

STATE OF NEW HAMPSHIRE

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

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NOV 03 2025

NEW HAMPSHIRE DEPARTMENT OF STATE

PLEASE PRINT

I. Name of Lobby	_{yist(s)} Karen O'k	(ee	fe		
II. Name of lobby	yist's partnership, firm	or co	rporation, if any:		
Marijuana	a Policy Projec	t (i	n-house)		
-	(Name of partnership, firm				
2370		12	Washington	DC	20009
Business Address:	(Street)		(Town/City)	(State)	(Zip Code)
$() \frac{202-9}{\text{(Telepho})}$	005-2012 ().	202-379-9404 (Fax)	_{e-mail} karen(@mpp.org
			separate reports for each t attributable to any one		ny file a separate report for
	transactions occurring in licy Project (in-hous		nonths prior to the reportin	g date relative to th	e following client:
	(Full Name of Client	as it	appears on the Lobbyist Regis	tration Form)	49
All reportable unrelated to any	and we have a compared to the	ist (in	cluding the lobbyist's fami	ly), or the lobbying	firm listed below which are
IV. Date of Repo Reports cover: act	ort April 30, 2025 tivity from date of registrati October 29, 2025 activity from 7/1/25 to 9/3	on to	3/31/25 activity fr Janu	aly 30, 2025 om 4/1/25 to 6/30/25 ary 28, 2026 ary 10/1/25 to 12/31/25	
If this box is chec		m ar	no reportable transacti Id submit it to the Secretary		
VI. Check if add	itional reports are attac	hed:			
			res, you must file Addend		
If you have particular Expense Reimbur		nburs	ed expenses, you must file	Addendum B-Re	port of Honorariums or
 1		iade j	political contributions, you	must file Addendu	m C-Political Contributions
I have read RSA	t/Affirmation by Lobby 15, RSA 15-B, RSA 14-C he best of my knowledge	and		r or affirm that the i	foregoing information is true
	Dr.	1		/23/2025	
(Signature of lob	byist)		_	(Dat	(e)
Karen O'k	Keefe				
(Print Name of lo	obbyist)				

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STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

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NEW HAMPSHIRE DEPARTMENT OF STATE

Karen O'Keefe I. Name of Lobbyist(s)	
II. Name of lobbyist's partnership, firm or corporation, if any: Marijuana Policy Project (in-house)	
(Name of partnership, firm or corporation) Marijuana Policy Project (in-house III. Name of Client	10/23/3035 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, government including research, monitoring legislation, and related legal work. The greduced by any expenses: a) Total of all fees received in this reporting period 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 year) c) Total of all fees received to date (Add lines a and b) d) Indicate the amount of any such fees that are due, but have not yet been paid 	of relations, or public relations services ross fee amount reported shall not be 0/ in-house a) \$ b) \$
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to refees. 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 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 of individual expenses where the expenditure was of \$25.00 or less (for examplunch where the cost was \$25.00 or less, purchase of a pen with a value of lobeing lobbied, purchase of a ceremonial object given to a person being lobbied (c) an itemized statement of each individual expenditure made during this repany purpose not covered by (a) (for example: purchase of a meal with value great 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 he aggregate total of all expenses paid expenses; (b) the aggregate total of all expenses paid expenses; (b) the aggregate total of all expenses; (c) the aggregate total of all expenses; (c) the aggregate total of all expenses; (d) the aggregate total of all expenses; (e) the aggregate t
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	520.60 a) \$ b) \$ 0

c) \$ ____

c) Total of all itemized expenditures reported in detail in section VI.

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)	
This should be the amount on line Lot addendim A for tast month s reports	3,805.53 e) \$
f) Total of all expenses year to date	4,326.13
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from loperiod, 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.	
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.	10/23/2025
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.	

(**7**)

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

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

(Print Name of lobbyist)

Name of Lobbying partnership, firm, or corporation Mariquena Jolan Topest
Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any
particular client):t
Date of Report (check one): April 30, 2025 □ July 30, 2025 □ October 29, 2025 ☑ January 28, 2026 □
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 R(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) (Date)