

STATE OF NEW HAMPSHIRE

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

PLEASE PRINT

| I. Name of L | obbyist(s) <u>Jenniter Delan</u> | ey | | |
|---------------------------------|---|---------------------------|---|---------------------------|
| II. Name of | obbyist's partnership, firm or c | orporation, if any: | | |
| AARP N | ew Hampshire | | | |
| | (Name of partnership, firm or co | rporation) | | |
| 45 | South Main St.Ste. 202 | Concord | NH | 03301 |
| Business Addr | ess: (Street) | (Town/City) | (State) | (Zip Code) |
| (603 | 3) 230- 4106 | | e-mail jddelaney@ | aarp.org |
| (Te | ephone) | (Fax) | | |
| reportable e | ement covers: (Choose one – file xpense transactions which are no table transactions occurring in the | ot attributable to any o | one client). | |
| AARP N | ew Hampshire | | | |
| | (Full Name of Client as it | appears on the Lobbyist R | egistration Form) | |
| | able transactions by the lobbyist (i | ncluding the lobbyist's | family), or the lobbying firm | m listed below which are |
| IV. Date of I Reports cover: | | | July 27, 2022 ity from 4/1/22 to 6/30/22 January 25, 2023 ity from 10/1/22 to 12/31/22 | |
| If this box is | ave been no fees received and checked, complete just this form a Room 204, Concord, NH 03301. | | | |
| VI. Check if | additional reports are attached: | | | |
| | ve received fees or made expendit | | endum A– Fees and Exper | nses |
| If you ha Expense Rei | ve paid an honorarium or reimbur nbursement | sed expenses, you must | file Addendum B — Report | of Honorariums or |
| If you, y | our firm, or your family has made | political contributions, | you must file Addendum (| C-Political Contributions |
| I have read R | ment/Affirmation by Lobbyist SA 15, RSA 15-B, RSA 14-C and to the best of my knowledge and f lobbyist | | wear or affirm that the fore $\frac{7}{25}$ | going information is true |
| Jennifer (Print Name | Delaney of lobbyist) | | • | RECEIVED |
| (x 1mc 11ame | 01 1000 july | | | JUL 27 2022 |

NEW HAMPSHIRE DEPARTMENT OF STATE

| d) Total expenses for this reporting period (Add lines a, b and c) | _{d)} \$ 70.66 | |
|--|--|--|
| 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) \$ 0 | |
| f) Total of all expenses year to date | _{1)\$} 70.66 | |
| VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from period, including by whom paid or to whom charged. | lobbying fees during this reporting | |
| Paid to: | Amount: | |
| Staples Copy & Print | _{\$} 70.66 | |
| | \$ | |
| | \$ | |
| | \$ | |
| | \$ | |
| | \$ | |
| | | |
| Sworn Statement/Affirmation by Lobbyist | • | |
| Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affir is true and complete to the best of my knowledge and belief. | m that the foregoing informati | |
| I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affinis true and complete to the best of my knowledge and belief. | , | |
| I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affin | m that the foregoing information $\frac{7/25/2}{(Date)}$ | |