#### STATE OF NEW HAMPSHIRE

2025 Statement of Income and **Expenses for LOBBYISTS** (RSA Chapter 15)

## RECEIVED

MAY 0 5 2025

**NEW HAMPSHIRE** DEPARTMENT OF STATE

PLEASE PRINT

Greg Moore

I. Name of Lobbvist(s) II. Name of lobbyist's partnership, firm or corporation, if any: Americans for Prosperity-New Hampshire (Name of partnership, firm or corporation) NH 8025 S Willow St #205 Manchester 03103 Business Address: (Street) (Town/City) (State) (Zip Code) e-mail gmoore@afphq.org 603-303-9297 (Telephone) 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 months prior to the reporting date relative to the following client: Americans for Prosperity-New Hampshire (Full Name of Client as it appears on the Lobbyist Registration Form) 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 30, 2025 July 30, 2025 activity from 4/1/25 to 6/30/25 Reports cover: activity from date of registration to 3/31/25 October 29, 2025 January 28, 2026 activity from 7/1/25 to 9/30/25 activity from 10/1/25 to 12/31/25 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, 107 North Main Street, 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 Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15-B, RSA 14-C and RSA 664 and hereby swear or affirm that the foregoing information is true and complete to the best of my knowledge and belief. 4/23/2025 (Signature of lobbyist) (Date) **Gred Moore** (Print Name of lobbyist)

#### STATE OF NEW HAMPSHIRE



# Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s) Greg Moore	
II. Name of lobbyist's partnership, firm or corporation, if any Americans for Prosperity-New Hampshire	
(Name of partnership, firm or corporation)	4/00/00F
III. Name of Client Americans for Prosperity-New Har	npsnire Date 4/23/2025
IV. Fees Received Indicate the gross amount of all fees received from the client identified to lobbying, including fees for services such as public advocacy, gove including research, monitoring legislation, and related legal work. reduced by any expenses:	rnment relations, or public relations service The gross fee amount reported shall not b
a) Total of all fees received in this reporting period	<sub>a) \$</sub> 6,504.24
b) Total of all fees received this calendar year, prior to this reporting p (This should equal the total of all prior monthly reports for this cale	
c) Total of all fees received to date (Add lines a and b)	<sub>c)</sub> \$_6,504.24
d) Indicate the amount of any such fees that are due, but have not yet been paid	c) \$ 6,504.24 d) \$ 0.00
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required fees. Separate reports are to be filed for expenditures made relative to the lobbyist(s)/firm that are unrelated to any one client a separate of Expenses are to be reported in one of three categories of expenses: during the reporting period for salaries, benefits, support staff, and of individual expenses where the expenditure was of \$25.00 or less (for lunch where the cost was \$25.00 or less, purchase of a pen with a value being lobbied, purchase of a ceremonial object given to a person being (c) an itemized statement of each individual expenditure made during the any purpose not covered by (a) (for example: purchase of a meal we ceremonial object to be given to the subject of lobbying with a value restaurant expenses for a legislative reception). Expenses for honor contributions will be reported on separate addendums and should not be	to each client and if expenditures are made by report may be filed for the lobbyist(s)/firm (a) the aggregate total of all expenses pain ffice expenses; (b) the aggregate total of all example: meals purchased during a business are of less than \$10 that is given to the person a lobbied with a value of \$25.00 or less); and the interpretation of greater than \$25.00 for ith value of greater than \$25, purchase of the greater than \$25, but not greater than \$50 ariums, expense reimbursement, or political
a) Total aggregate expenses for this reporting period for salaries, benef support staff, and office expenses, related directly or indirectly to lobby	ing. a) \$
b) Total aggregate of expenditures during this reporting period, not repin a), of \$25 or less.	b) \$ 420.17
c) Total of all itemized expenditures reported in detail in section VI.	c) \$ 0.00

