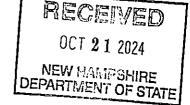


STATE OF NEW HAMPSHIRE

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



PLEASE PRINT

I. Name of Lobbyist(s) Margar	et Gorman, Erin DeSa	ntis, Raza Ali	DEPARTMENT OF S
II. Name of lobbyist's partnership), firm or corporation, if any:		
American Chemistry Co	ouncil		
(Name of partnersh	ip, firm or corporation)		
54 State Street #304	Albany	NY	12207
Business Address: (Street)	(Town/City)	(State)	(Zip Code)
518-432-7835	()	e-mail_	an@americanchemistry.com
(Telephone)	(Fax)	margaret	_gorman@
III. This statement covers: (Choose reportable expense transactions w	which are not attributable to any	each client, OR you m one client).	nay file a separate report for
All reportable transactions occu	rring in the months prior to the rep	orting date relative to t	he following client:
AmericanChemistryCo	uncil		
•	of Client as it appears on the Lobbyist	Registration Form)	· ·
All reportable transactions by the unrelated to any particular client. IV. Date of Report April 24 Reports cover: activity from date of re-	egistration to 3/31/24 act	July 31, 2024 July 31, 2024 July 31, 2024 January 29, 2025	
[·]	eived and no reportable trans this form and submit it to the Secr VH 03301.	etary of State's Office, dendum A– Fees and I	the last report. 107 North Main Street,
	A 14-C and RSA 664 and hereby s	•	·
In an GONAT IN	Queman	10/14/24	
(Signature of lobbyist)	Chelin Fron C		ate)
Margaret Gorman		,	•
(Print Name of lobbyist)	 		

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.

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:

Name of Lobbying partnership, fir Name of Client (leave blank if Staparticular client):			•	
Date of Report (check one):				
·	2024 🚨 October 30	, 2024 🗔 🗸 January	29, 2025 🔲	
I have read RSA 15, RSA 15-B, I the following Addendums submit submitted):				
Addendum A(s).		none		
Addendum B(s).	_			
Addendum C(s).	_			
I hereby swear or affirm that the f complete to the best of my knowled				
(Signature of lobbyist)		10/14/2 (Da	te)	
Raza Ali (Print Name of lobbyist)				

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.

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:

Name of Client (leave		or the partnership, firm, or	hemistry Council corporation and not related to any
Date of Report (check	s one):		
April 24, 2024 📮	July 31, 2024 📮	October 30, 2024 🔟	/ January 29, 2025 □
			nd Expenses described above, and number of Addendum forms being
Addendum A(s).		1	none
Addendum B			
Addendum C(s),		
	rm that the foregoing in f my knowledge and be		nt and each Addendum is true and
Lim Alfon (Signature of lobbyist)	biD		0/14/24 (Date)
Erm Desc			,
(Print Name of lobby)	st)		