(Print Name of lobbyist)

STATE OF NEW HAMPSHIRE

2019 Statement of Income and Expenses for LOBBYISTS

(RSA Chapter 15)

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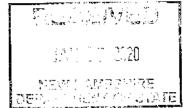
| I. Name of Lobbyist(s) | James Deme | NEW HAMPSHIRE DEPARTMENT OF STATE | | |
|---|--|---|--|--|
| II. Name of lobbyist's p Demers, Blaisdel | | | ıy: | |
| (Name | of partnership, firm of | corporation) | | |
| 72 North Main St | . Suite 301 | Concord | NH | 03301 |
| Business Address: (Street | et) | (Town/City) | (State) | (Zip Code) |
| (603) 228.1498 (Telephone) | (|)(Fax) | | nes. Demers@Demers-Blaisdell.com |
| reportable expense tra | nsactions which ar | e not attributable t | to any one client). | ou may file a separate report for e to the following client: |
| <u>OR</u> | ctions by the lobbyi | | obbyist Registration Form) Obyist's family), or the lo | bbying firm listed below which are |
| • | April 24, 2019 y from date of registra October 30, 2019 | ſ., | July 31, 2019 activity from 4/1/19 to 6 January 29, 202 activity from 10/1/19 to | 5/30/19 20 X |
| V. There have been If this box is checked, of Concord, NH 03301. VI. Check if additiona ✓ If you have receive ☐ If you have paid an Expense Reimbursemen | omplete just this form I reports are attacled fees or made expense in honorarium or reims | and no reportable in and submit it to the ned: nditures, you must to bursed expenses, you | e transactions made s he Secretary of State's O file Addendum A– Fees ou must file Addendum | ince the last report. ffice, State House, Room 204, |
| Sworn Statement/Affi I have read RSA 15, RS and complete to the bes | rmation by Lobbyi SA 15-B, RSA 14-C | st and RSA 664 and h and belief. | nereby swear or affirm th | at the foregoing information is true \[\frac{20/20}{(Date)} \] |

STATE OF NEW HAMPSHIRE



Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)



| r by | e of Lobbyist(s) James Demers & Thomas Prasol | | | |
|--|---|--|--|---|
| | | | <u> </u> | |
| | ne of lobbyist's partnership, firm or corporation, if any: | | | |
| Deli | ners, Blaisdell, & Prasol, Inc. (Name of partnership, firm or corporation) | | | |
| | | | - | 1/2 |
| III. Nar | ne of Client NH ATHLETIC TRAINERS ASSN | Date | | 1/29 |
| Indicate to lobby includin | s Received the gross amount of all fees received from the client identified above ring, including fees for services such as public advocacy, government g research, monitoring legislation, and related legal work. The groby any expenses: | relations. | or public rel | ations service |
| a) Total | of all fees received in this reporting period | a) \$ | <u>ø</u> | |
| | al of all fees received this calendar year, prior to this reporting period is should equal the total of all prior monthly reports for this calendar ye | b) \$ ar) | Ø | |
| | I of all fees received to date Add lines a and b) | c) \$ | ø | - · <u></u> |
| | cate the amount of any such fees that are due, but have not been paid | d) \$ | | |
| fees. Some lobbe Expense during the individual feet and items for the individual feet and purposeremon sestaurar | eparate reports are to be filed for expenditures made relative to each clayist(s)/firm that are unrelated to any one client a separate report means are to be reported in one of three categories of expenses: (a) the he reporting period for salaries, benefits, support staff, and office expenses where the expenditure was of \$25.00 or less (for example there the cost was \$25.00 or less, purchase of a pen with a value of less belied, purchase of a ceremonial object given to a person being lobbied emized statement of each individual expenditure made during this report one not covered by (a) (for example: purchase of a meal with value ial object to be given to the subject of lobbying with a value greater at expenses for a legislative reception). Expenses for honorariums, tions will be reported on separate addendums and should not be reported. | ient and ay be fil aggregate benses; (I emeals per than \$10 l with a viting period of great than \$25 expense | if expenditure ted for the lose total of all to the aggregation of that is given alue of \$25.0 and of greater than \$25,5, but not greater than \$25,5. | es are made by by by state total of a ring a busines to the perso of or less); and han \$25.00 for purchase of eater than \$50. |

a) Total aggregate expenses for this reporting period for salaries, benefits, a) \$ _____ support staff, and office expenses, related directly or indirectly to lobbying. b) Total aggregate of expenditures during this reporting period, not reported b) \$ _____ in a), of \$25 or less. c) Total of all itemized expenditures reported in detail in section VI. c) \$ _____

| d) Total expenses for this reporting period (Add lines a, b and c) | d) \$ |
|--|------------------------------------|
| e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report) | e) \$ |
| f) Total of all expenses year to date | f) \$ |
| VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from l period, including by whom paid or to whom charged. | obbying fees during this reporting |
| Paid to: | Amount: |
| | S |
| · · · · · · · · · · · · · · · · · · · | \$ |
| | \$ |
| | \$ |
| | \$ |
| | \$ |
| | - |
| Sworn Statement/Affirmation by Lobbyist | |
| I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affinistrue and complete to the best of my knowledge and belief. | m that the foregoing information |
| (Signature of lobby ist) (Signature of lobby ist) (Print Name of lobby ist) | 1/20/20 |
| (Signature of lobbyist) | (Date) |
| James M. Demen | |
| (Print Name of lobbyist) | |