

JUL 3 0 2024

NEW HAMPSHIRE DEPARTMENT OF STATE



## STATE OF NEW HAMPSHIRE

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

Sheehan Phinney Capitol Group (Name of partnership, firm or corporation)		
Political Contributions For each political contribution that is reportable pu firm, indicate the following:	•	
Full name of candidate: <u>Carson</u>	Sharon	
(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$ 50.00	Office Candidate is So	ecking NH Senate
Full name of candidate:		
		(Middle Name/Initial)
Full name of candidate:(Last Name)	(First Name)	(Middle Name/Initial)
Full name of candidate:  (Last Name)  Amount of contribution \$  If the contribution is an in-kind contribution, provide in-kind contribution on the line above for amount the word "estimate".	(First Name)  Office Candidate is So de a description of the goods or s art of contribution. If the actual co	(Middle Name/Initial) eeking services provided, and enter the actual countries is not known, enter an estimated value
Full name of candidate:  (Last Name)  Amount of contribution \$  If the contribution is an in-kind contribution, provide in-kind contribution on the line above for amount word "estimate".  Full name of candidate:	(First Name)  Office Candidate is Solide a description of the goods or sunt of contribution. If the actual co	(Middle Name/Initial) eeking services provided, and enter the actual countries is not known, enter an estimated value
Full name of candidate:  (Last Name)  Amount of contribution \$  If the contribution is an in-kind contribution, provide in-kind contribution on the line above for amount word "estimate".	(First Name)  Office Candidate is So de a description of the goods or s art of contribution. If the actual co	(Middle Name/Initial) eeking services provided, and enter the actual countries is not known, enter an estimated value
Full name of candidate:  (Last Name)  Amount of contribution \$  If the contribution is an in-kind contribution, provide in-kind contribution on the line above for amount word "estimate".  Full name of candidate:	(First Name)  Office Candidate is Solide a description of the goods or sunt of contribution. If the actual contribution (First Name)	(Middle Name/Initial) eeking services provided, and enter the actual countries is not known, enter an estimated value

## Sworn Statement/Affirmation by Lobbyist

I have read RSA 15, RSA 15-B and RSA 664 and hereby s	swear or affirm that the foregoing information
is true and complete to the best of my knowledge and belie	ef.
Sh Whi Intere	July 31, 2024
(Signature of lobbyist)	(Date)
Lara M.W. McIntyre (Print Name of lobbyist)	
(Line Hand of todayist)	