PLEASE PRINT	STATE OF NEW 2024 Statement Expenses for 1 (RSA Cha	t of Income and LOBBYISTS	RECEIVED JAN 29 2025 NEW HAMPSHIRE DEPARTMENT OF STATE
I. Name of Lobbyist(s) Gina Powe	ers/Richard Parsons	s/Kyle Baker/Rober	t Collins
II. Name of lobbyist's partnership, firm RYP Granite Strategies	.F3		
(Name of partnership, firr One Capital Plaza PO Box 1500		NH	03302
Business Address: (Street)	(Town/City)	(State)	(Zip Code)
(603) 410-4350 ((Town/City)		
() $\frac{(003) + 10 - 4330}{(\text{Telephone})}$ ()(Fax)	e-mail grp@rypgra	
III. This statement covers: (Choose one reportable expense transactions which All reportable transactions occurring	are not attributable to any o	one client).	
COMCAST Corporation			
(Full Name of Clie) OR All reportable transactions by the lobb Unrelated to any particular client.	nt as it appears on the Lobbyist R byist (including the lobbyist's f		listed below which are
IV. Date of Report April 24, 202 Reports cover: activity from date of registra October 30, 2024 activity from 7/1/24 to 9	ution to 3/31/24 activ 4 J	July 31, 2024 July 31, 2024 July 570m 4/1/24 to 6/30/24 anuary 29, 2025 from 10/1/24 to 12/31/24	¢
V. There have been no fees received If this box is checked, complete just this for State House, Room 204, Concord, NH 03	orm and submit it to the Secret		
VI. Check if additional reports are atta	ched:		
If you have received fees or made exp If you have paid an honorarium or rei Expense Reimbursement			
If you, your firm, or your family has	made political contributions, y	ou must file Addendum C-	Political Contributions
Sworn Statement/Affirmation by Lobb I have read RSA 15, RSA 15-B, RSA 14- and complete to the best of my knowledge	C and RSA 664 and hereby sw	्य vear or affirm that the foregoi	ng information is true
(NHOINP/A		January 29, 2025	
(Signature of lobbyist)		(Date)	-
Gina R. Powers			
(Print Name of lobbyist)			

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	STATE OF NEW HA Lobbyists Fees and F Addendum	Expenses	
	(RSA Chapter 1	5:6)	
I. Name of Lobbyist(s) Gina Pov	wers/Richard Parsons/Kyl	e Baker/Robe	rt Collins
II. Name of lobbyist's partnership			
RYP Granite Strategies		20	
(Name of partnership, fir			
III. Name of Client COMCAS	T Corp.	Date Januar	y 29, 202
to lobbying, including fees for service	received from the client identified above es such as public advocacy, government ation, and related legal work. The gro	t relations, or public oss fee amount repo	relations serv rted shall no
	porting period	18,600.0	^^
a) Total of all fees received in this rep	for this period	a) 5	00
b) Total of all fees received this caler		a) \$_18,600.0 b) \$_37,400.0 ear)	00
b) Total of all fees received this caler	ndar year, prior to this reporting period		

V. Expenses:

Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to report all expenses made from lobbying fees. Separate reports are to be filed for expenditures made relative to each client and if expenditures are made by the lobbyist(s)/firm that are unrelated to any one client a separate report may be filed for the lobbyist(s)/firm. Expenses are to be reported in one of three categories of expenses: (a) the aggregate total of all expenses paid during the reporting period for salaries, benefits, support staff, and office expenses; (b) the aggregate total of all individual expenses where the expenditure was of \$25.00 or less (for example: meals purchased during a business lunch where the cost was \$25.00 or less, purchase of a pen with a value of less than \$10 that is given to the person being lobbied, purchase of a ceremonial object given to a person being lobbied with a value of \$25.00 or less); and (c) an itemized statement of each individual expenditure made during this reporting period of greater than \$25.00 for any purpose not covered by (a) (for example: purchase of a meal with value of greater than \$25, purchase of a ceremonial object to be given to the subject of lobbying with a value greater than \$25, but not greater than \$50, restaurant expenses for a legislative reception). Expenses for honorariums, expense reimbursement, or political contributions will be reported on separate addendums and should not be reported on Addendum A.

a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.

b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.

c) Total of all itemized expenditures reported in detail in section VI.

 d) Total expenses for this reporting period (Add lines a, b and c) 	_{d)} \$ _18,600.00
	e) \$ <u>37,400.00</u>
	ŋs_56,000.00

Amount:

VI. Other Expenses:

Provide the following detail for all expenditures of more than \$25 made from lobbying fees during this reporting period, including by whom paid or to whom charged.

Paid to:

	 \$
	 -
. <u> </u>	 \$
	 \$\$
	 \$\$
	 \$\$

Sworn Statement/Affirmation by Lobbyist

I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm that the foregoing information is true and complete to the best of my knowledge and belief.

(Signature of lobbyist)

January 29, 2025

(Date)

Gina R. Powers

(Print Name of lobbyist)

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