

STATE OF NEW HAMPSHIRE

2021 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

JAN 2 0 2022

NEW HAMPSHIRE DEPARTMENT OF STATE

PLEASE PRINT

I. Name of Lobbyist(s) Tyler Coward

II. Name of lobbyist's partnersh	ip, firm or corp	oration, if any:		
(Name of partners	hip, firm or corpor	ation)		
Business Address: (Street)	(Town/City)		(State)	(Zip Code)
()(Telephone)	()	(Fax)	e-mail	
III. This statement covers: (Cho reportable expense transactions				file a separate report fo
All reportable transactions occ				following client
Foundation for Individ	-		_	ionowing chem.
	<u>~</u>	ears on the Lobbyist		
OR	or choire as it upp	ours on the Boody is	registration I offin)	
All reportable transactions by t	he lobbyist (incl	iding the lobbyist'	s family), or the lobbying t	irm listed below which a
nrelated to any particular client.	,	-		
				
V. Date of Report April 28,		·	July 28, 2021	·;
Reports cover: activity from date		3/31/21 act	ivity from 4/1/21 to 6/30/21	
October 2			January 26, 2022	_
activity from	7/1/21 to 9/30/21	ac	tivity from 10/1/21 to 1 <mark>2/31/</mark> 2	$I \leftarrow 1$, $I \leftarrow 1$, $I \leftarrow 1$
V. There have been no fees ref f this box is checked, complete just State House, Room 204, Concord,	st this form and s			
VI. Check if additional reports a	re attached:			
If you have received fees or m		s. vou must file Ac	Idendum A – Fees and Exr	enses
If you have paid an honorarium Expense Reimbursement			_	
If you, your firm, or your fam	ily has made poli	tical contributions	, you must file Addendum	C– Political Contributio
				,
•	٠		, .	
Sworn Statement/Affirmation by have read RSA 15, RSA 15-B, R and complete to the best of my known	SA 14-C and RS	A 664 and hereby	swear or affirm that the fo	regoing information is tru
Tell Con	,		1/14/22	-
(Signature of lobbyist)			(Date)	<u> </u>
Tyler Coward			400.4	
Print Name of lobbyist)	 	. , ,		