

STATE OF NEW HAMPSHIRE

2024 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15) JAN 27 2025

NEW HAMPSHIRE
DEPARTMENT OF STATE

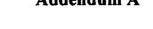
PLEASE PRINT

I. Name of Lobbyist(s) Michael Ro			
II. Name of lobbyist's partnership, fire	m or corporation, if any:		
American Cancer Society		rk	
(Name of partnership, fir	5		
655 15th St NW STE 503	Washington	DC	20005
Business Address: (Street)	(Town/City)	(State)	(Zip Code)
() 603-518-6469 (Telephone)	()	e-mail mike.rollo	o@cancer.org
(Telephone)	(Fax)		
III. This statement covers: (Choose on	e – file separate reports for eac	h client, OR you ma	y file a separate repo
reportable expense transactions which			
7	1. A	tan data milatina ta dha	E-llauring aligns
All reportable transactions occurring			e following chent.
American Cancer Societ	y Cancer Action Net	work	
	ent as it appears on the Lobbyist Reg	istration Form)	
OR		CHA COMO DA EZE	C. C. III.
All reportable transactions by the lob unrelated to any particular client.	byist (including the lobbyist's fai	nily), or the lobbying	firm listed below whi
another to any paritonia onone.			
IV. Date of Report April 24, 202	24	July 31, 2024	
Reports cover: activity from date of registr		from 4/1/24 to 6/30/24	
October 30, 202		uary 29, 2025	
activity from 7/1/24 to	9/30/24 activity from	om 10/1/24 to 12/31/24	
V. There have been no fees receive	d and no reportable transac	tions made since th	e last report
If this box is checked, complete just this			
State House, Room 204, Concord, NH 0.			
VI. Check if additional reports are att	ached:		
If you have received fees or made ex		dum A- Fees and Ex	penses
If you have paid an honorarium or re	7		
Expense Reimbursement			
If you, your firm, or your family has	made political contributions, yo	u must file Addendu	n C-Political Contril
- CONTRACTOR			
Sworn Statement/Affirmation by Lobl			
I have read RSA 15, RSA 15-B, RSA 14 and complete to the best of my knowledge		ar or affirm that the fe	oregoing information
and complete to the best of my knowledge		1/22/25	
10/19		1/23/25	
(Signature of lobbyist)		(Date	e)
Michael Rollo			
(Print Name of lobbyist)			

P L E A S E P R I N T

STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A



(RSA Chapter 15:6)

1. Name of Lobbyist(s) Michael Rollo		
II. Name of lobbyist's partnership, firm or corpora American Cancer Society Cancer Acti		
(Name of partnership, firm or corporation)	OHITELWOIK	
III. Name of Client Same	88	Date 1/23/25
		
IV. Fees Received Indicate the gross amount of all fees received from the clie to lobbying, including fees for services such as public adv including research, monitoring legislation, and related le reduced by any expenses:	ocacy, government	relations, or public relations services oss fee amount reported shall not be
a) Total of all fees received in this reporting period		a) \$
b) Total of all fees received this calendar year, prior to thi (This should equal the total of all prior monthly reports		b) \$ 29,255.15
c) Total of all fees received to date	·	(%)
(Add lines a and b)		c) \$ _31,043.63
d) Indicate the amount of any such fees that are due, but he yet been paid	ave not	d) \$ 0
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations fees. Separate reports are to be filed for expenditures mathe lobbyist(s)/firm that are unrelated to any one client Expenses are to be reported in one of three categories of during the reporting period for salaries, benefits, support individual expenses where the expenditure was of \$25.00 lunch where the cost was \$25.00 or less, purchase of a pebeing lobbied, purchase of a ceremonial object given to a (c) an itemized statement of each individual expenditure many purpose not covered by (a) (for example: purchase of ceremonial object to be given to the subject of lobbying restaurant expenses for a legislative reception). Expense contributions will be reported on separate addendums and separate addendums	de relative to each of a separate report in f expenses: (a) the staff, and office ex or less (for example in with a value of less person being lobbie ade during this report a meal with value with a value greate es for honorariums,	elient and if expenditures are made by may be filed for the lobbyist(s)/firm aggregate total of all expenses paid expenses; (b) the aggregate total of all e: meals purchased during a business as than \$10 that is given to the persor d with a value of \$25.00 or less); and rting period of greater than \$25.00 for he of greater than \$25, purchase of a r than \$25, but not greater than \$50 expense reimbursement, or politica
a) Total aggregate expenses for this reporting period for sa support staff, and office expenses, related directly or indire		a) \$ 0
b) Total aggregate of expenditures during this reporting pe in a), of \$25 or less.	criod, not reported	b) \$ 0
a) Total of all itemized expenditures reported in detail in s	ection VI	_{c)} 0

d) Total expenses for this reporting period	d) \$ U
(Add lines a, b and c) e) Total of expenses paid this calendar year, prior to this reporting period	e) \$ 0
(This should be the amount on line f of addendum A for last month's report)	
f) Total of all expenses year to date	ŋs <u>0</u>
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from leperiod, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
N/A	ş <u>0</u>
	\$
	\$
	\$
	\$
	\$
Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15; B and RSA 664 and hereby swear or affirm is true and complete to the best of my knowledge and belief.	
(Signature of lobbyist)	(Date)
Michael Rollo	(2,000)
(Print Name of lobbyist)	
(Fillit Manie of 1000) 120)	