	SULL OF JU	STAT	TE OF NEW HAMP	SHIRI	5
			Lobbyists Report of Political Contribution	8	RECEIVED
			Addendum C	5	
	\$1116 F		(RSA Chapter 15:6)		JUL 27 2021
					NEW HAMPSHIRE DEPARTMENT OF STATE
P	I. Name of Lobbyist(s) JOC	li Grimbilas			
L E	II. Name of lobbyist's par	tnership, firm or c	orporation, if any:		
A 5	J. Grimbilas Strategic	Solutions LLC			
E	(Name of parts	nership, firm or corporation	1)		
P	III. Name of Client		I	Date	
R I N T	Political Contributions For each political contribut client/lobbyist and lobbyin	-	le pursuant to RSA Chapter 66 following:	4 paid on	behalf of the
	Full name of candidate:	(Last Name)	B 11 (First Name)	(Middle N	ame/Initial)
	Amount of contribution \$	100	Office Candidate is Seeking	State	Servate.
		tribution on the line a	de a description of the goods or so bove for amount of contribution.		
	Full name of candidate:	(Last Name)	Joe · (First Name)		ame/Initial)
	Full name of candidate:	(Last Name)	(•
	Amount of contribution \$ If the contribution is an in-kin	(Last Name) 100 ad contribution, provident	Joe (First Name) Office Candidate is Seeking de a description of the goods or so bove for amount of contribution.	Exe ervices pro	<u>cuture</u> Council ovided, and enter the
	Amount of contribution \$ If the contribution is an in-kin actual cost of the in-kind cont	(Last Name) 100 ad contribution, provident tribution on the line al the word "estimate."	Office Candidate is Seeking de a description of the goods or se	Exe ervices pro If the actu	<u>cuture</u> Council ovided, and enter the

(turn over to continue \rightarrow)

(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.

a (Signature of lobbyist)

7 23 2021 (Date)

Jodi Grimbilas

		Lobbyists Report of Political Contribution Addendum C (RSA Chapter 15:6)	15	REGEN JUL 27 NEW HAMP
I. Name of Lobbyist(s) _	odi Grimbilas			DEPARTMENT
II. Name of lobbyist's p	artnership, firm or co	orporation, if any:		
J. Grimbilas Strateg				
(Name of p	partnership, firm or corporation)		
III. Name of Client			Date	
Political Contributions For each political contri client/lobbyist and lobby	bution that is reportabl	e pursuant to RSA Chapter 6 following:	64 paid o	n behalf of the
Full name of candidate:		(First Name)		Name/Initial)
Amount of contribution \$	00	Office Candidate is Seeking	tito	Senate.
If the contribution is an in- actual cost of the in-kind c	-kind contribution, provid ontribution on the line at	le a description of the goods or pove for amount of contribution	services p	ovided, and enter the
If the contribution is an in-	kind contribution, provid contribution on the line ab ad the word "estimate."	te a description of the goods or	services pr If the act	rovided, and enter the ual cost is not known,
If the contribution is an in- actual cost of the in-kind c enter an estimated value ar	kind contribution, provid contribution on the line ab ad the word "estimate."	te a description of the goods or	services pr If the act (Middle 1	vovided, and enter the ual cost is not known,
If the contribution is an in- actual cost of the in-kind c enter an estimated value ar	kind contribution, provide contribution on the line ab ad the word "estimate." <u>Whittey</u> (Last Name)	te a description of the goods or	services pr If the act (Middle N	rovided, and enter the ual cost is not known,
If the contribution is an in- actual cost of the in-kind c enter an estimated value ar 	kind contribution, provide contribution on the line ab and the word "estimate." <u>ULast Name</u>) <u>ID O</u> -kind contribution, provide contribution on the line ab	de a description of the goods or bove for amount of contribution Becky (First Name)	(Middle N (Middle N Sta	Name/Initial)
If the contribution is an in- actual cost of the in-kind c enter an estimated value ar Full name of candidate: Amount of contribution \$ If the contribution is an in- actual cost of the in-kind c	kind contribution, provide contribution on the line ab and the word "estimate." <u>ULast Name</u>) <u>ID O</u> -kind contribution, provide contribution on the line ab	te a description of the goods or pove for amount of contribution <u>Becky</u> (First Name) Office Candidate is Seeking te a description of the goods or	(Middle N (Middle N Sta	Name/Initial)
If the contribution is an in- actual cost of the in-kind c enter an estimated value ar Full name of candidate: Amount of contribution \$ If the contribution is an in- actual cost of the in-kind c	kind contribution, provide contribution on the line ab and the word "estimate." <u>Whithey</u> (Last Name) <u>ID 0</u> kind contribution, provide contribution on the line ab and the word "estimate."	le a description of the goods or pove for amount of contribution (First Name)	services pr If the act (Middle I Sta services pr If the act	Name/Initial)

