

### STATE OF NEW HAMPSHIRE

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



PLEASE PRINT

I. Name of Lobbyist(s) Gi	na Powers	Richard Parson	s/Kyle Baker/Ro	bert Collins
II. Name of lobbyist's parti	aership, firm or	corporation, if any:		
RYP Granite Stra	itegies			
(Name of pa	artnership, firm or	corporation)		
One Capital Plaza PO Box	c 1500	Concord	NH	03302
Business Address: (Street)		(Town/City)	(State)	(Zip Code)
) (603) 410-43	ر 50	)	e-mail_grp@ryp	granite.com
(Telephone)		(Fax)		
III. This statement covers:	(Choose one – fi	le separate reports for	each client, OR you may	file a separate report f
eportable expense transac				•
All reportable transpositor	o oggu <del>ering in th</del>	a mantha mian ta tha san	oorting date relative to the	fallandas aliant.
_	<del>-</del>		_	ionowing chem:
New Hampshire (		<u>-</u>		
(Full <b>)R</b>	Name of Client as	it appears on the Lobbyist	Registration Form)	
All reportable transaction	s by the lobbyist	(including the lobbyist's	family), or the lobbying	firm listed below which a
nrelated to any particular cl		(	, managy, or the local mg	
Reports cover: activity from d Octo	ober 30, 2024 om 7/1/24 to 9/30// ees received an ete just this form	activity		
/I. Check if additional rep	orts are attache	d:		
<del>.</del>			dendum A-Fees and Exp	penses
If you have paid an hono			t file <b>Addendum B</b> – Repe	
Expense Reimbursement		4*** 4 *1 .*	. 61 . 11 . 1	
If you, your tirm, or you	r family has mad	e political contributions,	you must file Addendun	C-Political Contributio
Sworn Statement/Affirmation in the read RSA 15, RSA 15 and controllete to the best of many (Signature of lobbyist)	-B, RSA 14-C ar		swear or affirm that the foundation July 31, 2024	
Gina R. Powers			(Date	,
(Print Name of lobbyist)				

# PLEASE PRINT

## STATE OF NEW HAMPSHIRE

# Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s) Gina Powers/Richard Parsons/Kyle	Baker/Robert Collins
II. Name of lobbyist's partnership, firm or corporation, if any:	
RYP Granite Strategies	
(Name of partnership, firm or corporation)	# July 24 2024
III. Name of Client New Hampshire Off Highway Vehicle Associate	Date July 31, 2024
<ul> <li>IV. Fees Received</li> <li>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 greated by any expenses:</li> <li>a) Total of all fees received in this reporting period</li> <li>b) Total of all fees received this calendar year, prior to this reporting period</li> </ul>	relations, or public relations services
(This should equal the total of all prior monthly reports for this calendar year.)	ear)
c) Total of all fees received to date (Add lines a and b)	c)\$ 12,699.98
<ul> <li>Indicate the amount of any such fees that are due, but have not yet been paid</li> </ul>	d) \$0
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to repfees. 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 lessing lobbied, purchase of a ceremonial object given to a person being lobbied (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. e aggregate total of all expenses paid expenses; (b) the aggregate total of all le: meals purchased during a business ss than \$10 that is given to the person ed with a value of \$25.00 or less); and orting period of greater than \$25.00 for ue 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.	2)\$ <u>6,349.99</u>
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	ь) \$0
c) Total of all itemized expenditures reported in detail in section VI.	c)\$ 0

d) Total expenses for this reporting period (Add lines a, b and c)	d)s 6,249.99
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)	e) \$_6,449.99
f) Total of all expenses year to date	ns 12,699.98
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from leperiod, including by whom paid or to whom charged.	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.	n that the foregoing information
Manuel	July 31, 2024
(Signature of lobbyist)	(Date)
Gina R. Powers	
(Print Name of lobbyist)	