

PLEASE PRINT

STATE OF NEW HAMPSHIRE

2019 Statement of Income and Expenses for LOBBYISTS (RSA-Chapter 15)

RECEIVED

FEB 1 0 2020

NEW HAMPSHIRE DEPARTMENT OF STATE

I. Name of Lobi	bvist(s) Joe	l Maiola			
			corporation, if any		
		- '	•		
McLane Midd		rernment & I tnership, firm or c	Public Strated comporation)	gies, LLC	
	_	-	•		
900 Elm Str Business Address:		Box 326	Mancheste (Town/City)		03105-0326
Mainess Address.	(Silect)		(Town/City)	(State)	(Zip Code)
603) 628-14		(603) 625-5650	e-mail joel .r	maiola@mclanegps.com
(Teleph	one)		(Fax)		
III. This statem	ent covers: (C	Choose one – fil	le separate reports	for each client, OR you	may file a separate report fo
eportable expe	nse transacti	ons which are i	not attributable to	any one client).	
P All					
« An reportabl	e transactions	occurring in the	e months prior to the	e reporting date relative to	the following client:
SMG - SNHU	Arena			•	
	(Full N	ame of Client as i	t appears on the Lobb	yist Registration Form)	
<u>OR</u> .					
			including the lobby	ist's family), or the lobby	ing firm listed below which a
nrelated to any	particular cile	nt.			,
V. Date of Rep	ome Ammil	24 2010 🗆		L.L. 21 2010 🗆	
v. Date of Rep Reports cover:	ort April 24, 2019 activity from date of registration to:		on to 3/31/19	July 31, 2019 ☐ activity from 4/1/19 to 6/30/19	
	· -	per 30, 2019		January 29, 2020	
		rom 7/1/19 to 9/3	0/19	activity from 10/1/19 to 12/	
	. •				
	cked, complete			ansactions made since Secretary of State's Office	e the last report. 🕱 E. State House, Room 204,
/L. Check if add	litional renor	ts are attached	·		
	•			Addendum A- Fees and	Expenses
	oaid an honora	-	•		Report of Honorariums or
•		family has made	political contribution	ons, vou must file Adden	dum C- Political Contributio
ind complete to t	15, RSA 15-E the best of my	3, RSA 14-C and knowledge and			e foregoing information is tru
(Signature of lot	1/h	1		<u> 2/~/2</u>	<u> </u>
Signature of lob	obyist)			(1)	Date)
/ Joel Maiola					
(Print Name of I					