

STATE OF NEW HAMPSHIRE

2020 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

JAN **26** 2021

NEW HAMPSHIRE DEPARTMENT OF STATE

PLEASE PRINT

I. Name of Lob	byist(s) \(\sigma \text{OD} \cdot \(\left(\delta / \delta \text{OD} \cdot \cdot \left(\delta / \delt	inbilas,	Holamsc	hmidt	
II. Name of lob	byist's partnership, firm or	corporation, if any	:		
	Tooling	. 51	· C./ 4		
	J. Corimbilas (Name of partnership, firm or o	cornoration)	c JOIUTIONS	.	
1 0 . 4					
POBOX	133	Northwood	, NH	(Zip Co	
Business Address:	(Street)	(Town/City)	(State)	(Zip Co	ode)
(603) <u>496</u> (Teleph	- 26 38 ((Fax)	e-mail <u>\0</u>	di@jgstrat	egičs, con
III. This statem	ent covers: (Choose one – fi ense transactions which are	le separate reports	for each client, OR		
☐ All reportable	le transactions occurring in the		. •	_	at:
	(Full Name of Cilent as	afreld Pou	ver		
ΩĐ	(Full Name of Client as	it-dppears on the Lobb	yist Registration Form)		
	e transactions by the lobbyist particular client.	(including the lobby	ist's family), or the l	obbying firm listed belo	w which are
IV. Date of Rep	ort April 29, 2020 🗌		July 29, 2020	П	
Reports cover:	activity from date of registration	on to 3/31/20	activity from 4/1/20 to		
•	October 28, 2020		January 27, 20)21 🖫	
	activity from 7/1/20 to 9/3		activity from 10/1/20		
If this box is che	been no fees received and cked, complete just this form on 204, Concord, NH 03301.				
VI. Check if ad	ditional reports are attached	d:			
	received fees or made expend		Addendum A- Fee	s and Expenses	
☐ If you have Expense Reimbi	paid an honorarium or reimbu ursement	arsed expenses, you	must file Addendum	B- Report of Honorari	ums or
☐ If you, your	firm, or your family has mad	e political contributi	ons, you must file A	dendum C– Political C	Contributions
I have read RSA and complete to (Signature of lo	nt/Affirmation by Lobbyist 15, RSA 15-B, RSA 14-C and the best of my knowledge and bbyist) Combiler loss lobbyist)	d belief.	,	hat the foregoing inform 202 (Date)	nation is true

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: J. Grimb. las Strategic Sulting Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any Spring field Power particular client): Date of Report (check one): January 27, 2021 October 28, 2020 April 29, 2020 🗆 July 29, 2020 \Box 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.