P I. Name of Lobbyi

E A S E

P R I N T

STATE OF NEW HAMPSHIRE RECEIVED

Lobbyists Report of Honorariums or Expense Reimbursement

Addendum B (RSA Chapter 15:6)

OCT 23 2015

NEW HAMPSHIRE DEPARTMENT OF STATE

I. Name of Lobbyist(s)				
II. Name of lobbyist's partnership, firm or corporation, if any:				
New Hampshire /imberland Owners Association (Name of partnership, firm or corporation)				
III. Name of Client New Hampshire Timberhad Quiners Sec. Date 10/21/15				
State the full name of the person receiving the honorarium or expense reimbursement:				
Last Name First Name Middle Name/Initial				
Last Name First Name Middle Name/Initial				
What is the value of the honorarium or expense reimbursement? \$ 34.25				
Describe the event to which the honorarium or expense reimbursement relates. (Include the date(s) and location(s) of the event).				
Trips b Los to work on Legislation 7/16, 8/18, 9/1, 9/10, 9/22 mileage and parking				
miles are and packing				
(If there is more than one honorarium or expense reimbursement use a separate addendum B form for each.)				
Sworn Statement/Affirmation by Lobbyist				
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm that the foregoing information				
is true and complete to the best of my knowledge and belief.				
(Date)				
(Signature of lobbyist) / (Daté)				
Jasen L. Stock				
(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/Affi Statement of Income	•	yist	,
	-	ration: New Henryhye	Tobalcal On Assa
		•	corporation and not related to any
particular client):	and it Statement is it	or the partnership, min, or t	orporation and not related to any
F	 -		
Date of Report (check or	1e):		
April 29, 2015 □	July 29, 2015 🗆	October 28, 2015	January 27, 2016 □
			d Expenses described above, and mber of Addendum forms being
Addendum A(s). Addendum B(s).			
Addendum C(s).			
I hereby swear or affirm complete to the best of m	• •		and each Addendum is true and
(Signature of losbyist)			(Date)
Josen	Stock		
(Print Name of lobbyist)			