

Joel Maiola (Print Name of lobbyist)

STATE OF NEW HAMPSHIRE 2020 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

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MAY 0 1 2020

NEW HAMPSHIRE DEPARTMENT OF STATE

Name of Labbuist				DEPARTME
TO STREET OF EGDDA (31)	(s) Joel Maiola			
I. Name of lobbyist	's partnership, tīrm or o	corporation, if any:		
		Public Strategies,	LLC	
(Na	me of partnership, firm or c	corporation)		
900 Elm Street	, P.O. Box 326	Manchester	NH	03105-0326
Business Address: (S	Street)	(Town/City)	(State)	(Zip Code)
(603) 628-1485	(603	625-5650	e-mail joel.ma	aiola@mclanegps.c
(Telephone)		(Fax)		
•	nsactions occurring in the	e months prior to the report Health Plans	rting date relative to t	he following client:
		it appears on the Lobbyist Re	egistration Form)	
<u>OR</u>				
🗋 All reportable tran	sactions by the lobbyist	(including the lobbyist's f	amily) or the lobbying	o firm listed below which
	icular client.			
unrelated to any parti	cular client. April 29, 2020 ivity from date of registration		July 29, 2020 y from 4/1/20 to 6/30/2	
unrelated to any parti V. Date of Report	April 29, 2020 🛚	on to 3/31/20 activit	July 29, 2020 by from 4/1/20 to 6/30/2 January 27, 2021	0
unrelated to any parti IV. Date of Report	April 29, 2020 🖪 ivity from date of registratio	on to 3/31/20 activit	July 29, 2020 Sy from 4/1/20 to 6/30/2	0
unrelated to any parti IV. Date of Report Reports cover: acti V. There have bee If this box is checked	April 29, 2020 April 29, 2020 Consistration October 28, 2020 Constitution activity from 7/1/20 to 9/3	on to 3/31/20 activit 80/20 activi d no reportable transa and submit it to the Secret	July 29, 2020	0 1/20 the last report.
unrelated to any parti IV. Date of Report Reports cover: acti V. There have bee If this box is checked, State House, Room 2	April 29, 2020 April 29, 2020 Consistration of the property of	on to 3/31/20 activit 80/20 active d no reportable transa and submit it to the Secret	July 29, 2020	0 1/20 the last report.
IV. Date of Report Reports cover: acti V. There have bee If this box is checked State House, Room 2 VI. Check if additio	April 29, 2020 April 29, 2020 Canivity from date of registration October 28, 2020 Canno fees received and complete just this form 604, Concord, NH 03301.	on to 3/31/20 activity 30/20 activity d no reportable transa and submit it to the Secret d: litures, you must file Addi	July 29, 2020 Ly from 4/1/20 to 6/30/2 January 27, 2021 Ly from 10/1/20 to 12/3 ctions made since ary of State's Office,	0 1/20 the last report. □ 107 North Main Street,
IV. Date of Report Reports cover: acti V. There have bee If this box is checked, State House, Room 2 VI. Check if additio If you have recei If you have paid Expense Reimbursen	April 29, 2020 April 29, 2020 April 29, 2020 Catober 28, 2020 Catober 29,	on to 3/31/20 activition of activition of activition of activities of ac	July 29, 2020 Ly from 4/1/20 to 6/30/2 January 27, 2021 Ly from 10/1/20 to 12/3 ctions made since ary of State's Office, endum A— Fees and Elle Addendum B— R	0 1/20 the last report. 107 North Main Street, Expenses eport of Honorariums or

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STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

II. Name of lobbyist's partnership, firm or corporation, if any: McLane Middleton Government & Public Strategies, LLC				
III. Name of Client Plans	Date			
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The groreduced by any expenses:	relations, or public relations service			
a) Total of all fees received in this reporting period	a) \$ _24,000.00			
Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year)	b) \$ ear)			
c) Total of all fees received to date (Add lines a and b)	c) \$24,000.00			
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$0			
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to repfees. Separate reports are to be filed for expenditures made relative to each of the lobbyist(s)/firm that are unrelated to any one client a separate report of Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office expenditure was of \$25.00 or less (for example lunch where the cost was \$25.00 or less, purchase of a pen with a value of lebeing lobbied, purchase of a ceremonial object given to a person being lobbied (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greate restaurant expenses for a legislative reception). Expenses for honorariums contributions will be reported on separate addendums and should not be reported.	client and if expenditures are made by may be filed for the lobbyist(s)/firm aggregate total of all expenses paid aggregate total of all expenses; (b) the aggregate total of all expenses; (b) the aggregate total of all expenses; (b) the aggregate total of all expenses total of all expenses total of the person of with a value of \$25.00 or less); an orting period of greater than \$25.00 for each of greater than \$25, purchase of er than \$25, but not greater than \$56, expense reimbursement, or political			
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$ _24,000.00			
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	h) \$			
c) Total of all itemized expenditures reported in detail in section VI.	c) \$			

d) Total expenses for this reporting period	d) \$ _24,000.00
(Add lines a, b and c)	
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) \$ _24,000.00
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from to period, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
	\$
	\$
	\$
	\$
	\$
	\$
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm is true and complete to the best of my knowledge and belief.	n that the foregoing information
/s/ Joel Maiola	4/29/2020
(Signature of lobbyist)	(Date)
Joel Maiola	
(Print Name of lobbyist)	

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