RECEIVED



(Print Name of lobbyist)

STATE OF NEW HAMPSHIRE 2019 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

OCT 3 0 2019

NEW HAMPERED DEPARTMENT OF STATE

	PLEASE PRINT				and Advice 111 Of	
1. Name of Lobbyist(s) Kathleen Garrett	Loughran	- -			
II. Name of lobbyist's	s partnership, firm or	corporation, if an	ıy:			
Anthem, Inc.						
(Nan	ne of partnership, firm or	corporation)		•		
120 Monument Ci	rcle	Indianapolis		N	46204	
Business Address: (St	reet)	(Town/City)		State)	(Zip Code)	
(800) 331-1476	(()		c-mail Kathleen,loughran@anthem.com		
(Telephone)		(Fax)				
reportable expense ti	ransactions which are	not attributable to	o any one client).	-	y file a separate report for e following client:	
Andrem, Inc.	(Full Name of Client as	it appears on the Lot	byist Registration	orm)		
<u>OR</u>	(u) -u		, (6.04.2 ,)(011117		
All reportable trans unrelated to any particular		(including the lob)	byist's family), or	the lobbying	; firm listed below which are	
IV. Date of Report	April 24, 2019 🗍			July 31, 2019 🗍		
Reports cover: activ	· · _		• -	ivity from 4/1/19 to 6/30/19		
		October 30, 2019 🕅 clivity from 7/1/19 to 9/30/19 acc		January 29, 2020 [] ivity from 10/1/19 to 12/31/19		
If this box is checked,	no fees received an complete just this form 4, Concord, NH 03301	and submit it to the				
VI. Check if addition	al reports are attache	ed:				
[] If you have receiv	ed fees or made expen-	ditures, you must fi	le Addendum A-	Fees and Ex	(penses	
☐ If you have paid a Expense Reimburseme		ursed expenses, you	u must file Adder	dum B– Rej	port of Honorariums or	
If you, your firm,	or your family has mad	le political contribu	ntions, you must f	le Addendu	m C- Political Contributions	
I have read RSA 15, R	rest of my knowledge ar rest Lough	nd RSA 664 and he	ereby swear or aff	irm that the f	Foregoing information is true	