PLEASE PRINT

STATE OF NEW HAMPSHIRE

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

RECEIVED

OCT 2 7 2020

NEW HAMPSHIRE

I. Name of Lobbyist(s) Jodi Grin	nbilus,	Adam	Schmidt	DEPARTMENT OF ST
II. Name of lobbyist's partnership, firm or con	rporation, if any:			,
J. Corinbilis	Strategic	Solur	·~s	
(Name of partnership, firm or corp	poration)			
POBON 233 Northwa	d, UH (3241		
Business Address: (Street)	(Town/City)		(State)	(Zip Code)
(603) 494-2438 ()_ (Telephone)	(Fax)	e-mai	jodioj	gstrategies, coin
III. This statement covers: (Choose one – file s reportable expense transactions which are not				le a separate report for
☐ All reportable transactions occurring in the m	•			llowing client:
(Fuli Nam of Client as it a	6 Powe	·	=	
(Full Name of Client as it as	ppears on the Lobby	ist Registration	Fоrm)	
All reportable transactions by the lobbyist (incurrelated to any particular client.	cluding the lobbyis	it's family), or	the lobbying fire	n listed below which are
IV. Date of Report April 29, 2020 Reports cover: activity from date of registration t	o 3/31/20 a	July 29, ctivity from 4/1	2020 🗍 1/20 to 6/30/20	
October 28, 2020 Activity from 7/1/20 to 9/30/2	20	•	27, 2021 🗌 V1/20 to 12/31/20	
V. There have been no fees received and n If this box is checked, complete just this form and State House, Room 204, Concord, NH 03301.				
M. Charles additional manager and attached.			1000	
VI. Check if additional reports are attached: If you have received fees or made expenditure	res, vou must file A	Addendum A-	– Fees and Exnen	ses
☐ If you have paid an honorarium or reimburse Expense Reimbursement				
If you, your firm, or your family has made po	olitical contribution	ns, you must f	ile Addendum C	- Political Contributions
Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15-B, RSA 14-C and R and complete to the best of my knowledge and be		y swear or aff	īrm that the foreg	oing information is true
(Signature of lobbyist)	_	10/0	26 /2020 · (Date)	
(Print Name of lobbyist)			(Daw)	

PLEASE PRINT

STATE OF NEW HAMPSHIRE



Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

RECEIVED

OCT 27 2020

NEW HAMPSHIRE DEPARTMENT OF STATE

	DEPARTMENT OF
1. Name of Lobbyist(s) Jodi Grimbilas, Adam Schi	midt
II. Name of lobbyist's partnership, firm or corporation, if any:	
J. Grimbilas Strategic Solutions (Name of partnership, firm or corporation)	
III. Name of Client Springfield Power.	Date/0/24/3000
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 services
a) Total of all fees received in this reporting period	a)\$_2375
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 ye	b) \$ <u>4150</u> ar)
c) Total of all fees received to date (Add lines a and b)	c)\$ 7125
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 repetes. 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 in 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 less being 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 greater restaurant expenses for a legislative reception). Expenses for honorariums, contributions will be reported on separate addendums and should not be reported.	lient and if expenditures are made by hay be filed for the lobbyist(s)/firm. aggregate total of all expenses paid penses; (b) the aggregate total of all exmeals purchased during a business s than \$10 that is given to the person d with a value of \$25.00 or less); and ting period of greater than \$25.00 for e of greater than \$25, purchase of a 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)\$_ 2 375
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) \$
c) 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)	q) \$
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) \$ 4750·
f) Total of all expenses year to date	118 7125
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from l 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.	m that the foregoing information
Sode Humb	$\frac{10/3\omega/3o3e}{\text{(Date)}}$
(Signature of lobbyist)	(Date)
(Print Name of lobbyist)	
(1 Int 1 mile of 1000 y ist)	

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.

RECEIVED

OCT 27 2020

NEW HAMPSHIRE DEPARTMENT OF STATE

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:

Name of Lobbying partnership, firm, or corporation: 5. Grimbiles Strategic Solutions, LLC
Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any
particular client): Springfield Vouse
Date of Report (check one):
April 29, 2020
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.
Signature of lob pyist) $\frac{10/26/2020}{\text{(Date)}}$
(Duto)
Adam 3. Schmidt
Print Name of Johnwist)