

STATE OF NEW HAMPSHIRE

2020 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

PECEIVED

JAN 26 2021

NEW HAMPSHIRE DEPARTMENT OF STATE

PLEASE PRINT

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	ame of partnership, firm or	corporation)	-		<u> </u>	_
One Capital Pla	aza, PO Box 150	10	Concord	ν.	TLI I	02202 1500
	aza, FO BOX 130	(Town/City)	Concord	(State)	IH (03302-1500 (Zip Code
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(603 <u>410-4307</u> (Telephone)		(Fa	nv)	_ e-mail <u>dgc(</u>	@rypgra	anite.com_
(Telephone)		(i a	<i>ix)</i>			
	covers: (Choose one – fi				u may file	e a separate r
eportable expense	transactions which are	not attributable	e to any one	client).		
All reportable tra	nsactions occurring in th	e months prior t	o the reporti	no date relative t	to the fall	lowing client:
z m repertable tra	mountains occurring in the	e months prior t	o the report	ng date relative	to the for	lowing chem.
American Exp						
O.D.	(Full Name of Client as	it appears on the I	Lobbyist Reg	stration Form)		
<u>OR</u>						
	nsactions by the lobbyist	(including the lo	obbyist's far	nily), or the lobb	ying firm	listed below
unrelated to any parti	icular client.					
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