(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)

Jodi Grimbilas

		Lobbyists Report of Political Contribution Addendum C (RSA Chapter 15:6)	ns	RECE	
I. Name of Lobbyist(s) _	odi Grimbilas			NEW HAM DEPARTMENT	PSHIRE
II. Name of lobbyist's p	artnership, firm or co	rporation, if any:			
J. Grimbilas Strateg	ic Solutions LLC				
(Name of	partnership, firm or corporation)	· · · · ·			
III. Name of Client			Date		
-		pursuant to RSA Chapter 6 ollowing:	64 paid on t	oehalf of the	
Full name of candidate:	(Last Name)	(First Name)	(Middle Nan	,	
				ia	
	-kind contribution, provide	Office Candidate is Seeking	services prov	ided, and enter th	
If the contribution is an in	kind contribution, provide		services prov	ided, and enter th	
If the contribution is an in actual cost of the in-kind of enter an estimated value a	-kind contribution, provide contribution on the line abo nd the word "estimate."	e a description of the goods or ove for amount of contribution.	services prov If the actual	ided, and enter th l cost is not know	
If the contribution is an in actual cost of the in-kind of enter an estimated value a 	-kind contribution, provide contribution on the line abo nd the word "estimate." <u>NH Servet-e</u> (Last Name)	De <u>Mic varz</u> Cr (First Name)	services prov If the actual	ided, and enter th l cost is not know	n,
If the contribution is an in actual cost of the in-kind of enter an estimated value a Full name of candidate: Amount of contribution \$ If the contribution is an in	-kind contribution, provide contribution on the line abo nd the word "estimate." $\underline{NH} \qquad Sevent=e$ (Last Name) $\underline{J50}$ -kind contribution, provide contribution on the line abo	e a description of the goods or ove for amount of contribution.	services prov If the actual	ided, and enter th l cost is not know 	n,
If the contribution is an in actual cost of the in-kind of enter an estimated value a 	-kind contribution, provide contribution on the line abo and the word "estimate." $\underline{NH} \qquad \underbrace{Sevate}_{(Last Name)}$ $\underline{J50}$ -kind contribution, provide contribution on the line abo and the word "estimate."	De <u>max</u> <u>verte</u> (First Name) _ Office Candidate is Seeking a description of the goods or	services prov If the actual	ided, and enter th l cost is not know ne/Initial) ided, and enter th l cost is not know	n,

(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.

nun (Signature of lobbyist)

1 23 2021 (Date)

