(Print Name of lobbyist)

## STATE OF NEW HAMPSHIRE

2023 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

JAN 26 2024

NEW HAMPSHIRE
DEPARTMENT OF STATE

PLEASE PRINT

Christina Warriner I. Name of Lobbyist(s) II. Name of lobbyist's partnership, firm or corporation, if any: Reproductive Equity Now Inc. (Name of partnership, firm or corporation) 1 Federal St Fifth Floor Boston 02110 Business Address: (Street) (Town/City) (Zip Code) (617) 556-8800 cwarriner@reproequitynow.org (Telephone) 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: Reproductive Equity Now Inc. (Full Name of Client as it appears on the Lobbyist Registration Form) 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. July 26, 2023 April 26, 2023 IV. Date of Report activity from 4/1/23 to 6/30/23 activity from date of registration to 3/31/23 Reports cover: October 25, 2023 January 31, 2024 activity from 7/1/23 to 9/30/23 activity from 10/1/23 to 12/3 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 Expense Reimbursement 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. 1/19/2024 (Signature of lobbyist) (Date) Christina Warriner

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# STATE OF NEW HAMPSHIRE

# Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s) Christina Warriner	
II. Name of lobbyist's partnership, firm or corporation, if any:	
Reproductive Equity Now Inc.	
(Name of partnership, firm or corporation)  III. Name of Client Reproductive Equity Now Inc.	Date 1/19/2024
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The groreduced by any expenses:	relations, or public relations service
a) Total of all fees received in this reporting period	a) \$
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 year).	b) \$ ear)
c) Total of all fees received to date (Add lines a and b)	c) \$
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to rep fees. Separate reports are to be filed for expenditures made relative to each of the lobbyist(s)/firm that are unrelated to any one client a separate report of Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office exindividual expenses where the expenditure was of \$25.00 or less (for example lunch where the cost was \$25.00 or less, purchase of a pen with a value of less being lobbied, purchase of a ceremonial object given to a person being lobbied (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greater restaurant expenses for a legislative reception). Expenses for honorariums, contributions will be reported on separate addendums and should not be reported.	client and if expenditures are made by may be filed for the lobbyist(s)/firm aggregate total of all expenses pair expenses; (b) the aggregate total of all expenses; (c) that is given to the person of with a value of \$25.00 or less); an orting period of greater than \$25.00 for the of greater than \$25, purchase of expenses reimbursement, or political expenses reimbursement reimburse
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$ 851.46
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) \$
c) Total of all itemized expenditures reported in detail in section VI.	c) \$

d) Total expenses for this reporting period (Add lines a, b and c)	<sub>d)</sub> \$ 851.46
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) \$
f) Total of all expenses year to date	<sub>f) \$</sub> 851.46
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from leading period, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
	\$
· · · · · · · · · · · · · · · · · · ·	\$
	\$
<del></del>	\$
	\$
	\$
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm is true and complete to the best of my knowledge and belief.	n that the foregoing information
Mostro Wann	1/19/2024
(Signature of lobbyist)	(Date)
Christina Warriner (Print Name of lobbyist)	
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# STATE OF NEW HAMPSHIRE

Lobbyists Report of Political Contributions Addendum C (RSA Chapter 15:6)

II. Name of lobbyist's partnership, firm or corporation, if any:					
Reproductive (Name of partners)	e tauty	Now			
` <del>-</del>	-		1/12/11		
III. Name of Client	_		Date1/23/24		
Political Contributions	414 :		ton 664 maid on bahalf of the		
client/lobbyist and lobbying			ter 664 paid on behalf of the		
	_				
Full name of candidate:	n/a				
	(Last Name)	(First Name)	(Middle Name/Initial)		
Amount of contribution \$	0	Office Candidate is Seekir	ng		
enter an estimated value and th					
Full name of candidate:	(Last Name)	(First Name)			
Full name of candidate:  Amount of contribution \$	(Last Name)  I contribution, provide ibution on the line abo	(First Name) Office Candidate is See a description of the good	(Middle Name/Initial)		
Full name of candidate:  Amount of contribution \$  If the contribution is an in-kind actual cost of the in-kind contri	(Last Name)  d contribution, provide ibution on the line about word "estimate."	(First Name) Office Candidate is See a description of the good ve for amount of contribu	(Middle Name/Initial)  king ds or services provided, and enter the ution. If the actual cost is not known,		
Full name of candidate:  Amount of contribution \$  If the contribution is an in-kind actual cost of the in-kind contrenter an estimated value and the	(Last Name)  I contribution, provide ibution on the line abo	(First Name) Office Candidate is See a description of the good	(Middle Name/Initial)  sking ds or services provided, and enter the ution. If the actual cost is not known,  (Middle Name/Initial)		

If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter the actual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not known, enter an estimated value and the word "estimate."	
(If more than three contributions were made, report additional contributions on separate addendum C forms.)  Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm that the foregoing information is true and complete to the best of my knowledge and belief.	
(Signature of lobbyist)  (Print Name of lobbyist)  (Date)	

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# 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:	<i>~</i>
Name of Lobbying partnership, firm, or corporation: Reproductive Equity	Now
Name of Client (leave blank if Statement is for the partnership, firm, or corporation and no	
particular client):	
Date of Report (check one):	
April 26, 2023	<b>.</b>
I have read RSA 15, RSA 15-B, RSA 664, the Statement of Income and Expenses describe following Addendums submitted with that Statement (insert the number of Addendus submitted):	
Addendum A(s)	
Addendum B(s).	
Addendum C(s).	
I hereby swear or affirm that the foregoing information on the Statement and each Adden complete to the best of my knowledge and belief.	dum is true and
(Signature of lobbyist) 1/23/24 (Date)	
(Signature of lobbyist) (Date)	
Christina Warriner	
(Print Name of lobbyist)	