

STATE OF NEW HAMPSHIRE 2021 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

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PLEASE PRINT

NEW HAMPSHIRE DEPARTMENT OF STATE

I. Name of Lobbyist(s) Chris E	Bourcier, Tara Reardo	on, Debra Miller	
II. Name of lobbyist's partnershi	ip, firm or corporation, if a	any:	
New Hampshire Commun			
(Name of partners	hip, firm or corporation)	·	
7 Wall Street	Concord,	NH	03301
Business Address: (Street)	(Town/City)	(State)	(Zip Code)
(603) 224-6669	(603) 225-7425		communityloanfund.org
(Telephone)	(Fax	κ)	
III. This statement covers: (Chooreportable expense transactions All reportable transactions occ	which are not attributable		
(Full Name OR ☐ All reportable transactions by the unrelated to any particular client.	of Client as it appears on the L		g firm listed below which are
		July 28, 2021	
V. There have been no fees re If this box is checked, complete jus State House, Room 204, Concord,	t this form and submit it to t		
VI. Check if additional reports a	re attached:		
☐ If you have received fees or m☐ If you have paid an honorariur Expense Reimbursement	ade expenditures, you must n or reimbursed expenses, y	file Addendum A – Fees and E ou must file Addendum B – Re	port of Honorariums or
☐ If you, your firm, or your fami	ly has made political contril	outions, you must file Addend u	m C- Political Contributions
Sworn Statement/Affirmation by I have read RSA 15, RSA 15-B, RS and complete to the best of my known	SA 14-C and RSA 664 and I	hereby swear or affirm that the	foregoing information is true
Aura A Yallin		4/30/2021	
(Signature of lobbyist)		(Da	te)
Debra Miller			
(Print Name of lobbyist)			