

(Print Name of lobbyist)

STATE OF NEW HAMPSHIRE

2021 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

RECEIVED

OCT **26** 2021

NEW HAMPSHIRE DEPARTMENT OF STATE

I. Name of Lobbyist	(s) Erin Smith			
II. Name of lobbyist	's partnership, firm o	or corporation, if a	ny:	
N/A				•
(Na	me of partnership, firm o	r corporation)		
203 Trumbul	l Street	Hartford	CT	06103
Business Address: (S	treet)	(Town/City)	(State)	(Zip Code)
(860) 757-5221 (Telephone)		1	e-mail erin.smith	2@td.com
(Telephone)		(Fax))	
reportable expense t ✓ All reportable train	ransactions which ar	the months prior to	rts for each client, OR you may to any one client). the reporting date relative to the form	, .
TD Balk 03	Holding Com	• •	obbyist Registration Form)	
OR	(I all Ivalie of Chem	as it appears on the Ed		
All reportable tran	•	st (including the lob	obyist's family), or the lobbying fi	rm listed below which are
IV. Date of Report Reports cover: acti	April 28, 2021 vity from date of registra October 27, 2021 activity from 7/1/21 to	abla	July 28, 2021 activity from 4/1/21 to 6/30/21 January 26, 2022 activity from 10/1/21 to 12/31/21	
If this box is checked,		n and submit it to th	e transactions made since the he Secretary of State's Office, 107	
VI. Check if addition	nal reports are attacl	ied:		
If you have receive	ved fees or made expe	nditures, you must f	file Addendum A– Fees and Expe	enses
If you have paid Expense Reimbursem		bursed expenses, yo	ou must file Addendum B - Repor	t of Honorariums or
☐ If you, your firm,	, or your family has ma	ade political contrib	utions, you must file Addendum	C- Political Contribution
I have read RSA 15, I and complete to the b	est of my knowledge a Digitally signed by Erin Date: 2021.10.25 13:1	and RSA 664 and hand belief.	ereby swear or affirm that the fore	egoing information is true
(Signature of lobbyis	st)		(Date)	
Erin Smith				