STATE OF NEW HAMPSHIRE

2019 Statement of Income and Expenses for LOBBYISTS

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JUL 3 1 2019

NEW HAMPSHIRE DEPARTMENT OF STATE

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(RSA Chapter 15) PLEASE PRINT

I. Name of Lubbyis	st(s) Jopi	Grinbil	us j	Adam S	Schmidt
II. Name of lobbyis	st's partnership, firm	or corporation, if	any:		
	6 rim bitus	s Strates	Ju Sol	utions, LC	e.
ρ _α (Ν	lame of partnership, firm	or corporation)		-	<u>~~~~</u>
PO BOX	A33 Street)	North	wood	NH	03261
(103) 49 6 - 2 (Telephone))(Fax	x}	e-mail Jodi	Q jgstrutegreis
III. This statement reportable expense	covers: (Choose one - transactions which a	- file separate repo ce not attributable	erts for each to any one o	client, OR you may	y file a separate report for
☐ All reportable tra	ansactions occurring in	the months prior to	the reportin	g date relative to the	following client:
				amenca Iration Form)	
	(Full Name of Client	as it appears on the L	obbyist Regist	tration Form)	
<u>OR</u>		••	,	,,	
☐ All reportable tra unrelated to any part	nsactions by the lobbyi icular client.	st (including the lol	bbyist's fami	ly), or the lobbying	firm listed below which are
IV. Date of Report Reports cover: act	April 24, 2019 [] ivity from date of registro	tion to 3/31/19		y 31, 2019	
200	October 30, 2019			om 4/1/19 to 6/30/19 nuary 29, 2020 🗌	
	activity from 7/1/19 to	**		om 10/1/19 to 12/31/1	9
If this box is checked	en no fees received a l. complete just this fort 104, Concord, NH 0330	n and submit it to ti	e transactio he Secretary	ons made since the of State's Office, 10	e last report. U 7 North Main Street.
VI. Check if additio	nal reports are attach	ed.			
	ived fees or made expen		file Addendi	ım A– Fees and Exr	enses
☐ If you have paid Expense Reimbursen	an honorarium or reim	bursed expenses, yo	ou must file /	Addendum B~ Repo	ort of Honorariums or
		de political contrib	utions, you r	must file Addendum	C- Political Contributions
I have read RSA 15, and complete to the h	ffirmation by Lobbyis RSA 15-B, RSA 14-C; nest of my knowledge a st) Ambiles yist)	and RSA 664 and h nd belief.		or affirm that the for	egoing information is true
(Print Name of lobby	rinbules				

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STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A



(RSA Chapter 15:6)

1. Name of Lobbyist(s) Jooi Grimbilar	Adam Schmidt
II. Name of lobbyist's partnership, firm or corporation, if any:	
J-Grimbilus Strategic Solution	uns, LLC.
III. Name of Client Engie Worm America	Date 7/31/19.
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, governmen including research, monitoring legislation, and related legal work. The gr reduced by any expenses:	t relations, or public relations summing
a) Total of all fees received in this reporting period	a)s 19,100
b) 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) \$O
c) Total of all fees received to date (Add lines a and b)	c)s <u>19,100</u>
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$
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 exindividual expenses where the 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 lesseing 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.	right and if expenditures are made by may be filed for the lobbyist(s)/firm. aggregate total of all expenses paid apenses; (b) the aggregate total of all expenses; (b) the aggregate total of all expenses; (b) the aggregate total of all expenses; (b) that is given to the person d with a value of \$25.00 or less); and rting period of greater than \$25.00 for the of greater than \$25, purchase of a r than \$25, but not greater than \$50, 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) \$ _/9,10 0
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) \$
e) 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)s 19,100
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)	c) \$
f) Total of all expenses year to date	115 19,100
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from leperiod, including by whom paid or to whom charged.	
Paid to:	Amount:
	\$
	\$
	\$
	\$
	\$
	\$
	. 22 6
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.	that the foregoing information
(Signature of lobbyisi)	7/31/19
(Signature of lobbyist)	(Date)
Todi Grinbilus (Print Name of lobbyist)	
(rum rame of toppyist)	

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

(Print Name of lobbyist)

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for: Name of Lobbying partnership, firm, or corporation: Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any particular client): Date of Report (check one): I have read RSA 15, RSA 15-B, RSA 664, the Statement of Income and Expenses described above, and the following Addendums submitted with that Statement (insert the number of Addendum forms being submitted): Addendum A(s). Addendum B(s). Addendum C(s). I hereby swear or affirm that the foregoing information on the Statement and each Addendum is true and complete to the best of my knowledge and belief.