

STATE OF NEW HAMPSHIRE

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

RECEIVED

JAN 1 3 2023

NEW HAMPSHIRE DEPARTMENT OF STATE

PLEASE PRINT

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	Wellness Way	Canton	MA	02021
siness Address		(Town/City)	(State)	(Zip Code)
781-	612-4745	511	e-mail stefani.reardor	@point32health.org
(Telep	hone)	(Fax)		35 E
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ON		727	1/12/2023	
Signature of k	obbyist)		(Date). (2)
Stefani R	- di	8		***
د القاشات	lobbyist)		20 No. 10 No.	572

STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

RECEIVED

JAN 1 3 2023

NEW HAMPSHIRE DEPARTMENT OF STATE

II. Name of Lobbyist's partnership, firm or corporation, if any: Point32Health: (Name of pertnership, firm or corporation) III. Name of Client Harvard Pilgrim Health Care Date 1/12/2023 IV. Fees Received Indicate the gross amount of all fees received from the client identified above that are related, directly or indirect to lobbying, including, fees for services such as public advocacy, government relations, or public relations service to the lobbying, including, fees for services such as public advocacy, government relations, or public relations service to the lobbying, including, fees for services such as public advocacy, government relations, or public relations service to the lobbying, including fees for services such as public advocacy, government relations, or public relations servince during from the lobby of the gross fee amount, reported shall no reduced by any expenses: a) Total of all fees received in this reporting period b) Total of all fees received this calendar year, prior to this reporting period c) Total of all fees received to date (Add lines a and b) c) Total of all fees received to date (Add lines a and b) c) Total of all fees received to date (Add lines a and b) c) Expenses are to be filed for expenditures made relative to each client and if expenses made from tobby sets (S) Lobbyist(S)/Lobbyi	•	34 <u>.</u>	. E.	194	1.00		
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a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying. b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less. b) \$	A THAT		•		7. March 12 11		55
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	a) Total aggreg	gate expenses for this rep nd office expenses, relat	porting period for sala	ries, benefits,	a) \$		
	b) Total aggre	gate of expenditures dur			b) \$		
					20 C)		3

d) Total expenses for this reporting per (Add lines a, b and c)	riod	(d) \$	60 · 1	<u></u>
e) Total of expenses paid this calendar (This should be the amount on line fo	year, prior to this reporti f addendum A for last mo	ng period e) \$_ onth's report)	# #3	<u> </u>
f) Total of all expenses year to date		n s	af	
VI. Other Expenses: Provide the following detail for all expended, including by whom paid or to w	enditures of more than \$2.	5 made from lobbying	fees during this report	ing: 19
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Sworn Statement/Affirmation by L		71	W	
				825
I have read RSA 15, RSA 15-B and R is true and complete to the best of my	ISA 664 and hereby sw	vear or affirm that th	e foregoing informat	ion.
	and benefit	w <u>.</u>		ស្នេ ស៊ី
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(Signature of lobbyist)	5	7 10 10 10 10 10 10 10 10 10 10 10 10 10	(Date)	
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