

STATE OF NEW HAMPSHIRE

2024 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

RECEIVED

JAN 22 2025

NEW HAMPSHIRE DEPARTMENT OF STATE

PLEASE PRINT

I. Name of Lobbyist(s) Mel. 55a	Blasck		
II. Name of lobbyist's partnership, firm o			
(Name of partnership, firm or	r corporation)		
Business Address: (Street)	(Town/City)	(State)	(Zip Code)
() (Telephone))(Fax)	e-mail	<u> </u>
III. This statement covers: (Choose one – reportable expense transactions which are			file a separate report for
All reportable transactions occurring in the Rebuild IV H	the months prior to the rep		ollowing client:
All reportable transactions by the lobbyis unrelated to any particular client.	st (including the lobbyist's	s family), or the lobbying fi	rm listed below which are
IV. Date of Report April 24, 2024 Reports cover: activity from date of registratio October 30, 2024 activity from 7/1/24 to 9/36		July 31, 2024 ivity from 4/1/24 to 6/30/24 January 29, 2025 y from 10/1/24 to 12/31/24	
V. There have been no fees received as If this box is checked, complete just this form State House, Room 204, Concord, NH 0330	n and submit it to the Secr		
VI. Check if additional reports are attach If you have received fees or made exper If you have paid an honorarium or reimbe Expense Reimbursement If you, your firm, or your family has many	nditures, you must file Ad bursed expenses, you mus	t file Addendum B - Repo	rt of Honorariums or
Sworn Statement/Affirmation by Lobbyis I have read RSA 15, RSA 15-B, RSA 14-C a and complete to the best of my knowledge at	and RSA 664 and hereby		
(Signature of lobbyist) Me 135 Sch Sch (Print Name of lobbyist)		$\frac{1-20-25}{\text{(Date)}}$	