LEASE PRIN

STATE OF NEW HAMPSHIRE



Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s) HAYLEY JONES	
II. Name of lobbyist's partnership, firm or corporation, if any:	
TOKICS ALTION CENTER, DBA COMMUNITY (Name of partnership, firm or corporation)	Y ALMON WORKS
III. Name of Client	Date 10 19) 2
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 greeduced by any expenses:	t relations, or public relations services
a) Total of all fees received in this reporting period	a)\$ 310.00
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	b) \$ WAMPNAME 989.25
c) Total of all fees received to date (Add lines a and b)	0)\$ 1299, 25
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to repfees. Separate reports are to be filed for expenditures made relative to each of 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 example lunch where the cost was \$25.00 or less, purchase of a pen with a value of lessing 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 aggregate total of all expenses paid expenses; (b) the aggregate total of all le: meals purchased during a business st than \$10 that is given to the person ad with a value of \$25.00 or less); and orting period of greater than \$25.00 for the 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) \$
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) \$
c) Total of all itemized expenditures reported in detail in section VI.	c) \$`

d) Total expenses for this reporting period	,	4) ¢		
(Add lines a, b and c)		d) .		
e) Total of expenses paid this calendar year	, prior to this reporting per		S	<u> </u>
(This should be the amount on line f of add	lendum A for last month's			
f) Total of all expenses year to date		f) \$		·
VI. Other Expenses: Provide the following detail for all expendit period, including by whom paid or to whom		e from lobby	ing fees during this i	reporting
Paid to:		, An	nount:	
	· -			
,		\$		
		\$ - \$		
		J .	· ·	
		\$_		
A STATE OF THE STA		\$		<u> </u>
;		· ,		•
_ · · · · · · · · · · · · · · · · · · ·	· .		, , , , , , , , , , , , , , , , , , ,	·
Sworn Statement/Affirmation by Lot	byist		. 2.	• • :
I have read RSA 15, RSA 15-B and RS	A 664 and hereby swear	or affirm tha	nt the foregoing in	formation
is true and complete to the best of my k	nowledge and belief.	į	oligia:	
is true and complete to the best of my k History (Signature of lobbyist)	nowledge and belief.		0 19 2\ (Date)	· · · · · · · · · · · · · · · · · · ·
is true and complete to the best of my k Harly (Signature of lobbyist)	nowledge and belief.		0 19 2\ (Date)	
is true and complete to the best of my k Hay Ley Jones (Signature of lobbyist) HAY LEY JONES	nowledge and belief.	<u>.</u>	0 19 2\ (Date)	
is true and complete to the best of my k Harly (Signature of lobbyist)	nowledge and belief.		0 19 2\ (Date)	3
is true and complete to the best of my k Hay Ley Jones (Signature of lobbyist) HAY LEY JONES	nowledge and belief.		0 19 2\ (Date)	3
is true and complete to the best of my k Hay Ley Jones (Signature of lobbyist) HAY LEY JONES	nowledge and belief.		0 19 21 (Date)	d
is true and complete to the best of my k Hay Ley Jones (Signature of lobbyist) HAY LEY JONES	nowledge and belief.		0 19 2\ (Date)	

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

PECEIVED

OCT 2.1 2021

NEW HAMPSHIRE
DEPARTMENT OF STATE

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn Statement/Affirmation by Lobbyist
Statement of Income and Expenses for:

Name of Lobbying partnership, firm, or corporation: Toxics Aution Center DBA Commun
Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any
particular client):
Date of Report (check one):
April 28, 2021
I have read RSA 15, RSA 15-B, RSA 664, the Statement of Income and Expenses described above, and the following Addendums submitted with that Statement (insert the number of Addendum forms being submitted):
Addendum A(s).
Addendum B(s).
Addendum C(s).
I hereby swear or affirm that the foregoing information on the Statement and each Addendum is true and complete to the best of my knowledge and belief.
(Signature of lobbyist) 10)19/21 (Date)
HAYLE & JONES
(Print Name of lobbyist)