

## STATE OF NEW HAMPSHIRE

## 2024 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

AUG 2 2 2024

DEPARTMENT OF STATE

PLEASE PRINT

I. Name of L	Lobbyist(s) Matt Meeha	an		
II. Name of I Pfizer I	lobbyist's partnership, firm or	corporation, if any:		
L11761 I	(Name of partnership, firm or			<u></u> _
c/o	28 Liberty Ship Way, Suite 28	•	CA	94965
Business Addr		(Town/City)	(State)	(Zip Code)
	5) 903-2800	(TOWNE City)	nfizer@no	liticomlaw.com
· ·	lephone)	(Fax)	e-mail plizer @ po	—————
reportable e:	tement covers: (Choose one – f xpense transactions which are table transactions occurring in th	not attributable to any	one client).	
Pfizer I				-
		it appears on the Lobbyist I	Registration Form)	
OR All reports unrelated to a	able transactions by the lobbyist any particular client.	(including the lobbyist's	family), or the lobbying f	ìrm listed below which
V. There ha If this box is c	October 30, 2024 octivity from date of registration October 30, 2024 octivity from 7/1/24 to 9/30/2  activity from fees received an checked, complete just this form	activity d no reportable trans and submit it to the Secre	July 31, 2024	e last report.  7 North Main Street,
	Room 204, Concord, NH 03301.  additional reports are attache			
	ve received fees or made expend		lendum A Fees and Exp	enses
If you ha Expense Rein	ve paid an honorarium or reimbi nbursement	irsed expenses, you must	file Addendum B- Repo	rt of Honorariums or
If you, yo	our firm, or your family has mad	e political contributions,	you must file Addendum	C- Political Contributi
have read R	ment/Affirmation by Lobbyist SA 15, RSA 15-B, RSA 14-C an to the best of my knowledge and	d RSA 664 and hereby s I belief.	wear or affirm that the for	egoing information is t
Matt-7	Nechan		8/20/24	
(Signature of	<u></u>	<del></del>	(Date)	<del>-</del>
Matt Me	eehan			
Print Name	of lobbyist)	<del></del>		