

STATE OF NEW HAMPSHIRE

2022 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

PLEASE PRINT

Name of lobbyist's partnership, fire ealthcare Distribution All	假毛,如此程 化压验 化水油多种污染		
Name of partnership, fir 301 N. Glebe Road Suite	m or corporation). 100 Arlington	VA	22203
Susiness Address: (Street) 7,03-787-0000	(Town/City)	(State) e-mail kmemphis((Zip Code) @hda.org
(Telephone) HI: This statement covers: (Choose or reportable expense transactions which	(Fax) ne – file separate reports f h are not attributable to a	or each client, OR you may fi ny one client).	le a separate réport for
All reportable transactions occurring Healthcare Distribution. A	Iliance .	And the spine of the second	lowing client
(Full Name of C	lient as it appears on the Lobbyi	t's family), or the lobbying firm	isted below which are
IV: Date of Report April 27, 202 Reports cover: activity from date of r October 26, activity from 7/1.	2022 \(\sqrt{2}\) 22 to \(\frac{9/30/22}{3/20}\)	July 27, 2022	
V. There have been no fees recei If this box is checked, complete just th State House, Room 204, Concord, NH	13. July 11. Comment of the Section	ansactions made since the Secretary of State's Office, 107	ast report. V North Main Street,
VI. Check if additional reports are If you have received fees or made If you have paid an honorarium o	attached: expenditures, you must fil	e Addendum A—Fees and Exp must file Addendum B—Repo	enses on of Honorariums or
Expense Reimbursement If you, your firm, or your family	has made political contribu	tions, you must file Addendui	n C-Political Contribution
Sworn Statement/Affirmation by L have read RSA 15, RSA 15-B, RSA	obbyist 14-C and RSA 664 and h	reby swear or affirm that the f	oregoing information is tru
thave read RSA 15, RSA 15-B, RSA and complete to the best of my know		10/25/ - (Da	
(Signature of lobby)st) Kelly Memphis			

RECEIVED

OCT 28 2022

NEW HAMPSHIRE DEPARTMENT OF STATE