

## STATE OF NEW HAMPSHIRE

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

## RECEIVED

APR 21 2025

NEW HAMPSHIRE DEPARTMENT OF STATE

## (RSA Chapter 15) PLEASE PRINT

I. Name of Lo	obbyist(s) Jessica Power			
	obbyist's partnership, firm or co	erporation, if any:		
Students	for Life Action			
•	(Name of partnership, firm or cor	poration)		
1000	Winchester St., Ste. 301	Fredericksburg	VA	22401
Business Addre	ess: (Street)	(Town/City)	(State)	(Zip Code)
540-	-834-4600 ( )		e-mail jpower@stu	identsforlife.org
(Tele	ephone)	(Fax)		-
reportable ex	ement covers: (Choose one – file pense transactions which are not able transactions occurring in the s	ot attributable to any one	client).	
	for Life Action	nondis prior to the report	ng date relative to the	ionowing chem.
Students				<del></del>
OR	(Full Name of Client as it	appears on the Lobbyist Regi	stration Form)	
	ble transactions by the lobbyist (in any particular client.	cluding the lobbyist's fam	ily), or the lobbying f	irm listed below which are
IV. Date of R Reports cover:	activity from date of registration to	3/31/25 activity f	uly 30, 2025 from 4/1/25 to 6/30/25	
	October 29, 2025 activity from 7/1/25 to 9/30/25		uary 28, 2026 m 10/1/25 to 12/31/25	
If this box is c	ve been no fees received and checked, complete just this form an Room 204, Concord, NH 03301.			
VI. Check if	additional reports are attached:			
If you hav	ve received fees or made expendit	ures, you must file Adden	dum A– Fees and Exp	penses
If you hav Expense Rein	ve paid an honorarium or reimburs ibursement	ed expenses, you must file	e Addendum B– Rep	ort of Honorariums or
If you, yo	our firm, or your family has made	political contributions, you	n must file <b>Addendu</b> n	n C-Political Contribution
I have read RS	nent/Affirmation by Lobbyist SA 15, RSA 15-B, RSA 14-C and to the best of my knowledge and l		ar or affirm that the fo	regoing information is true
Jessi	ca Power	0	4/16/2025	
(Signature of		<del></del>	(Date	)
Jessica F	Power		-	
(Print Name				

## State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

(Print Name of lobbyist)

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for: Name of Lobbying partnership, firm, or corporation: Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any Students for Life Action particular client): Date of Report (check one): April 30, 2025 ☑ July 30, 2025 □ October 29, 2025 

January 28, 2026 

January 28, 2026 I have read RSA 15, RSA 15-B, RSA 664, the Statement of Income and Expenses described above, and the following Addendums submitted with that Statement (insert the number of Addendum forms being submitted): Addendum A(s). Addendum B(s). Addendum C(s). I hereby swear or affirm that the foregoing information on the Statement and each Addendum is true and complete to the best of my knowledge and belief. 04/16/2025 (Date) Jessica Power