

STATE OF NEW HAMPSHIRE

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

PECEIVED

JAN 12 2024

NEW HAMPSHIRE DEPARTMENT OF STATE

PLEASE PRINT

I. Name of Lo	bbyist(s) Rebecc	a Lond	lon			
II. Name of lo	bbyist's partnership, i	firm or co	rporation, if any	7:		
DraftKing	gs Inc.					
	(Name of partnership,	firm or cor	poration)			
222	Berkeley St., 5	th Floor	Boston	N	/IA	02116
Business Addres	ss: (Street)		(Town/City)	(S	tate)	(Zip Code)
(202) 849-	-9002	()		e-mail	DraftKings@g	obergroup.com
(Tele	phone)	- \ /-	(Fax)			
reportable exp	ment covers: (Choose pense transactions whith ble transactions occurring the mentions occurrence occurring the mentions occurring the men	ch are no	t attributable to	any one client).		ile a separate report for
DraftKin ç		ng m me n	ionais prior to ar	e reporting date it	ciative to the fo	nowing oneit.
	="	Client as it a	ppears on the Lobb	yist Registration Fo		
	ole transactions by the loy particular client.	obbyist (in	cluding the lobby	vist's family), or t	he lobbying fire	m listed below which are
If this box is ch	eport April 26, 202. activity from date of re October 25, 20 activity from 7/1/23 re been no fees receivecked, complete just the oom 204, Concord, NH	egistration in 1923 [1923] to 9/30/23 [1924] wed and in its form and	<i>a</i> 10 reportable t		23 to 6/30/23 2024 2 3 to 12/31/23 de since the l	
VI. Check if a If you have If you have Expense Reim	dditional reports are a e received fees or made e paid an honorarium or oursement	expenditu reimburse	ed expenses, you	must file Addend	lum B– Report	
I have year RS.	othe best of my knowled obbyist) London	14-C and I		eby swear or affirm	m that the foreg	going information is true

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PDE Actio			.	
. 4504	(Name of partnership, firm or con			
c/o 1501	Wilson Blvd., Ste. 1050		VA	22209
Business Address:	(Street)	(Town/City)	(State)	(Zip Code)
₂₀₂₎ <u>849-9</u>	().		e-mail PDEAction@g	gobergroup.com
(Telepho	one)	(Fax)		
71	nse transactions which are no e transactions occurring in the 1	·	,	ollowing client:
	(Full Name of Client as it	appears on the Lobbyist	Registration Form)	
<u>)R</u>	(11		
All reportable nrelated to any p	transactions by the lobbyist (in particular client.	ncluding the lobbyist's	s family), or the lobbying fir	m listed below which a
V. Date of Reports cover:	ort April 26, 2023 activity from date of registration	to 3/31/23 ac	July 26, 2023	
	October 25, 2023 activity from 7/1/23 to 9/30/23	activi	January 31, 2024 (ty from 10/1/23 to 12/31/23	
f this box is chec	been no fees received and was ked, complete just this form and m 204, Concord, NH 03301.			
1. Check if add	itional reports are attached:			
	eceived fees or made expenditu			
If you have p xpense Reimbur	aid an honorarium or reimburs rsement	ed expenses, you mus	t file Addendum B – Report	t of Honorariums or
If you, your f	irm, or your family has made p	political contributions,	, you must file Addendum (C- Political Contributio
	t/Affirmation by Lobbyist			
	15, RSA 15-B, RSA 14-C and he best of my knowledge and b			_
X. Cluy Signature of lob	y Verter byist)		1-8-W (Date)	
Alexis Nes			` ,	
Print Name of lo	hhvist)			