I. Name of Lobbyist(s) Nicole Benincasa

STATE OF NEW HAMPSHIRE

2017 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

APR 2.6 2017

NEW HAMPSHIRE
DEPARTMENT OF STATE PLEASE PRINT

II. Name of lobbyist' Uber Technolog	-	or corporation, if an	y:	
	ne of partnership, firm	or corporation)		
636 W. 28th Stre	et, 3rd Floor	New York	NY	10001
Business Address: (St	reet)	(Town/City)	(State)	(Zip Code)
(434) 942-7072	()	e-mail nic@uber	.com
(Telephone)		(Fax)		
III. This statement co reportable expense ti			ts for each client, OR you ma o any one client).	y file a separate report
All reportable tran	sactions occurring in	the months prior to t	he reporting date relative to the	e following client:
Uber Technologie	es, Inc.			
ω	(Full Name of Client	as it appears on the Lol	obyist Registration Form)	
OR		ist (including the lobl	oyist's family), or the lobbying	firm listed below which
IV. Date of Report Reports cover: activ	April 26, 2017 2		July 26, 2017 activity from 4/1/17 to 6/30/17	
	October 25, 2017 activity from 7/1/17 to 9/30/17		January 31, 2018} activity from 10/1/17 to 12/31/17	
			transactions made since the Secretary of State's Office, So	
VI. Check if addition	al reports are attac	hed:		
If you have receiv	ed fees or made expe	enditures, you must fi	le Addendum A– Fees and Ex	penses
✓ If you have paid a Expense Reimburseme		nbursed expenses, yo	u must file Addendum B- Rep	oort of Honorariums or
☐ If you, your firm,	or your family has n	nade political contribu	itions, you must file Addendu	m C- Political Contribut
Sworn Statement/Afi I have read RSA 15, R and complete to the be	SA 15-B, RSA 14-C	and RSA 664 and he	ereby swear or affirm that the f	
1/1/2			7/25/201	コ
(Signature of lobbyist	-		$\frac{4/25/201}{(Date)}$	e)
Nicole Benincas	a			
(Print Name of lobby	ist)			