

STATE OF NEW HAMPSHIRE

2025 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

RECEIVED

OCT 29 2025

NEW HAMPSHIRE
DEPARTMENT OF STATE

PLEASE PRINT

I. Name of Lobbyist(s) KivSten Koch		DEPARTMENT OF S
II. Name of lobbyist's partnership, firm or corporation, if any:		
Cornerstone Government Affairs		
(Name of partnership, firm or corporation) 57 N Main St. Suite 403	NH	03301
Business Address: (Street) (Town/City)	(State)	(Zip Code)
() <u>(003-780 - 4036)</u> () (Fax)	e-mail	
III. This statement covers: (Choose one – file separate reports for reportable expense transactions which are not attributable to any		file a separate report for
All reportable transactions occurring in the months prior to the rep	porting date relative to the	following client:
(Full Name of Client as it appears on the Lobbyist	Registration Form)	
All reportable transactions by the lobbyist (including the lobbyist's unrelated to any particular client.	family), or the lobbying fi	rm listed below which are
October 29, 2025	July 30, 2025 vity from 4/1/25 to 6/30/25 January 28, 2026 ty from 10/1/25 to 12/31/25	,
V. There have been no fees received and no reportable trans If this box is checked, complete just this form and submit it to the Secr State House, Room 204, Concord, NH 03301.		
VI. Check if additional reports are attached: If you have received fees or made expenditures, you must file Ad If you have paid an honorarium or reimbursed expenses, you must Expense Reimbursement	st file Addendum B – Repo	ort of Honorariums or
If you, your firm, or your family has made political contributions, Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15-B, RSA 14-C and RSA 664 and hereby		
and complete to the best of my knowledge and belief.		20 80 Leades-Artusto
Mitter Voor	10/29/2025 (Date)	<u> </u>
(Signature of lobbyist)	(Date)	
(Print Name of lobbyist)		

STATE OF NEW HAMPSHIRE

Lobbyists Report of Political Contributions Addendum C (RSA Chapter 15:6)

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NEW HAMPSHIRE DEPARTMENT OF STATE

I. Name of Lobbyist(s)	irsten Koch		DEPARTMENT OF
•	ership, firm or corporation	, if any:	-
Cornerstone (AOVENMENT - AFF	airs .	
	ship, firm or corporation)		ne 10129 2025
Political Contributions	on that is reportable pursuant		paid on behalf of the
Full name of candidate:	(Last Name) Office Cand	+ House Report Name)	Middle Name/Initial)
If the contribution is an in-kind	contribution, provide a descript bution on the line above for amo	ion of the goods or ser	vices provided, and enter the
NA			
Full name of candidate:	(Last Name) (Fire		
Amount of contribution S	(Last Name) (First	2007 355.	Middle Name/Initial)
If the contribution is an in-kind	contribution, provide a descript bution on the line above for amo	ion of the goods or ser	Section of the sectio
Full name of candidate:	(Last Name) (Fire	st Name) (1	Middle Name/Initial)
Amount of contribution \$	SON AN SUCK STATEMENT OF SUCK STATEMENT SUCK STATEMENT OF SUCK STATEMENT OF SUCK STATEMENT SUCK STATEMENT SUCK STATEMENT SUCK STATEMENT SU	andidate is Seeking	and the second s

If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter the actual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not known, enter an estimated value and the word "estimate."
(If more than three contributions were made, report additional contributions on separate addendum C forms.)
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.
Matto Yur (Signature of lobbyist) (Date) Kivsten Kach (Print Name of lobbyist)

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