## STATE OF NEW HAMPSHIRE

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

RECEIVED

APR 2 2 2024

NEW CONSUME DEPARTMENT OF STATE

PLEASE PRINT

I. Name of Lobbyist(s) Carolyn Grant			DEPART OF S	
II. Name of lobbyist's partnership, firm or N/A	corporation, if any:		<u> </u>	
(Name of partnership, firm or o	corporation)		<del></del>	
6869 Meadow Glen Drive South		ОН	43082	
Business Address: (Street)	(Town/City)	(State)	(Zip Code)	
614-668-8253	`	carolyn.gran	t@dexcom.com	
( ) $\frac{614-668-8253}{\text{(Telephone)}}$ (	(Fax)	e-mail		
III. This statement covers: (Choose one – fi reportable expense transactions which are			y file a separate report for	
All reportable transactions occurring in the	e months prior to the repo	orting date relative to the	following client:	
DEXCOM, Inc.				
	it appears on the Lobbyist R	egistration Form)		
<u>OR</u>	•	,		
All reportable transactions by the lobbyist unrelated to any particular client.	(including the lobbyist's	family), or the lobbying	firm listed below which are	
IV. Date of Report April 24, 2024  Reports cover: activity from date of registration  October 30, 2024  activity from 7/1/24 to 9/30/2  V. There have been no fees received and If this box is checked, complete just this form & State House, Room 204, Concord, NH 03301.	activity d no reportable transa	July 31, 2024	e last report. 27 North Main Street,	
VI. Check if additional reports are attached	1:			
If you have received fees or made expend				
If you have paid an honorarium or reimbu Expense Reimbursement	rsed expenses, you must	file <b>Addendum B</b> – Rep	ort of Honorariums or	
If you, your firm, or your family has made	e nolitical contributions	on must file Addendun	n C – Political Contribution	
	· po	ou must mo radendul	i C i ontical contribution	
Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15-B, RSA 14-C an and complete to the best of my knowledge and (Signature of lobbyist)  Carolyn Grant	d RSA 664 and hereby sv i belief.	vear or affirm that the form $04/18/20$ (Date	regoing information is true	
Carolyn Grant	_ <del></del> _			
(Print Name of lobbyist)				