

#### STATE OF NEW HAMPSHIRE

2025 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

# RECEIVED

JUL 30 2025

NEW HAMPSHIRE DEPARTMENT OF STATE

# (RSA Chapter 15) PLEASE PRINT

I. Name of Lobbyist(s) Sandra Ribeir	<b>O</b>		
II. Name of lobbyist's partnership, firm or c			
GlaxoSmithKline			
(Name of partnership, firm or co	orporation)		
1201 F Street Suite 480	Washington	DC	20004
Business Address: (Street)	(Town/City)	(State)	(Zip Code)
732-659-3069		e-mail sandra.x.rib	eiro@gsk.com
$()\frac{732-659-3069}{(\text{Telephone})}$ $()$	(Fax)	¢-man	
III. This statement covers: (Choose one – file reportable expense transactions which are n	ot attributable to any or	ne client).	· . · ·
All reportable transactions occurring in the	months prior to the repor	ting date relative to the f	following client:
GlaxoSmithKline			
(Full Name of Client as it	appears on the Lobbyist Re	gistration Form)	
All reportable transactions by the lobbyist (i unrelated to any particular client.	ncluding the lobbyist's fa	mily), or the lobbying fir	rm listed below which are
IV. Date of Report April 30, 2025  Reports cover: activity from date of registration to October 29, 2025	7	July 30, 2025 from 4/1/25 to 6/30/25 nuary 28, 2026	
activity from 7/1/25 to 9/30/23		rom 10/1/25 to 12/31/25	
V. There have been no fees received and If this box is checked, complete just this form a State House, Room 204, Concord, NH 03301.			
VI. Check if additional reports are attached	<b>:</b>		
If you have received fees or made expendi	tures, you must file <b>Add</b> e	ndum A  Fees and Expe	enses
If you have paid an honorarium or reimbur Expense Reimbursement	sed expenses, you must f	ile <b>Addendum B</b> — Repo	rt of Honorariums or
If you, your firm, or your family has made	political contributions, ye	ou must file Addendum	C-Political Contributions
Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15-B, RSA 14-C and and complete to the best of my knowledge and		ear or affirm that the for	egoing information is true
Sandra Ribeiro Sandra Ribeiro (Jul 29, 2025 16:00:47 EDT)		07/28/2025	
(Signature of lobbyist)	······································	(Date)	
Sandra Ribeiro			
(Print Name of Johnwist)	<del></del>		



#### STATE OF NEW HAMPSHIRE

#### Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s) Sandra Ribeiro	
II. Name of lobbyist's partnership, firm or corporation, if any: GlaxoSmithKline	
(Name of partnership, firm or corporation)	·
III. Name of Client GlaxoSmithKline	Date 07/28/2025
IV. Fees Received 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 granded by any expenses:	t relations, or public relations services
a) Total of all fees received in this reporting period	a) \$_2,971.68
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar y	a) \$ 2,971.68 b) \$ 5,324.26 ear)
c) Total of all fees received to date (Add lines a and b)	c) \$_8295.94
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$ 0
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to refees. Separate reports are to be filed for expenditures made relative to each 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 examp lunch where the cost was \$25.00 or less, purchase of a pen with a value of le being 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 greater 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 xpenses; (b) the aggregate total of all le: meals purchased during a business st 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 ter 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.	a) \$ 0
b) Total aggregate of expenditures during this reporting period , not reported in a), of \$25 or less.	<sub>b)</sub> \$ 0
c) Total of all itemized expenditures reported in detail in section VI.	b) \$ 0 c) \$ 0

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$ 0
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) \$ <u>0</u>
f) Total of all expenses year to date	f) \$ 0
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from l period, 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 affir is true and complete to the best of my knowledge and belief.	m that the foregoing information
Sandra Ribeiro Sandra Ribeiro (Jul 29, 2025 16:00:47 EDT)	07/28/2025
(Signature of lobbyist)	(Date)
(Signature of lobbyist)  Sandra Ribeiro  (Print Name of lobbyist)	(Date)

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### STATE OF NEW HAMPSHIRE

Lobbyists Report of Political Contributions Addendum C (RSA Chapter 15:6)

I. Name of Lobbyist(s) Sar	ndra Ribeiro		
II. Name of lobbyist's part	nership, firm or co	orporation, if any:	
GlaxoSmithKline	_	-	
(Name of partn	ership, firm or corporation	)	<del></del>
III. Name of Client Glaxos	SmithKline		<sub>Date</sub> 07/28/2025
<b>Political Contributions</b>	ion that is reportabl	e pursuant to RSA Chap	oter 664 paid on behalf of the
Full name of candidate:	enator Rosen	wald	
	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$ 15	0.00	Office Candidate is Seeki	Senate
N/A  Full name of candidate:			
	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$		Office Candidate is See	eking
If the contribution is an in-kind actual cost of the in-kind contrenter an estimated value and the	d contribution, provid	le a description of the goo	ds or services provided, and enter the ution. If the actual cost is not known,
Full name of candidate:	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$	•	Office Candidate is See	,

	<del></del>
If more than three contributions were made, report additions	al contributions on separate addendum C forms.)
•	
	d hereby swear or affirm that the foregoing information
s true and complete to the best of my knowledge	d hereby swear or affirm that the foregoing information and belief.  07/28/2025
have read RSA 15, RSA 15-B and RSA 664 and	and belief.
have read RSA 15, RSA 15-B and RSA 664 and strue and complete to the best of my knowledge	o and belief. 07/28/2025
have read RSA 15, RSA 15-B and RSA 664 and strue and complete to the best of my knowledge  Sandra Ribeiro  (Signature of lobbyist)	o and belief. 07/28/2025

# NH Report SR

Final Audit Report

2025-07-29

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By:

Shaheen Pradhan (shaheen@eajpc.com)

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