

STATE OF NEW HAMPSHIRE

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

RECEIVED OCT 20 2025

NEW HAMPSHIRE DEPARTMENT OF STATE

PLEASE PRINT

I. Name of L	obbyist(s) Haley	Shaw				
II. Name of l	lobbyist's partnership	, firm or co	rporation, if a	ny:		
Conven	tion of States	Action				
	(Name of partnershi	Mary Tree-solutions versions version	poration)			28 - 1825
7670	Opportunity Ro	i., Ste. 205	San Die	go		
Business Addr		*	(Town/City)		State)	(Zip Code)
, 540)-441-7227	()		e-mail	hshaw@c	cosaction.com
(Tel)-441-7227 lephone)	_ 、 ,	(Fax			
III. This stat	tement covers: (Choos xpense transactions w	se one file hich are no	separate repo t attributable	rts for each client, to any one client).	OR you may	file a separate report for
- 1						
All report	table transactions occur	rring in the	nonths prior to	the reporting date	relative to the	following client:
Conven	tion of States	Action				
	(Full Name o	f Client as it	appears on the L	obbyist Registration I	Form)	
OR		15.				
All reports	able transactions by the any particular client.	lobbyist (in	cluding the lob	byist's family), or t	he lobbying fi	irm listed below which are
unrelated to	any particular chent.	•				
IV. Date of E	Report April-30	2025		July 30, 2	2025	
	activity from date of re		3/31/25	activity from 4/1/		
	October 29,			January 28,		
	activity from 7/1/2	25 to 9/3 0 /25		activity from 10/1/2	5 to 12/31/25	
If this box is a	ave been no fees rec checked, complete just Room 204, Concord, N	this form an	no reportable d submit it to t	e transactions ma the Secretary of Stat	ade since the	e last report 7 North Main Street,
VI. Check if	additional reports ar	e attached:				
	we received fees or ma		ires, you must	ile Addendum A	Fees and Exp	enses
	ve paid an honorarium				() -	
Expense Rein	nbursement				·	
✓ If you, yo	our firm, or your family	has made p	olitical contrib	utions, you must fi	le Addendum	C-Political Contribution
		708 NATIONAL WI 1981				
I have read R	ment/Affirmation by I SA 15, RSA 15-B, RSA to the best of my know	A 14-C and	RSA 664 and h	ereby swear or affi	rm that the for	regoing information is true
-Harren	to allo bost of tity killor	treign and t	viivi.	10/15/2	025	
	Flabbyist)			10/13/2		
(Signature of	1.5				(Date)	l
Haley S	W. C.					
(Print Name	of lobbyist)					

P L E A S E P R I N T

STATE OF NEW HAMPSHIRE

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Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s) Haley Shaw						
II. Name of lobbyist's partnership, firm or corporation, if any:						
Convention of States Action						
(Name of partnership, firm or corporation)						
III. Name of Client Convention of States Action	Date					
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, governmen including research, monitoring legislation, and related legal work. The gr reduced by any expenses:	t relations, or public relations services					
a) Total of all fees received in this reporting period	a) \$ See (V)(a) below					
b) Total of all fees received this calendar year, prior to this reporting period b) \$						
c) Total of all fees received to date (Add lines a and b)	c) \$					
 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 the lobbyist(s)/firm that are unrelated to any one client a separate report in 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 lebeing 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 greate 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. e aggregate total of all expenses paid spenses; (b) the aggregate total of all le: meals purchased during a business as than \$10 that is given to the person ed with a value of \$25.00 or less); and orting period of greater than \$25.00 for the of greater than \$25.00 for the of greater than \$25.00 for the end at the state of the st					
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) \$ 0.00 c) \$ 0.00					
c) Total of all itemized expenditures reported in detail in section VI.	_{c) \$} 0.00					

d) Total expenses for this reporting period	_{d)} \$ 1,118.58
 (Add lines a, b and c) e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report) f) Total of all expenses year to date VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from leading land including leading to be a single provided in the land including leading to the single provided in the land including leading leading to the single provided in the land including leading leading to the single provided in the land including leading to the single provided in the land including leading to the single provided in the land including leading to the single provided in the land including leading to the single provided in the land including leading to the single provided in the land including the land including the single provided in the	e) \$ 4,380.46 f) \$ 5,499.04 obbyying fees during this reporting
period, including by whom paid or to whom charged.	
Paid to:	Amount:
	\$
	\$
	\$
	\$
	\$
	\$
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.	n that the foregoing information
Halper	10/15/2025
(Signature of lobbyist)	(Date)
Haley Shaw	
(Print Name of lobbyist)	



STATE OF NEW HAMPSHIRE

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

I. Name of Lobbyist(s) Hale	y Shaw						
П. Name of lobbyist's partn	ership, firm or co	rnoration, if any:					
Convention of States Action							
(Name of partnership, firm or corporation)							
III. Name of Client Convention of States Action Date							
Political Contributions For each political contribution client/lobbyist and lobbying	on that is reportable firm, indicate the f	pursuant to RSA Chap ollowing:	oter 664 paid on behalf of the				
Full name of candidate: St	rafford County	GOP					
004		(First Name)	(Middle Name/Initial)				
Amount of contribution \$ 300) 	Office Candidate is Seeki	_{ng} n/a				
actual cost of the in-kind contri enter an estimated value and the n/a	bution on the line abo e word "estimate."	ove for amount of contrib	ds or services provided, and enter the ution. If the actual cost is not known,				
Full name of candidate:	(Last Name)	(First Name)	(Middle Name/Initial)				
			20 20 20 20 20 20 20 20 20 20 20 20 20 2				
Amount of contribution \$		_ Office Candidate is See	king				
If the contribution is an in-kind actual cost of the in-kind contri enter an estimated value and the	bution on the line abo	e a description of the good ove for amount of contribu	ds or services provided, and enter the ution. If the actual cost is not known,				
Full name of candidate:	(Last Name)	(First Name)	(Middle Name/Initial)				
60 1955 950 800 50							
Amount of contribution \$		Office Candidate is See	kine				

actual cost of the in-kind contribution on the line abo	e a description of the goods or services provided, and enter the over for amount of contribution. If the actual cost is not known,
enter an estimated value and the word "estimate."	
	
(If more than three contributions were made, report addition	onal contributions on separate addendum C forms.)
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 are is true and complete to the best of my knowledge	nd hereby swear or affirm that the foregoing information e and belief.
the span	10/15/2025
(Signature of lobbyist)	(Date)
Haley Shaw	
(Print Name of lobbyist)	