>
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$ <u>0.00</u>
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to refees. Separate reports are to be filed for expenditures made relative to each the lobbyist(s)/firm that are unrelated to any one client a separate report Expenses are to be reported in one of three categories of expenses: (a) during the reporting period for salaries, benefits, support staff, and office individual expenses where the expenditure was of \$25.00 or less (for examplanch where the cost was \$25.00 or less, purchase of a pen with a value of being lobbied, purchase of a ceremonial object given to a person being lobbied; an itemized statement of each individual expenditure made during this reamy purpose not covered by (a) (for example: purchase of a meal with veceremonial object to be given to the subject of lobbying with a value gre restaurant expenses for a legislative reception). Expenses for honorarium contributions will be reported on separate addendums and should not be reported.	h client and if expenditures are made to may be filed for the lobbyist(s)/firm the aggregate total of all expenses parexpenses; (b) the aggregate total of an expenses; (b) the aggregate total of an expenses; (b) that is given to the persent of th
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$ 127.51
 b) Total aggregate of expenditures during this reporting period, not reporte in a), of \$25 or less. 	^d ь) \$ <u>0.00</u>
c) Total of all itemized expenditures reported in detail in section VI.	c) \$ 0.00

d) Total expenses for this reporting period	d) \$ 127.51
(Add lines a, b and c)	
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) § <u>361.60</u>
(This should be the amount on the For addendant A for his month stepoty)	100 11
f) Total of all expenses year to date	1) \$ 489.11
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from leperiod, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
	\$
	\$
	\$
	\$
	\$
	\$
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm	n that the foregoing information
is true and complete to the best of my knowledge and belief.	
N/06 2100 CO.	10/26/2020
(Signature of lobbyist)	(Date)
Kate Corryeau	,
(Print Name of lobbyist)	
(1 int raine of 1000ylat)	