

I. Name of Lobbyist(s)

STATE OF NEW HAMPSHIRE

2021 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

RECEIVED

JAN 25 2022

NEW HAMPSHIRE DEPARTMENT OF STATE

PLEASE PRINT

Adam Schmidt

II. Name of lobbyist's partnership, firm or corporation, if any: J. Grimbilas Strategic Solutions, LLC (Name of partnership, firm or corporation) 4 Park Street NH Concord 03301 Business Address: (Town/City) (Street) (State) (Zip Code) adam@jgstrategies.com (Telephone) III. This statement covers: (Choose one - file separate reports for each client, OR you may file a separate report for reportable expense transactions which are not attributable to any one client). All reportable transactions occurring in the months prior to the reporting date relative to the following client: (Full Name of Client as it appears on the Lobbyist Registration Form) OR All reportable transactions by the lobbyist (including the lobbyist's family), or the lobbying firm listed below which are unrelated to any particular client. April 28, 2021 IV. Date of Report July 28, 2021 activity from date of registration to 3/31/21 Reports cover: activity from 4/1/21 to 6/30October 27, 2021 January 26, 2022 activity from 7/1/21 to 9/30/21 activity from 10/1/21 to 12/31/21 V. There have been no fees received and no reportable transactions made since the last report. If this box is checked, complete just this form and submit it to the Secretary of State's Office, 107 North Main Street. State House, Room 204, Concord, NH 03301. VI. Check if additional reports are attached: If you have received fees or made expenditures, you must file Addendum A-Fees and Expenses If you have paid an honorarium or reimbursed expenses, you must file Addendum B-Report of Honorariums or Expense Reimbursement ✓ If you, your firm, or your family has made political contributions, you must file Addendum C-Political Contributions Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15-B, RSA 14-C and RSA 664 and hereby swear or affirm that the foregoing information is true and complete to the best of my/knowledge and belief. (Signature of lobbyist) (Print Name of lobbyist)

STATE OF NEW HAMPSHIRE

Lobbyists Report of Political Contributions Addendum C (RSA Chapter 15:6)

| I. Name of Lobbyist(s) Adan | n Schmidt | | |
|---|---------------------------|--|--|
| II. Name of lobbyist's partne | rship, firm or cor | poration, if any: | |
| J.Grimbilas Strategic So | | , , | |
| | hip, firm or corporation) | | |
| III. Name of Client | | | Date |
| | | | |
| Political Contributions For each political contribution | that is reportable r | oursuant to RSA Chan | ter 664 naid on hehalf of the |
| client/lobbyist and lobbying fi | | | To the part of the state |
| | | | |
| _ | | _ | |
| Full name of candidate: Gai | ry Daniels for | | |
| 100 | (Last Name) | (First Name) | (Middle Name/Initial) |
| Amount of contribution \$ 100 | O: | ffice Candidate is Seekir | ng |
| actual cost of the in-kind contribu | ution on the line abov | a description of the good re for amount of contribu | ls or services provided, and enter the ation. If the actual cost is not known, |
| enter an estimated value and the | word "estimate." | | |
| | | | |
| | | | |
| | | | |
| | | | |
| Full name of candidate: Der | nise Ricciardi | for State Senate | e |
| | (Last Name) | (First Name) | (Middle Name/Initial) |
| Amount of contribution \$ 100 | | Office Candidate is See | king |
| | | | |
| actual cost of the in-kind contribution is an in-kind c | ontribution, provide a | a description of the good re for amount of contribu | s or services provided, and enter the ation. If the actual cost is not known, |
| enter an estimated value and the | | | , |
| | | | |
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| | | | |
| | | | |
| Full name of candidate: | Bob Giuda | For State Se | enate |
| | (Last Name) | (First Name) | (Middle Name/Initial) |
| Amount of contribution \$ 100 | | Office Candidate is Seel | king |

| If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter the actual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not known, enter an estimated value and the word "estimate." |
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| |
| (If more than three contributions were made, report additional contributions on separate addendum C forms.) |
| 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. (Signature of lobbyist) (Print Name of lobbyist) |

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