STATE OF NEW HAMPSHIRE

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

PLEASE PRINT

I. Name of Lobbyist(s) DM Na Garrache	
II. Name of lobbyist's partnership, firm or corporation, if any:	
(Name of partnership, firm or corporation)	
Business Address: (Street) (Town/City) (Store)	0330/
$\frac{(603) - 634 - 2213}{\text{(Telephone)}} \qquad () \qquad \frac{\text{N/A}}{\text{(Fax)}} \qquad \text{e-mail}) \text{una Gam}$	(Zip Code) <u>W.Chr CCr</u> CVSOU
III. This statement covers: (Choose one – file separate reports for each client, OR you may file reportable expense transactions which are not attributable to any one client).	a separate report for
All reportable transactions occurring in the months prior to the reporting date relative to the following the second seco	
- CVOI SOU CE Phomas	wing client:
(Full Name of Client as it appears on the Lobbyist Registration Form)	· ·
All reportable transactions by the lobbyist (including the lobbyist's family), or the lobbying firm I	isted below which are
IV. Date of Report April 27, 2022 Reports cover: activity from date of registration to 3/31/22 October 26, 2022 July 27, 2022 July 27, 2022 activity from 4/1/22 to 6/30/22	
activity from 7/1/22 to 9/30/22 activity from 10/1/22 to 12/31/22	
V. There have been no fees received and no reportable transactions made since the last If this box is checked, complete just this form and submit it to the Secretary of State's Office, 107 North State House, Room 204, Concord, NH 03301.	report h Main Street,
VI. Check if additional reports are attached.	:
If you have received fees or made expenditures you must be	
Expense Reimbursement Expenses, you must file Addendum B. Report of F	Ionorariums or
If you, your firm, or your family has made political contributions, you must file Addendum C-Po	olitical Contributions
SWOPE Statement/Acc	
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 and complete to the best of my knowledge and belief.	information is true
	S THE STATE OF THE
(Signature of lobbyist) Dimna Coamache (Date)	• ;
(Print Name of lobbyist)	í

STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

	t's partnership, firm or corporation, if any:	,
	EVENSUVCE ENERSY ne of partnership, firm or corporation)	
(Nar	ne of partnership, firm or corporation)	:
III. Name of Client	Eversivce Energy	Date
		ì
IV. Fees Received		1
	ount of all fees received from the client identified al	
	g fees for services such as public advocacy, government or the services such as public advocacy, government for the services and related legal work. The	
reduced by any expen		· •
a) Total of all foosers	coived in this was astissa social	a)\$ 24,038.14
a) Total of all lees le	ceived in this reporting period	a) \$ 0.11000
	eceived this calendar year, prior to this reporting per	
(This should equa	al the total of all prior monthly reports for this calend	lar year)
a) Marine 11 Common	eceived to date	211 326 116
c) Total of all fees re	nd b)	c)\$ <u>24,038,19</u>
(Add lines a ar		
(Add lines a ar	unt of any such fees that are due, but have not	· 13
(Add lines a ar	int of any such fees that are due, but have not	d) \$
(Add lines a ard) Indicate the amou	int of any such fees that are due, but have not	o)\$_24,038.14 d)\$
(Add lines a ard) Indicate the amou	int of any such fees that are due, but have not	d) \$

lunch where the cost was \$25.00 or less, purchase of a pen with a value of less than \$10 that is given to the person being lobbied, purchase of a ceremonial object given to a person being lobbied with a value of \$25.00 or less); and (c) an itemized statement of each individual expenditure made during this reporting period of greater than \$25.00 for any purpose not covered by (a) (for example: purchase of a meal with value of greater than \$25, purchase of a ceremonial object to be given to the subject of lobbying with a value greater than \$25, but not greater than \$50, restaurant expenses for a legislative reception). Expenses for honorariums, expense reimbursement, or political

contributions will be reported on separate addendums and should not be reported on Addendum A.

a)	Total aggregate expenses for this reporting period for sa	laries, benefits,
su	pport staff, and office expenses, related directly or indirec	ctly to lobbying.

b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.

c) Total of all itemized expenditures reported in detail in section VI.

a) \$	Ø	
,	0./	
b) \$	<i>B</i>	

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$	0
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).\$	D
f) Total of all expenses year to date	f) \$	y
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	ng this reporting
Paid to:	Amount:	•
	\$	
	\$	1
	\$	
	\$	1
	\$	4
	\$	
		• •
Sworn Statement/Affirmation by Lobbyist		* * * * * * * * * * * * * * * * * * *
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affi is true and complete to the best of my knowledge and belief.	rm that the forego	ing information
(Signature of lobbyist)	(Date)	
Donnar Coarrache (Print Name of lobbyist)		es description des
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