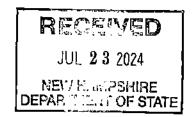


## STATE OF NEW HAMPSHIRE

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



PLEASE PRINT

I. Name of Lobbyist(s) Jessica Eske	eland
II. Name of lobbyist's partnership, firm or corpor	ration, if any:
(Name of partnership, firm or corpora	tion)
309 Waverley Oak	s Road, Waltham, MA 02452
	own/City) (State) (Zip Code)
( ) (603) 568-9357 ( )	e-mail compliance_nh_alz_1@multistate.us (Fax)
III. This statement covers: (Choose one – file separeportable expense transactions which are not att	arate reports for each client, OR you may file a separate report for tributable to any one client).
All reportable transactions occurring in the mont	ths prior to the reporting date relative to the following client:
`	sociation ars on the Lobbyist Registration Form)
All reportable transactions by the lobbyist (include unrelated to any particular client.	ling the lobbyist's family), or the lobbying firm listed below which are
IV. Date of Report April 24, 2024  Reports cover: activity from date of registration to 3/31  October 30, 2024  activity from 7/1/24 to 9/30/24	July 31, 2024 activity from 4/1/24 to 6/30/24  January 29, 2025  activity from 10/1/24 to 12/31/24
	reportable transactions made since the last report. Lebels to the Secretary of State's Office, 107 North Main Street,
VI. Check if additional reports are attached:	
·	you must file Addendum A-Fees and Expenses
If you have paid an honorarium or reimbursed e Expense Reimbursement	xpenses, you must file Addendum B-Report of Honorariums or
<del></del>	ical contributions, you must file Addendum C-Political Contributions
Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15-B, RSA 14-C and RSA and complete to the best of my knowledge and belie	A 664 and hereby swear or affirm that the foregoing information is true f.
_Jessica Eskeland	7/8/24
Jesska Est-shod Gut 8. 2024 19 39 807) (Signature of lobbyist)	(Date)
Jessica Eskeland	
(Print Name of lobbyist)	•