Jodi Grimbilas

	Po	Lobbyists Report of Ditical Contribution Addendum C RSA Chapter 15:6)	JUL 27 20 NEW HAMPS DEPARTMENT O
I. Name of Lobbyist(s)	odi Grimbilas		DEFAILMENTO
II. Name of lobbyist's p	artnership, firm or corpora	tion, if any:	
J. Grimbilas Strateg	ic Solutions LLC		
(Name of)	partnership, firm or corporation)		
III. Name of Client		I	Date
	bution that is reportable pursu ying firm, indicate the follow		4 paid on behalf of the
	(Last Name)		(Middle Name/Initial)
A	101)	Condidate in Condition S	hto Comto.
If the contribution is an in-	10 U Office	cription of the goods or s	ervices provided, and enter the
If the contribution is an in- actual cost of the in-kind c enter an estimated value an	kind contribution, provide a des ontribution on the line above for ad the word "estimate."	cription of the goods or s	ervices provided, and enter the
If the contribution is an in- actual cost of the in-kind c enter an estimated value ar	kind contribution, provide a des ontribution on the line above for ad the word "estimate."	cription of the goods or s	ervices provided, and enter the
If the contribution is an in- actual cost of the in-kind c enter an estimated value at 	kind contribution, provide a des ontribution on the line above for ad the word "estimate."	cription of the goods or so amount of contribution.	(Middle Name/Initial)
If the contribution is an in- actual cost of the in-kind c enter an estimated value at 	kind contribution, provide a des ontribution on the line above for ad the word "estimate." <u>Wal was estimate.</u> (Last Name) <u>250</u> Offi- kind contribution, provide a des ontribution on the line above for	Cription of the goods or so amount of contribution.	(Middle Name/Initial) The actual cost is not known,
If the contribution is an in- actual cost of the in-kind c enter an estimated value at 	kind contribution, provide a des ontribution on the line above for ad the word "estimate." <u>Wat we estimate.</u> (Last Name) <u>350</u> Offi- kind contribution, provide a des ontribution on the line above for ad the word "estimate."	Cinde (First Name) ce Candidate is Seeking cription of the goods or s r amount of contribution.	(Middle Name/Initial) The actual cost is not known, (Middle Name/Initial) The actual cost is not known,
If the contribution is an in- actual cost of the in-kind c enter an estimated value at 	kind contribution, provide a des ontribution on the line above for ad the word "estimate." <u>Wal we estimate.</u> (Last Name) <u>J50</u> Offi- kind contribution, provide a des ontribution on the line above for ad the word "estimate."	Cription of the goods or so amount of contribution.	(Middle Name/Initial) (Middle Name/Initial)

(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)

2021 (Date)

Jodi Grimbilas (Print Name of lobbyist)

	STATE	OF NEW HAMP Lobbyists Report of	f	3
		Political Contribution Addendum C	ns	RECEIVED
21118		(RSA Chapter 15:6))	JUL 27 2021
I. Name of Lobbyist(s)	li Grimbilas			NEW HAMPSHIRE
II. Name of lobbyist's par	tnership, firm or corp	oration, if any:		
J. Grimbilas Strategic	Solutions LLC			
(Name of part	nership, firm or corporation)			
III. Name of Client			Date	
Political Contributions For each political contribucient/lobbyist and lobbyin			64 paid on	behalf of the
Full name of candidate:			-	,
			A. 1 C	1
Amount of contribution \$				
Amount of contribution \$	d contribution, provide a ribution on the line above	description of the goods or	services pro	vided, and enter the
If the contribution is an in-kin actual cost of the in-kind con	d contribution, provide a ribution on the line above	description of the goods or for amount of contribution Bob	services pro	vided, and enter the al cost is not known,
If the contribution is an in-kin actual cost of the in-kind com enter an estimated value and t 	d contribution, provide a ribution on the line above he word "estimate." <u>Givici</u> (Last Name)	description of the goods or for amount of contribution Bob (First Name)	services pro . If the actua (Middle Na	vided, and enter the al cost is not known,
If the contribution is an in-kin actual cost of the in-kind con- enter an estimated value and t	d contribution, provide a ribution on the line above he word "estimate." <u>Givici</u> (Last Name)	description of the goods or for amount of contribution Bob	services pro . If the actua (Middle Na	vided, and enter the al cost is not known,
If the contribution is an in-kin actual cost of the in-kind com enter an estimated value and t 	Id contribution, provide a ribution on the line above he word "estimate." (Last Name) DD (Id contribution, provide a ribution on the line above	description of the goods or for amount of contribution Bob (First Name) Office Candidate is Seeking description of the goods or	Stat- services pro	vided, and enter the al cost is not known, <u>me/Initial</u>) <u>e Servet-e</u> . vided, and enter the
If the contribution is an in-kin actual cost of the in-kind con- enter an estimated value and the second second second second second Full name of candidate:	Id contribution, provide a ribution on the line above he word "estimate." (Last Name) DD (Id contribution, provide a ribution on the line above	description of the goods or for amount of contribution Bob (First Name) Office Candidate is Seeking description of the goods or	Stat- services pro	vided, and enter the al cost is not known, <u>me/Initial</u>) <u>e Servet-e</u> . vided, and enter the
If the contribution is an in-kin actual cost of the in-kind con- enter an estimated value and the second second second second second Full name of candidate:	Id contribution, provide a ribution on the line above he word "estimate." (Last Name) DD (Id contribution, provide a ribution on the line above	description of the goods or for amount of contribution Bob (First Name) Office Candidate is Seeking description of the goods or	Stat- services pro	vided, and enter the al cost is not known, me/Initial) <u>e Servat-e</u> . vided, and enter the al cost is not known,

