

(Print Name of lobbyist)

STATE OF NEW HAMPSHIRE 2023 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

RECEIVED

JAN 31 2024

NEW HAMPSHIRE DEPARTMENT OF STATE

PLEASE PRINT

I. Name of Lobbyist(s):				<u>- s</u>
II. Name of Lobbyist	's partnership, firm or corpo	ration, if any:		
	214 North Main Str	, CALLAHAN & GA eet, P.O. Box 1415, C	Concord, NH 03301	
603-228		603-228-8396	dietel@gcglaw.com	
(Teleph	one)	(Fax)	(Email)	
	overs: (Choose one – file sepa ansactions which are not attr		client, OR you may file a separate report for ient.)	r
☐ All reportable tra	ansactions occurring in the mor	nth prior to the reporting	ng date relative to the following client.	
	(Full Name of Client as it a	ppears on the Lobbyis	t Registration Form)	
OR All reportable tr unrelated to any partic		luding the lobbyist's fa	amily), or the lobbying firm listed below which	are
IV. Date of Report:	April 26, 2023 □		July 26, 2023 □	
Reports cover: ac	tivity from date of registration	to 3/31/23	activity from 4/1/23 to 6/30/23	
-	October 25, 2023		January 24, 2024 🗵	
	activity from 7/1/23 to 9/30/23		activity from 10/1/23 to12/31/23	
	o fees received and no report complete just this form and sub		de since the last report. Of State's Office, State House, Room 204,	
VI. Check if addition	nal reports are attached:			
☐ If you have receiv	ed fees or made expenditures,	you must file Addend	um A – Fees and Expenses	
☐ If you have paid a Expense Reimbursemer		penses, you must file	Addendum B – Report of Honorariums or	
If you, your firm,	or your family has made politic	cal contributions, you	nust file ${f Addendum}\ {f C}$ – Political Contribution	ıs
Sworn Statement/Affi I have read RSA 15, RS to the best of my know	SA 15-B and RSA 664 and here	eby swear or affirm the	at the foregoing information is true and complet	te
(Signature of Lobby)	Sates		//29/29 (Date)	
Robert J. Dietel, Presi	ol)		((Date)	
Modell J. Dielei, Pfesi	went			



STATE OF NEW HAMPSHIRE

Lobbyists Report of Political Contributions Addendum C

(RSA Chapter 15:6)

I. Name of Lobbyist(s)					
II. Name of lobbyist's partnership, firm or corporation, if any:					
		LAHAN & GARTRELL, P.	C		
III. Name of Client	(Name of partner	rship, firm or corporation) Date	31, බංඛ් January 2 5, 2023		
Political Contributions For each political contributi client/lobbyist and lobbying			paid on behalf of the		
Full name of candidate:	NH SENATE DE (Last Name)	MOCRATIC CAUCUS (First Name)	(Middle Name/Initial)		
Amount of Contribution \$ 250	,	, ,	(made name manu)		
-					
Full name of candidate:	FRIENDS OF HOW PEARL	VARD PEARL 2024 HOWARD			
	(Last Name)	(First Name)	(Middle Name/Initial)		
Amount of Contribution \$ _12	25.00 Office Candidate is	SeekingNH STATE !	SENATE		
If the contribution is an in-kind actual cost of the in-kind contrenter an estimated value and the	ibution on the line above	description of the goods or se for amount of contribution. I	rvices provided, and enter the f the actual cost is not known,		
Full name of candidate:	FRIENDS OF BEC	KY WHITLEY BECKY			
- an mante of candidate.	(Last Name)	(First Name)	(Middle Name/Initial)		
Amount of Contribution \$ 100	.00 Office Candidate is	Seeking <u>NH STATE S</u>	SENATE		
		(turn	over to continue →)		

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 ldbbyist) Robert J. Dietel, President (Print Name of Lobbyist)				

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STATE OF NEW HAMPSHIRE 2023 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

PLEASE PRINT

I. Name of Lobbyist(s):				
II. Name of Lobbyist's partnership, firm	n or corporation, if any:			
	LAGHER, CALLAHAN h Main Street. P.O. Box	N & GARTRELL, P.C. 1415, Concord, NH 03301		
603-228-1181	603-228-839		gcglaw.com	
(Telephone)	(Fax)	()	Email)	
III. This statement covers: (Choose one reportable expense transactions which a	— file separate reports for an attributable to an	or each client, OR you may file y one client.)	e a separate report for	
☐ All reportable transactions occurring	g in the month prior to the	reporting date relative to the fol	lowing client.	
(Full Name of C	lient as it appears on the I	obbyist Registration Form)		
OR All reportable transactions by the lo unrelated to any particular client.	bbyist (including the lobb	yist's family), or the lobbying fi	rm listed below which are	
IV. Date of Report: April 26, 202	3 □	July 26, 2023		
	registration to 3/31/23	activity from 4/1/23 to 6		
October 25, 2	_	્રે ા January 24 , 20		
activity from 7/1/23		activity from 10/1/23 to		
V. There have been no fees received and If this box is checked, complete just this for Concord, NH 03301.	-	-		
VI. Check if additional reports are atta	ched:			
☐ If you have received fees or made exp	enditures, you must file A	ddendum A - Fees and Expens	es	
☐ If you have paid an honorarium or rein Expense Reimbursement		•		
If you, your firm, or your family has n	nade political contribution	s, you must file Addendum C -	- Political Contributions	
Sworn Statement/Affirmation by Lobby: I have read RSA 15, RSA 15-B and RSA 6 to the best of my knowledge and belief. (Signature of Lobbyist)		firm that the foregoing informat	•	
Robert J. Dietel, President (Print Name of lobbyist)				



STATE OF NEW HAMPSHIRE

Lobbyists Report of Political Contributions Addendum C

(RSA Chapter 15:6)

I. Name of Lobbyist(s)	,						
II. Name of lobbyist's partnership, firm or corporation, if any:							
GALLAGHER, CALLAHAN & GARTRELL, P.C.							
III. Name of Client	(Name of partners	ship, firm or corporation)	ડી _, ઢ૦ <i>ૂપ</i> Date January 2 5, 2023				
Political Contributions For each political contributions client/lobbyist and lobbying	on that is reportable pur firm, indicate the follo	suant to RSA Chapter (wing:	664 paid on behalf of the				
T. 11	DENISE FOR SENA						
Full name of candidate:	RICCIARDI (Last Name)	DENISE (First Name)	(Middle Name/Initial)				
Amount of Contribution \$ 250	, ,	didate is SeekingN	,				
enter an estimated value and the	ABBAS FOR NEW	HAMPSHIRE DARYL					
	(Last Name)	(First Name)	(Middle Name/Initial)				
Amount of Contribution \$ _250	0.00 Office Cand	lidate is SeekingN	NH STATE SENATE				
If the contribution is an in-kind actual cost of the in-kind contrienter an estimated value and the	bution on the line above f	escription of the goods or or amount of contribution	services provided, and enter the 1. If the actual cost is not known,				
Full name of candidate:	(Last Name)	(First Name)	(Middle Name/Initial)				
Amount of Contribution \$	Office Candidate is S	leeking					

(turn over to continue →)

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 labbyist)

(Signature of labbyist)

Robert J. Dietel, President

(Print Name of Lobbyist)