

STATE OF NEW HAMPSHIRE 2024 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

RECEIVEL)
OCT 2 9 2024

NEW HAMPSHILE DEPARTMENT OF STUTE

PLEASE PR	INT		DEPARTIM	
I. Name of Lobbyist(s) Karen N	I. Soucy		33333.	
II. Name of lobbyist's partnership.	, firm or corporation, if a	ny:		
Sheehan Phinney Capitol Gro (Name of partnersh	up ip, firm or corporation)			
Two Eagle Square	Concord	NH	03301	
Business Address: (Street)	(Town/City)	(State)	(Zip Code)	
(603) 228-2370 (Fax)	email_ksoucy(a	sheehan,com		
III. This statement covers: (Choose reportable expense transactions w			file a separate report for	
	rring in the months prior to	the reporting date relative to the	following client:	
GREY2K USA Worldwide				
(Full N	Jame of Client as it appears	on the Lobbyist Registration For	m)	
OR ☐ All reportable transactions by the unrelated to any particular client.	re lobbyist (including the lo	obbyist's family), or the lobbying	firm listed below which are	
IV. Date of Report April 24, 2	2024 🗆	July 31, 2024		
Reports cover: activity from date o	f registration to 3/31/24	activity from 4/1/24 to 6/30/24	activity from 4/1/24 to 6/30/24	
October 30, 2024			unu	
activity from //I	/24 10 9/30/24	activity from 10/1/24 to 12/31	/24	
V. There have been no fees receive If this box is checked, complete just to Concord, NH 03301.	d and no reportable trans his form and submit it to th	sactions made since the last rep we Secretary of State's Office, State	ort. ⊠ te House, Room 204,	
If you have paid an honora Expense Reimbursement	or made expenditures, you n rium or reimbursed expens	nust file Addendum A– Fees and es, you must file Addendum B– ontributions, you must file Adden	Report of Honorariums or	
Sworn Statement/Affirmation by I I have read RSA 15, RSA 15-B and I the best of my knowledge and belief.	RSA 664 and hereby swear	or affirm that the foregoing infor	mation is true and complete to	
71. X		October 30, 2024		
(Signature of lobbyist)		(Date)		
Karen N. Soucy (Print Name of lobbyist)				