(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)

Jodi Grimbilas

	~~~~	OF NEW HAMP Lobbyists Report of Political Contribution Addendum C (RSA Chapter 15:6)		JUL 27 2021
I. Name of Lobbyist(s)	li Grimbilas		1	DEPARTMENT OF ST
II. Name of lobbyist's par	tnership, firm or corp	ooration, if any:		
J. Grimbilas Strategic	Solutions LLC			
(Name of part	nership, firm or corporation)			
III. Name of Client		]	Date	
Political Contributions For each political contribuction client/lobbyist and lobbyir			54 paid on b	ehalf of the
Full name of candidate:	(Last Name)	(First Name)	(Middle Nam	•
If the contribution is an in-ki				
	tribution on the line abov	a description of the goods or s re for amount of contribution.		
actual cost of the in-kind con	tribution on the line abov			cost is not known,
actual cost of the in-kind con enter an estimated value and	tribution on the line abov the word "estimate."	e for amount of contribution.	If the actual	cost is not known,
actual cost of the in-kind con enter an estimated value and 	tribution on the line abov the word "estimate." (Last Name) LOU nd contribution, provide a tribution on the line abov	e for amount of contribution.	Middle Nam Stute Services provi	e/Initial)
actual cost of the in-kind con enter an estimated value and 	tribution on the line abov the word "estimate." (Last Name) LOU nd contribution, provide a tribution on the line abov	e for amount of contribution.	Middle Nam Stute Services provi	terinitial)

(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)

7. .

Jodi Grimbilas (Print Name of lobbyist)

	STATE OF NEW HAMPS Lobbyists Report of Political Contributions Addendum C (RSA Chapter 15:6)	JUL 27 2021
I. Name of Lobbyist(s) Jodi Grin	mbilas	DEPARTMENT OF STA
II. Name of lobbyist's partnersh	hip, firm or corporation, if any:	
J. Grimbilas Strategic Solut	tions LLC	
(Name of partnership,	firm or corporation)	
III. Name of Client	Dat	te
<b>Political Contributions</b> For each political contribution th client/lobbyist and lobbying firm	nat is reportable pursuant to RSA Chapter 664 j n, indicate the following:	paid on behalf of the
1	<u> </u>	fiddle Name/Initial)
Amount of contribution \$	00 Office Candidate is Seeking 34	ate Senate.
	tribution, provide a description of the goods or serv	
	on on the line above for amount of contribution. If	
actual cost of the in-kind contribution enter an estimated value and the work 	In on the line above for amount of contribution. If rd "estimate." Made Keuria (Last Name) (First Name) (M	fiddle Name/Initial)
actual cost of the in-kind contribution enter an estimated value and the work 	In on the line above for amount of contribution. If rd "estimate." (Last Name) (First Name) (M	fiddle Name/Initial)
actual cost of the in-kind contribution enter an estimated value and the work Full name of candidate:	If "estimate."	Aiddle Name/Initial) That P Servet P. rices provided, and enter the
actual cost of the in-kind contribution enter an estimated value and the work Full name of candidate:A Amount of contribution \$OO^- If the contribution is an in-kind contribution enter an estimated value and the work Full name of candidate:B	In on the line above for amount of contribution. If rd "estimate." Made Kevin (Last Name) (First Name) (Mage) (Mage) (First Name) (Mage) (First Name) (Mage) (M	Aiddle Name/Initial)

(turn over to continue	→ )
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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)

 $\frac{1(23)202}{(\text{Date})}$ 

1. .

Jodi Grimbilas (Print Name of lobbyist)