PLEASE PRINT	STATE OF NEV 2020 Statement of In for LOB (RSA Cha	ncome and Exper BYISTS	
I. Name of Lobbyist(s) <b>Rich</b> II. Name of lobbyist's partnership, fi	]	\$ Alexa	nder Kautroubas
(Name of partnership, fi	Y & BOULEY	LLC	
Business Address: (Street)	STE. 3 C	ONCORS (State)	NH 03301 (Zip Code)
(603 <u>228-1601</u> (Telephone)	( )(Fax)	e-mail	

III. This statement covers: (Choose one – file separate reports for each client, OR you may file a separate report for reportable expense transactions which are not attributable to any one client).

X All reportable transactions occurring in the months prior to the reporting date relative to the following client:

Network of pnior (Full Name of Client as it appears on the Lobbyist Registra

<u>OR</u>

 $\Box$  All reportable transactions by the lobbyist (including the lobbyist's family), or the lobbying firm listed below which are unrelated to any particular client.

IV. Date of ReportApril 29, 2020Reports cover:activity from date of registration to 3/31/20

October 28, 2020 *activity from 7/1/20 to 9/30/20* 

July 29, 2020 activity from 4/1/20 to 6/30/20

January 27, 2021

**V.** There have been no fees received and no reportable transactions made since the last report. If this box is checked, complete just this form and submit it to the Secretary of State's Office, 107 North Main Screet, 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 Addendum A- Fees and Expenses

□ If you have paid an honorarium or reimbursed expenses, you must file Addendum B- Report of Honorariums or Expense Reimbursement

🛛 If you, your firm, or your family has made political contributions, you must file Addendum C- Political Contributions

### Sworn Statement/Affirmation by Lobbyist

I have read RSA 15, RSA 15-B, RSA 14-C and RSA 664 and hereby swear or affirm that the foregoing information is true and complete to the best of my knowledge and belief.  $\wedge$ 

(Signature of lobbyist) (Print Name of lobbyist)

July 20, 2020

## State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

# Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:

Name of Lobbying partnership, firm, or corporation:	DENNEHY & BOULEY LLC
Name of Client (leave blank if Statement is for the part	nership, firm, or corporation and not related to any
particular client): <u>Senior Nutrition</u>	Network of NH

## Date of Report (check one):

April 29, 2020 🗆 📜	July 29, 2020	October 28, 2020 🛛	January 27, 2021 🛛
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I have read RSA 15, RSA 15-B, RSA 664, the Statement of Income and Expenses described above, and the following Addendums submitted with that Statement (insert the number of Addendum forms being submitted):

\_\_\_\_\_ Addendum A(s).

\_\_\_\_\_ Addendum B(s).

\_\_\_\_\_ Addendum C(s).

I hereby swear or affirm that the foregoing information on the Statement and each Addendum is true and complete to the best of my knowledge and belief.

(Signature of lobbyist)

Alexander Koutroubas

(Print Name of lobbyist)

(Date)