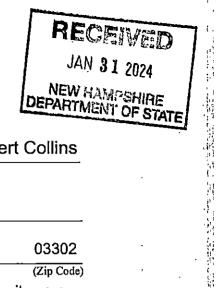


STATE OF NEW HAMPSHIRE

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



PLEASE PRINT

l. Name of L	obbyist(s) Gina F	Powers/R	ichard Parsor	s/Kyle Baker/Ro	bert Collins	
II. Name of I	obbyist's partnershi	p, firm or co	rporation, if any:			
RYP Gra	anite Strategie	S				
	(Name of partners)	nip, firm or cor	poration)	 		
One	Capital Plaza; F	PO Box 1500	Concord	NH	03302	
Business Addr	ess: (Street)		(Town/City)	(State)	(Zip Code)	
, (603	3) 410-4350	()		e-mail grp@rype	e-mail grp@rypgranite.com	
(Tel	lephone)	\	(Fax)			
III. This stat	ement covers: (Choo	se one – file	separate reports for	each client, OR you may	y file a separate repo	
eportable e	xpense transactions	which are no	t attributable to any	one client).		
All report	table transactions occ	vering in the r	nonths prior to the re	porting date relative to the	a following client:	
-		•	•	porting date relative to the	, ionowing chem.	
boys ar	nd Girls Clubs			D 1		
OR .	(Full Name	of Client as it a	ppears on the Lobbyist	Registration Form)		
=	able transactions by the	ie lobbyist (in	cluding the lobbyist'	s family), or the lobbying	firm listed below whi	
	my particular client.			<i>,</i> ,, ,g		
If this box is a	October 25 activity from 7/1 ave been no fees re	5, 2023	<i>activi</i> 10 reportable tran	January 31, 2024 January 31, 2024 ty from 10/1/23 to 12/31/23 sactions made since the retary of State's Office, 10	ne last report. 🔽	
VI. Check if	additional reports a	re attached:				
				dendum A-Fees and Ex		
If you ha Expense Rein		n or reimburs	ed expenses, you mus	st file Addendum B– Rep	ort of Honorariums or	
- '		lv has made n	olitical contributions	, you must file Addendur	m C- Political Contrib	
	out initing of your turns	.y 1.00 1.1000 p	'	, , , o a mast mo reaction	. C romout commo	
I have read R	ment/Affirmation by SA 15, RSA 15-B, RS to the best of my kno	SA 14-C and I		swear or affirm that the fo	oregoing information i	
(MVd(INCIL .			January 31, 2	024	
(Signature of	flobbyist)			(Date		
Gina R. l				•		
(Print Name						