STATE OF NEW HAMPSHIRE

2022 Statement of Income and Expenses for LOBBYISTS

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NEW HAMPSHIRE DEPARTMENT OF STA

(RSA Chapter 15) PLEASE PRINT

I. Name of Lobbyist(s) Kathy Sanchez		DEPARTMENT OF STA
II. Name of lobbyist's partnership, firm or corporation, if any:		
Institute for Justice		
(Name of partnership, firm or corporation)		
901 N. Glebe Road, S Arlington	VA -	22203
Business Address: (Street) (Town/City)	(State)	(Zip Code)
703-682-9320	e-mail_ksanche	ez@ij.org
(Telephone) (Fax)		
III. This statement covers: (Choose one – file separate reports for eac reportable expense transactions which are not attributable to any on	e client).	
All reportable transactions occurring in the months prior to the report	ing date relative to the	following client:
Institute for Justice		
(Full Name of Client as it appears on the Lobbyist Reg	istration Form)	
OR	ood oo ah	Same listed halass subject are
All reportable transactions by the lobbyist (including the lobbyist's far unrelated to any particular client.	mily), or the lobbying i	iirm fisted below which are
Reports cover: activity from date of registration to 3/31/22 activity October 26, 2022	fuly 27, 2022 from 4/1/22 to 6/30/22 Innuary 25, 2023 from 10/1/22 to 12/31/2 tions made since the ry of State's Office, 10	e last report.
If you have received fees or made expenditures, you must file Adden	idum A- Fees and Exp	enses
If you have paid an honorarium or reimbursed expenses, you must fil Expense Reimbursement	e Addendum B- Repo	ort of Honorariums or
If you, your firm, or your family has made political contributions, yo	u 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 swe and emplete to the best of my knowledge and belief. (Signature of lobbyist) Kathy Sanchez	ar or affirm that the for $1/25/23$ (Date)	regoing information is true
(Print Name of lobbyist)		