

## STATE OF NEW HAMPSHIRE

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

## JAN 27 2025

NEW HAMPSHIRE DEPARTMENT OF STATE

## PLEASE PRINT

I. Name of Lobbyist(s)	Jeff Mauk			
I. Name of lobbyist's par	rtnership, firm or	corporation, if any:		
(Name of	partnership, firm or c	orporation)		
99 Chauncy Street.	, 6th Floor	Boston	MA	02111
Jusiness Address: (Street)		(Town/City)	(State)	(Zip Code)
(617)-247-070 (Telephone)	0(	(Fax)	e-mail complian	ce_nh_ceres_1@multistate
II. This statement covers eportable expense transa				y file a separate report for
71				
_ All reportable transacti	ons occurring in the	e months prior to the r	eporting date relative to the	e following client:
Ceres, Inc.			- B 1 - 1 - B - 1	
O <b>R</b>	Il Name of Client as i	t appears on the Lobbyi	st Registration Form)	
<del>~~</del>		(including the lobbyis	t's family), or the lobbying	firm listed below which are
V. Date of Report  eports cover: activity from	April 24, 2024	<u></u>	July 31, 2024	
	ctober 30, 2024 Grom 7/1/24 to 9/30/2	acti	January 29, 2025 <b>V</b> wity from 10/1/24 to 12/31/24	
	olete just this form o		nsactions made since th cretary of State's Office, 10	
<u>I.</u> Check if additional re	ports are attached	l:		
	•		ddendum A- Fees and Ex	penses
xpense Reimbursement			ust file Addendum B Rep	36
If you, your firm, or yo	our family has made	political contribution	s, you must file <b>Addendur</b>	n C- Political Contributions
worn Statement/Affirms have read RSA 15, RSA I and complete to the best of	5-B, RSA 14-C and		y swear or affirm that the fo	pregoing information is true
Well Mour	_		01/21/2025	(a)
Signature of lobbyist)			(Date	<del>)</del>
Jeff Mauk				
Print Name of lobbyist)				