STATE OF NEW HAMPSHIRE

2017 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

PLEASE PRINT

RECEIVED

I. Name of Lobb	oyist(s)	Fred Zeytoonj	an		OCT 19 2017
II. Name of lobb	oyist's partners	ip, firm or corpo	ation, if any:		NEW HAMPSHIRE DEPARTMENT OF STATE
	Apple Ir				OF STATE
	(Name of partner	ship, firm or corporat	ion)		
28 Liberty S	hip Way, Suite	2815, Sausalito	, CA 94965		
Business Address:	(Street)	(To	wn/City)	(State)	(Zip Code)
(415) <u>903</u> (Teleph		(415)	610-7604 (Fax)	e-mail apple2	@politicomlaw.com
reportable expe	nse transactions	which are not att	ributable to any	one client).	nay file a separate report for
★ All reportabl	e transactions oc	curring in the mont	hs prior to the rep	orting date relative to t	he following client:
	Apple Inc.	e of Client as it appea	Tables	Designation Francis	
<u>OR</u>	(Fuii Nam	e of Chent as it appea	irs on the Lobbyist	Registration Form)	
	e transactions by particular client.	the lobbyist (includ	ling the lobbyist's	family), or the lobbying	ng firm listed below which are
IV. Date of Rep Reports cover:	-	, 2017 🗍 e of registration to 3/	31/17 acti	July 26, 2017	
		25, 2017 🛮 17/1/17 to 9/30/17	acti	January 31, 2018 ivity from 10/1/17 to 12/3	1/17
	cked, complete ji			sactions made since etary of State's Office,	the last report. X State House, Room 204,
VI. Check if add	ditional reports	are attached:			
☐ If you have :	received fees or i	nade expenditures,	you must file Ad	dendum A– Fees and l	Expenses
☐ If you have j Expense Reimbu		ım or reimbursed e	xpenses, you mus	t file Addendum B – R	eport of Honorariums or
☐ If you, your	firm, or your fan	nily has made politi	cal contributions,	you must file Addend	um C- Political Contributions
Sworn Statemers Shave read RSA and complete to (Signature of lo	obyist)	y Lobbytst RSA 14-C and RSA rowledge and helie	c	Swear or affirm that the O/17/2	foregoing information is true 2017 ate)
(Print Name of	lobbyist)				