STATE OF NEW HAMPSHIRE

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

RECEIVED

JUL 26 2024

NEW HAMPSHIRE DEPARTMENT OF STATE

PLEASE PRINT

| I. Name of L | obbyist(s) Karen | Rosen | berg | | |
|-----------------------------|---|---------------|--------------------------|---|--|
| II. Name of l | obbyist's partnership | , firm or c | orporation, if any: | | |
| Disabilit | y Rights Cente | er - Nh | ł Inc. | | |
| | (Name of partnershi | p, firm or c | orporation) | | |
| 64 | N. Main St | ., Ste 2 | 2 Concord | NH | 03301 |
| Business Addre | ess: (Street) | | (Town/City) | (State) | (Zip Code) |
| , 603 | .228.0432 | (| 603.225.2077 | 7 _{e-mail} advocac | y@drcnh.org |
| (Tel | ephone) | _ ` . | (Fax) | c-man | <u> </u> |
| III. This stat | ement covers: (Choos | e one – fil | e separate reports for | each client. OR vou may | y file a separate report fo |
| reportable ex | rpense transactions w | hich are n | ot attributable to any | one client). | |
| All report | able transactions occur | ring in the | manths price to the sou | orting date relative to the | Callandora aliante |
| | | | | orthig date relative to the | tollowing chent: |
| Disabilit | y Rights Cente | | | | |
| <u>OR</u> | (Full Name of | Chent as i | appears on the Lobbyist | Registration Form) | |
| All reports | ble transactions by the | lobbyist (| including the lobbyist's | family), or the lobbying | firm listed below which ar |
| unrelated to a | ny particular client. | | | | |
| IV. Date of R | | | 7 | July 31, 2024. | |
| Reports cover: | activity from date of re | | 0 3/3 1/24 acti | ivity from 4/1/24 to 6/30/24 | |
| | October 30, activity from 7/1/2 | | | January 29, 2025 v from 10/1/24 to 12/31/24 | |
| If this box is c | ve been no fees rece hecked, complete just t Room 204, Concord, N | his form a | no reportable trans | sactions made since th etary of State's Office, 10 | e last report. [] 7 North Main Street, |
| VI. Check if | additional reports are | attached | <u>:</u> | | |
| - | • | | | dendum A- Fees and Exp | enses |
| If you ha | ve paid an honorarium | | | file Addendum B- Repo | |
| Expense Rein | | has mada | notition contributions | von must file Addenders | n C- Political Contribution |
| 11 ,000, 90 | a. mm, or your family | nas mauc | ponnear contributions, | you must the Addendun | i — rollucai Contribution |
| | | | | | |
| Sworn Staten I have read RS | nent/Affirmation by I | obbyist | IRSA 664 and berehv s | wear or affirm that the fo | regoing information is true |
| and complete | to the best of my know | ledge and | belief. | | regoing intermental is true |
| | | | | 4/18/2024 (Date |) |
| (Signature of | lobbyist) | | · | (Date | |
| Karen Ł. | Rosenberg | | | • | |
| (Print Name of | | - | | | |