



STATE OF NEW HAMPSHIRE
2010 Statement of Income and Expenses
for LOBBYISTS
(RSA Chapter 15)

RECEIVED

JAN 27 2011

PLEASE PRINT

NEW HAMPSHIRE
 SECRETARY OF STATE

I. Name of Lobbyist(s) Lisa Kaplan Howe

II. Name of lobbyist's partnership, firm or corporation, if any:

Public Policy Institute
 (Name of partnership, firm or corporation)

4 Park St, Suite 403 Concord, NH 03301
 Business Address: (Street) (Town/City) (State) (Zip Code)

(603) 369 47 (Telephone) () (Fax) e-mail lisa@nhvoicesforhealth.org

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 month prior to the reporting date relative to the following client:

NH Voices for Health
 (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.

IV. Date of Report April 28, 2010 July 28, 2010
Reports cover: activity from date of registration to 3/31/10 activity from 4/1/10 to 6/30/10
 October 27, 2010 January 26, 2011
activity from 7/1/10 to 9/30/10 activity from 10/1/10 to 12/31/10

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, 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

- no fees received this period

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.

Lisa Kaplan Howe
 (Signature of lobbyist)

1/25/11
 (Date)

Lisa Kaplan Howe
 (Print Name of lobbyist)