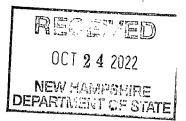


STATE OF NEW HAMPSHIRE



I. Name of Lobbyist(s)	odi Grimbilas			
II. Name of lobbyist's pa	rtnership, firm or co	orporation, if any:		
J Grimbilas Strategic Solutions				
	rtnership, firm or corporation)		
III. Name of Client		· · · · · · · · · · · · · · · · · · ·	Date 10/24/2022	
Political Contributions For each political contributions client/lobbyist and lobbyi		e pursuant to RSA Chapter 6 following:	664 paid on behalf of the	
Full name of candidate:	San bor w (Last Name)	Lourié (First Name)	(Middle Name/Initial)	
Amount of contribution \$_	100	Office Candidate is Seeking	House	
antar on actimated victors	the word "actimate"			
enter an estimated value and	lì-0			
Full name of candidate:	Li-P++5 (Last Name)	JA Chia (First Name)	(Middle Name/Initial)	
CA	li-pitts (Last Name)	(First Name) Office Candidate is Seeking	·	
Full name of candidate: Amount of contribution \$	(Last Name) VOO ind contribution, providentribution on the line ab	Office Candidate is Seeking	services provided, and enter the	
Full name of candidate: Amount of contribution \$	(Last Name) VOO ind contribution, providentribution on the line ab	Office Candidate is Seeking	services provided, and enter the	
Full name of candidate: Amount of contribution \$ If the contribution is an in-k actual cost of the in-kind co enter an estimated value and	(Last Name) (Last Name) (Last Name) ind contribution, provide ntribution on the line about the word "estimate."	Office Candidate is Seeking le a description of the goods or love for amount of contribution	·	

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."
(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) (Date)
Print Name of lobbyist)

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STATE OF NEW HAMPSHIRE

I. Name of Lobbyist(s)	di Grimbilas		_
II. Name of lobbyist's part	mership, firm or cor	poration, if any:	
J Grimbilas Strategic S	Solutions		
	nership, firm or corporation)		
III. Name of Client			Date 10/24/2022
Political Contributions	ion that is reportable	pursuant to RSA Chapt	ter 664 paid on behalf of the
Full name of candidate:	Smith (Last Name)	Steven (First Name)	(Middle Name/Initial)
Amount of contribution \$		•	
enter an estimated value and t			
Full name of candidate:	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$	100.	Office Candidate is Seel	king Serate
If the contribution is an in-kin	d contribution, provide	a description of the good	is or services provided, and enter the actual cost is not known,
Full name of candidate: Amount of contribution \$	(Last Name)	(First Name) Office Candidate is Seel	Middle Name/Initial)
AURUM OF COMPINITION &	100	- Utrice Candidate is Seel	king VIV VALL

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."
(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) Josi Grimbilis (Date)
(Print Name of lobbyist)

STATE OF NEW HAMPSHIRE

•	I. Name of Lobbyist(s) JOdi Grimbilas
C	II. Name of lobbyist's partnership, firm or corporation, if any:
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5	J Grimbilas Strategic Solutions (Name of partnership, firm or corporation)
C	
•	III. Name of Client
λ Γ	Political Contributions For each political contribution that is reportable pursuant to RSA Chapter 664 paid on behalf of the client/lobbyist and lobbying firm, indicate the following:
	Full name of candidate: (Last Name) (First Name) (Middle Name/Initial)
	Amount of contribution \$ \\ \OO\ \O\ \O\ \O\ \O\ \O\ \O\ \O\ \
	enter an estimated value and the word "estimate."
	Full name of candidate: Abbas Dovry (Last Name) (First Name) (Middle Name/Initial)
	Amount of contribution \$ 100 Office Candidate is Seeking Sevate
	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."
	Full name of candidate: D'Alle (and r) Lov
	(Last Name) (First Name) (Middle Name/Initial)
	Amount of contribution \$ \(\begin{align*} \to

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."
(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) (Date)
(Print Name of lobbyist)

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STATE OF NEW HAMPSHIRE

J Grimbilas Strategic		`	
(Name of par	tnership, firm or corporation	n)	40/04/0000
III. Name of Client			Date 10/24/2022
Political Contributions For each political contribu client/lobbyist and lobbyir			er 664 paid on behalf of the
Full name of candidate: _	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$	100	Office Candidate is Seeking	Senate
		de a description of the goods bove for amount of contribut	or services provided, and enter the
actual cost of the in-kind con enter an estimated value and			
enter an estimated value and	the word "estimate."	Barbara	
	Coffic (Last Name)	Borbara (First Name)	(Middle Name/Initial) ingSevot-e
Full name of candidate: Amount of contribution \$	(Last Name) nd contribution, provintribution on the line a	Borbara (First Name) Office Candidate is Seeking the goods	(Middle Name/Initial)

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."	
(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) (Signature of lobbyist) (Date)	

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STATE OF NEW HAMPSHIRE

I. Name of Lobbyist(s)	٠		
II. Name of lobbyist's par	tnership, firm or c	corporation, if any:	
J Grimbilas Strategic			
(Name of par	tnership, firm or corporatio	n)	
III. Name of Client			_{Date} 10/24/2022
Political Contributions For each political contributions client/lobbyist and lobbyist			ter 664 paid on behalf of the
Full name of candidate: _			(Middle Name/Initial)
Amount of contribution \$	500	Office Candidate is Seekir	ng
If the contribution is an in-ki	$S \omega \sim 1$	ide a description of the good	ls or services provided, and enter the
actual cost of the in-kind cor		bove for amount of contribu	ution. If the actual cost is not known
actual cost of the in-kind cor enter an estimated value and	the word "estimate."	bove for amount of contribu	ution. If the actual cost is not known
actual cost of the in-kind corenter an estimated value and	the word "estimate." Lovse (Last Name)	Chulu (First Name)	(Middle Name/Initial)
actual cost of the in-kind corenter an estimated value and Full name of candidate: Amount of contribution \$	the word "estimate." Lovse (Last Name)	Chulu (First Name)	ution. If the actual cost is not known
actual cost of the in-kind corenter an estimated value and Full name of candidate: Amount of contribution \$ If the contribution is an in-king.	the word "estimate." Lovse (Last Name) 250 Indicontribution, provintribution on the line a	(First Name) Office Candidate is See	(Middle Name/Initial) king US Sevet-e
actual cost of the in-kind corenter an estimated value and Full name of candidate: Amount of contribution \$ If the contribution is an in-kind cortal cost of the in-kind cost of the in	the word "estimate." Lovse (Last Name) 250 Indicontribution, provintribution on the line a	(First Name) Office Candidate is See	(Middle Name/Initial) king US Sevet-e
actual cost of the in-kind corenter an estimated value and Full name of candidate: Amount of contribution \$ If the contribution is an in-kind corenter an estimated value and	the word "estimate." Lovse (Last Name) 250 Indicontribution, provintribution on the line a	(First Name) Office Candidate is See	(Middle Name/Initial)
actual cost of the in-kind corenter an estimated value and Full name of candidate: Amount of contribution \$ If the contribution is an in-kind cortal cost of the in-kind cost of the in	the word "estimate." Lovse (Last Name) 250 Indicontribution, provintribution on the line a	(First Name) Office Candidate is See	(Middle Name/Initial) king US Sevet-e

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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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) (Date)
(Print Name of lobbyist)

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