

STATE OF NEW HAMPSHIRE

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

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JUL 3 1 2024

NEW HAMPSHIRE
DEPARTMENT OF STATE

PLEASE PRINT

I. Name of Lobbyist(s) S	tacey Ober			
II. Name of lobbyist's par	tnership, firm or o	corporation, if any:		-
(Name of	partnership, firm or c	orporation)		
8051 Arco	Corporate Dr.	Raleigh	NC	27617
Business Address: (Street)		(Town/City)	(State)	(Zip Code)
9198163348	()	_{e-mail} stacey.o	ber@akc.org
(Telephone)		(Fax)		
III. This statement covers	: (Choose one – fil	e separate reports fo	r each client, OR you ma	y file a separate report for
reportable expense transa	ections which are r	ot attributable to an	y one client).	
All reportable transaction	ons occurring in the	months prior to the r	eporting date relative to the	e following client:
American Kennel		•		
		t appears on the Lobbyis	st Registration Form)	
<u>OR</u>		1,		
All reportable transaction	ns by the lobbyist (including the lobbyist	's family), or the lobbying	; firm listed below which are
unrelated to any particular	chent.			
	April 24, 2024 date of registration tober 30, 2024 from 7/1/24 to 9/30/2		July 31, 2024 ctivity from 4/1/24 to 6/30/24 January 29, 2025 ity from 10/1/24 to 12/31/24	
V. There have been no If this box is checked, comp State House, Room 204, Co	fees received and	l no reportable tra	nsactions made since t	he last report.
VI. Check if additional re	ports are attached	:		
			ddendum A- Fees and Ex	rpenses
If you have paid an hor			ist file Addendum B- Rej	
Expense Reimbursement	ur familu has made	nalitical contribution	a vou must file tiddend	m C- Political Contributions
II you, your min, or yo	at faithfy has made	pointeat contribution	s, you must me Audendu	m C– Ponucai Conmounons
Sworn Statement/Affirma I have read RSA 15, RSA 1 and complete to the best of	5-B, RSA 14-C and		swear or affirm that the f	oregoing information is true
Some 1	t /2	_	7-26-24	
(Signature of lobbyist)	- G		(Dat	e)
Stacey Ober				
(Print Name of lobbyist)				

P L E A S E P R I N T

STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A

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NEW HAMPSHIRE DEPARTMENT OF STATE



(RSA Chapter 15:6)

I. Name of Lobbyist(s) Stacey Ober	
II. Name of lobbyist's partnership, firm or corporation, if any:	
(Name of partnership, firm or corporation) III. Name of Client American Kennel Club	Date 7-26-24
 IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The groreduced by any expenses: a) Total of all fees received in this reporting period b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year) 	relations, or public relations services oss fee amount reported shall not be a) \$\frac{3805.02}{50}\$ \$\frac{3805.02}{50}\$ ear)
 c) Total of all fees received to date (Add lines a and b) d) Indicate the amount of any such fees that are due, but have not yet been paid 	c) \$ 7610.04 d) \$ 0
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to rep fees. Separate reports are to be filed for expenditures made relative to each of the lobbyist(s)/firm that are unrelated to any one client a separate report of Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office exindividual expenses where the expenditure was of \$25.00 or less (for example lunch where the cost was \$25.00 or less, purchase of a pen with a value of less being lobbied, purchase of a ceremonial object given to a person being lobbie (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greate restaurant expenses for a legislative reception). Expenses for honorariums, contributions will be reported on separate addendums and should not be reported.	client and if expenditures are made by may be filed for the lobbyist(s)/firm. aggregate total of all expenses paid apenses; (b) the aggregate total of all expenses; (b) the aggregate total of all expenses; (b) the aggregate total of all expenses; (b) that is given to the person of with a value of \$25.00 or less); and orting period of greater than \$25.00 for the of greater than \$25, purchase of a er than \$25, but not greater than \$50, expense reimbursement, or political
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$ 3805.02
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) \$
c) Total of all itemized expenditures reported in detail in section VI.	c) \$

d) Total expenses for this reporting period (Add lines a, b and c)	_{d) \$} 3805.02
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report) f) Total of all expenses year to date VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from leading period, including by whom paid or to whom charged.	e) \$ f) \$ 7610.04 Obbying fees during this reporting
Paid to:	Amount:
	\$
	\$
	\$
	\$
	\$
	\$
Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm	
is true and complete to the best of my knowledge and belief.	
(Signature of lobbyist)	7-26-24 (Date)
Stacey Ober	(Date)
(Print Name of lobbyist)	

JUL 3 1 2024 NEW HAMPSHIRE DEPARTMENT OF STATE

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 Date of Report (check one); July 31, 2024 April 24, 2024 🗆 October 30, 2024 January 29, 2025 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. 7/24/24