

## STATE OF NEW HAMPSHIRE

## 2017 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

PLEASE PRINT

I. Name of Lobbyist(	s) <u>Melinda Poore</u>	·		an ber	
II. Name of lobbyist'	s partnership, firm o	r corporation, if	any:		
Ch	arter Communicat	ions, Inc.			
(Nar	ne of partnership, firm or	corporation)			
118 Johnson Road	i_	Portland	ME	04102	
Business Address: (St	reet)	(Town/City)	(State)	(Zip Code)	
(207) <u>253-2217</u> (Telephone)	(	)(Fa	e-mail <u>melin</u>	da.poore@charter.com	
	overs: (Choose one – ransactions which are			ı may file a separate report for	•
All reportable tran	sactions occurring in t	he months prior to	the reporting date relative	to the following client:	
	Charter Commu				
OR	(Full Name of Client a	s it appears on the L	obbyist Registration Form)		
		t (including the lo	bbyist's family), or the lobb	ying firm listed below which are	;
IV. Date of Report Reports cover: activ	April 26, 2017 🔲	tion to 3/31/17	July 26, 2017 activity from 4/1/17 to 6/30/1		
	October 25, 2017 [activity from 7/1/17 to 9		January 31, 2018 activity from 10/1/17 to 1		
			e transactions made sin the Secretary of State's Offi		
VI. Check if addition	al reports are attach	ed:			
	-		file Addendum A- Fees ar	d Expenses	
☐ If you have paid a Expense Reimbursem		oursed expenses, y	ou must file Addendum B-	- Report of Honorariums or	
☐ If you, your firm,	or your family has ma	de political contri	butions, you must file Adde	ndum C- Political Contribution	s
I have read RSA 15, R and complete to the be	firmation by Lobbyis RSA 15-B, RSA 14-C a est of my <u>knowledge</u> a wola	and RSA 664 and nd belief.		the foregoing information is true	:
(Signature of lobbyis			10-2	(Date)	
Melinda Poore	:			RECE	
(Print Name of lobby	ist)			ብስ <del>ተ</del> ጋ	2 2017

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