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$ 420.17			
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$ <u>0.00</u>			
f) Total of all expenses year to date	<sub>f)</sub> \$ 426.17	-		
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from period, including by whom paid or to whom charged.	lobbying fees during thi	s reporting		
Paid to:	Amount:			
<u></u>	\$			
<u></u>	\$	•		
		· ·		
· ·	\$			
	<b>\$</b>	•		
	\$ ·	<del></del> .		
	· · · · · · · · · · · · · · · · · · ·			
Sworn Statement/Affirmation by Lobbyist				
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affinistrue and complete to the best of my knowledge and belief.	rm that the foregoing i	nformation		
Dez Moore	4/23/2025			
(Signature of lobbyist)	(Date)			
Greg Moore				
(Print Name of lobbyist)				



## STATE OF NEW HAMPSHIRE

Lobbyists Report of Political Contributions Addendum C (RSA Chapter 15:6)

Americans for Prosi	oartnership, firm	or corporation	n, ii any:			
Amendana lor i 10a	perity-New Han	npshire				
(Name of )	partnership, firm or corpo	oration)	• .			٠.
III. Name of Client Am	ericans for Pro	sperity-New	Hampshire	Date 4/2	23/2025	
THE PUBLIC OF CHOICE		*		Date		
Political Contributions	· ·					
For each political contri client/lobbyist and lobby				pter 664 paid o	n behalf of the	•
cheni/loodylst and lood	ying min, mulcate	the lonowing	•			
	01 1	1				•
Full name of candidate:	Stephen	•	lohn	Α.		
	(Last Name	e) (F	irst Name)		Name/Initial)	
Amount of contribution \$	500	Office Ca	ndidate is Seek	ing Executiv	e Council	٠, .
	·	<del></del>			· · · .	
If the contribution is an in-						
actual cost of the in-kind o			nount of contril	oution. If the ac	tual cost is not k	now
enter an estimated value ar	nd the word estima	ite.				
			•			
			·. ·			
Full name of candidate:		e) (F	irst Name)	(Middle	Name/Initial)	
Full name of candidate:	(Last Name	-/			,	
Full name of candidate:  Amount of contribution \$	(Last Name		Candidate is Se	eking		
Full name of candidate:  Amount of contribution \$	(Last Nam		Candidate is Se	eking		
Amount of contribution \$ If the contribution is an in	-kind contribution, p	Office	ption of the goo	ods or services p	rovided, and en	
Amount of contribution \$  If the contribution is an in actual cost of the in-kind of	kind contribution, p	Office provide a descri	ption of the goo	ods or services p	rovided, and en	
Amount of contribution \$	kind contribution, p	Office provide a descri	ption of the goo	ods or services p	rovided, and en	
Amount of contribution \$ If the contribution is an in actual cost of the in-kind of	kind contribution, p	Office provide a descri	ption of the goo	ods or services p	rovided, and en	
Amount of contribution \$  If the contribution is an in actual cost of the in-kind of	kind contribution, p	Office provide a descri	ption of the goo	ods or services p	rovided, and en	
Amount of contribution \$  If the contribution is an in actual cost of the in-kind of	kind contribution, p	Office provide a descri	ption of the goo	ods or services p	rovided, and en	
Amount of contribution \$ If the contribution is an in actual cost of the in-kind of	kind contribution, p	Office provide a descri	ption of the goo	ods or services p	rovided, and en	
Amount of contribution \$ If the contribution is an in- actual cost of the in-kind center an estimated value as	kind contribution, p contribution on the l and the word "estima	Office provide a descri	ption of the goo	ods or services p	rovided, and en	
Amount of contribution \$  If the contribution is an in actual cost of the in-kind of	kind contribution, p contribution on the l and the word "estima	Office provide a descriine above for ante."	ption of the goo	ods or services poution. If the ac	rovided, and en	

	n-kind cont	ribution o	on the line	above for			or services provided on. If the actual co	
						٠	,	
(If more than three c	ontributions	were made	e, report ado	litional co	ntributions o	n separate a	addendum C forms.)	
Sworn Statemen	nt/Affirma	ıtion by	Lobbyist	t				• • • •
is true and comp	Thou		ny knowk	age and	, bener.		4/23/2025	
(Signature of lo	obyist)					• • •	(Date)	
			•		:			•
Greg Moore		• •		•				
Greg Moore (Print Name of )	obbyist)			· · · · ·				
	obbyist)							