

STATE OF NEW HAMPSHIRE

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

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PLEASE PRINT

MAR 0 4 2021

II. Name of lobbyist's partnership, firm or corporation, if any: Rape Abuse & Incest National Network (Name of partnership, firm or corporation) 1220 L Street NW Washington DC 20005 Business Address: (Street) (Town/City) (State) (Zip Code)	I. Name of Lobbyist(s)	Sean Holihan		NEW HAMPSHIR
(Name of partnership, firm or corporation) 1220 L Street NW Washington DC 20005 Business Address: (Street) (Town/City) (State) (Zip Code) (571) 488-5742 () e-mail seanh@rainn.org (Telephone) (Fax) III. This statement covers: (Choose one – file separate reports for each client, OR you may file a separate report	II. Name of lobbyist's pa	rtnership, firm or corporation, if	any:	DEPARTMENT OF S
1220 L Street NW Washington DC 20005 Business Address: (Street) (Town/City) (State) (Zip Code) (571) 488-5742 () e-mail seanh@rainn.org (Fax) III. This statement covers: (Choose one – file separate reports for each client, OR you may file a separate report	Rape Abuse & Inc	est National Network		
Business Address: (Street) (Town/City) (State) (Zip Code) (571) 488-5742 () e-mail seanh@rainn.org (Fax) III. This statement covers: (Choose one – file separate reports for each client, OR you may file a separate report	(Name of	partnership, firm or corporation)		
(571) 488-5742 () e-mail seanh@rainn.org (Telephone) (Fax) III. This statement covers: (Choose one – file separate reports for each client, OR you may file a separate report	1220 L Street NW	Washingto	n DC	
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III. This statement covers: (Choose one – file separate reports for each client, OR you may file a separate report	(571) 488-5742	()	e-mail <u>seanl</u>	h@rainn.org
	(Telephone)	(Fa	x)	
reportable expense transactions which are not attributable to any one clienty.				may file a separate report for
	reportable expense trans	actions which are not attributable	e to any one chent).	
X All reportable transactions occurring in the months prior to the reporting date relative to the following client:	★ All reportable transact	ions occurring in the months prior to	o the reporting date relative to	the following client:
Dana Abusa O Imaash Nakanal Nakusala	D Ab 0 I	anat National National		
Rape Abuse & Incest National Network (Full Name of Client as it appears on the Lobbyist Registration Form)			_obbyist Registration Form)	
<u>OR</u>	·			
All reportable transactions by the lobbyist (including the lobbyist's family), or the lobbying firm listed below which			obbyist's family), or the lobbyi	ing firm listed below which are
unrelated to any particular client.	unrelated to any particular	client.		
IV. Date of Report April 28, 2021	IV Date of Depart A	nril 28, 2021 🔯	Inly 28, 2021. □	
Reports cover: activity from date of registration to 3/31/21 activity from 4/1/21 to 6/30/21	-	•	• •	21
October 27, 2021 January 26, 2022 January 26, 2022 January 26, 2022 January 26, 2022 January 26, 2022 January 26, 2022 January 26, 2022 January 26, 2022 January 26, 2022 January 26, 2022 January 26, 2022 January 26, 2022 January 26, 2022 January 26, 2022 Janua	-	October 27, 2021	January 26, 2022 □	
activity from 7/1/21 to 9/30/21 activity from 10/1/21 to 12/31/21	activ	ity from 7/1/21 to 9/30/21	activity from 10/1/21 to 12/	31/21
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.	If this box is checked, com	plete just this form and submit it to		
VI. Check if additional reports are attached:	VI Check if additional r	enorts are attached:		
☐ If you have received fees or made expenditures, you must file Addendum A − Fees and Expenses		-	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	•	onorarium or reimbursed expenses,	you must file Addendum B – I	Report of Honorariums or
☐ If you, your firm, or your family has made political contributions, you must file Addendum C - Political Contributions.	*	our family has made political contri	ibutions, you must file Adden	dum C- Political Contributions
Sworn Statement/Affirmation by Lobbyist	Sworn Statement/Affirm	ation 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 to and complete to the best of my knowledge and belief.	I have read RSA 15, RSA	75-B, RSA 14-C and RSA 664 and	hereby swear or affirm that th	e foregoing information is true
3/1/2021			2/1/2021	
(Signature of lobbyist) (Date)	(Signature of lobbyist)		$\frac{J(1+C)^{2}I}{(I)}$	Date)
Sean Holihan (Print Name of lobbyist)				