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NEW HAMPSHIRE DEPARTMENT OF STATE

STATE OF NEW HAMPSHIRE 2020 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15) PLEASE PRINT I. Name of Lobbyist(s)

II. Name of lobbyist's partnership, firm or corporation, if any: III. This statement covers: (Choose one - file separate reports for each client, OR you may file a separate report for reportable expense transactions which are not attributable to any one client). All reportable transactions occurring in the months prior to the reporting date relative to the following client: **OR** All reportable transactions by the lobbyist (including the lobbyist's family), or the lobbying firm listed below which are unrelated to any particular client. IV. Date of Report April 29, 2020 🗌 July 29, 2020 \Box Reports cover: activity from date of registration to 3/31/20 activity from 4/1/20 to 6/30/20 October 28, 2020 January 27, 202 (🔽 activity from 10/1/20 to 12/31/20 activity from 7/1/20 to 9/30/20 V. There have been no fees received and no reportable transactions made since the last report. If this box is checked, complete just this form and submit it to the Secretary of State's Office, 107 North Main Street State House, Room 204, Concord, NH 03301. VI. Check if additional reports are attached: 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 ☐ If you, your firm, or your family has made political contributions, you must file Addendum C-Political Contributions Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15-B, RSA 14-C and RSA 664 and hereby swear or affirm that the foregoing information is true and complete to the best of my knowledge and belief. anuary 26, 2021

Expense Reimbursement

(Print Name of lobbyist)

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:

Name of Lobbying partnership, firm, or corporation:	JENNEHY	& BOULEY L	
Name of Client (leave blank if Statement is for the pa			ny
particular client): New Hampshire	Opticians	Society	_
Date of Report (check one):			
April 29, 2020 □ July 29, 2020 □ Octo	ber 28, 2020 □ Janua	ary 27, 2021 🗷	
I have read RSA 15, RSA 15-B, RSA 664, the State the following Addendums submitted with that State submitted):			
Addendum A(s).	·		
Addendum B(s).			
Addendum C(s).			
I hereby swear or affirm that the foregoing informaticomplete to the best of my knowledge and belief.	on on the Statement and e	each Addendum is true an	nd
(Signature of lobbyist)	1/36	-/a4 Data)	
(Signature of 1000y1st)	(· · · · · · · · · · · · · · · · · ·	
James Bouley			
(Print Name of lobbyist)		•	