

## STATE OF NEW HAMPSHIRE

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

## PLEASE PRINT

I. Name of Lobbyist(s)					
II. Name of lobbyist	's partnership, firm	or corporation, if	any:		
(Na	me of partnership, firm	or corporation)			
Business Address: (S	treet)	(Town/City)	(State)	(Zip Code)	
( )(Telephone)	(	)(Fa	e-mail		
III. This statement or reportable expense			orts for each client, OR you ne to any one client).	nay file a separate report for	
☐ All reportable tra	nsactions occurring in	n the months prior to	the reporting date relative to t	the following client:	
<u>OR</u>	(Full Name of Clien	t as it appears on the I	obbyist Registration Form)		
· · · · · · · · · · · · · · · · · · ·	-	vist (including the lo	obbyist's family), or the lobbying	ng firm listed below which are	
IV. Date of Report Reports cover: acti	April 28, 2021 $\Box$ ivity from date of registration to 3/31/21		July 28, 2021   activity from 4/1/21 to 6/30/2	July 28, 2021	
•	October 27, 2021 activity from 7/1/21 to 9/30/21		January 26, 2022	January 26, 2022 $\square$ activity from 10/1/21 to 12/31/21	
	, complete just this fo	rm and submit it to	le transactions made since the Secretary of State's Office,	_	
VI. Check if addition	nal reports are attac	ched:			
☐ If you have recei	ved fees or made exp	enditures, you must	file $\mathbf{Addendum}\ \mathbf{A}-$ Fees and $\mathbf{I}$	Expenses	
☐ If you have paid Expense Reimbursen		nbursed expenses, y	you must file <b>Addendum B</b> – R	eport of Honorariums or	
☐ If you, your firm	, or your family has n	nade political contri	butions, you must file <b>Addend</b>	um C– Political Contribution	
Sworn Statement/At I have read RSA 15, and complete to the b	RSA 15-B, RSA 14-0	and RSA 664 and	hereby swear or affirm that the	foregoing information is true	
(Signature of lobbyis	st)		(Da	ate)	
(Print Name of lobby	vist)				