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STATE OF NEW HAMPSHIRE

2021 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

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OCT 25 2021

NEW HAMPSHIRE DEPARTMENT OF STATE

I. Name of Lobbyist(s)	mes Demers	, Thoma	s Prasol	, Nancy S	Stiles, Bet	te Lasky	/		:
II. Name of lobbyist's parti	nership, firm o	corporation	on, if any:						
Demers & Pras	ol, Inc								
··· (Name of pa	arthership, firm or	corporation)			-::	·: :			
72 North Main Stre	et Suite 301	Conc	ord.	1	NH		03301		:
Business Address: (Street)	111111	(Town/	City)		(State)		(Zip Code	<u></u>	:
(603) 228.1498) :		:: · · : e-n	_{nail} James	s.Deme	rs@Dem	ers-Prasc	l.com
(Telephone)			(Fax):				, ; ; ; ;		
III. This statement covers:	(Choose one –	ile separat	e reports f	or each clie	nt, OR you	may file a	separate r	eport for	
reportable expense transac	tions which are	not attribu	itable to a	ny one clie	nt).	• :			:::-::
	:; 					41 C. 11			:
All reportable transaction	is occurring in the	ne montus p	rior to the	reporting da	ite relative to	the follov	ving client:		:
	Name of Client as	s it appears o	n the Lobby	ist Registrati	on Form)		::	i	: .·:
<u>OR</u>									
All reportable transaction unrelated to any particular cl		t (including	the lobbyis	st's family),	or the lobby	ing firm li	sted below	which are	
,		1					··· ·		:
IV. Date of Report Apr	il 28, 2021 🔲			July 2	8, 2021 🗆				
	n date of registrat	ion to 3/31/2	1 a		4/1/21 to 6/30	21			• •
	ober 27, 2021 🎗		: :		y 26, 2022 [
activity	from 7/1/21 to 9	/30/21		activity from	10/1/21 to 12/	31/21			
V. There have been no fe	es received ar	1d no repo	rtable tra	ansactions	made sinc	e the last	report.		:::::::::::::::::::::::::::::::::::::::
If this box is checked, comple	ete just this form	and submit						et,	.:::::
State House, Room 204, Con	cord, NH 03301							· · · · · · · · · · · · · · · · · · ·	
VI. Check if additional rep	orts are attache	::. •d:	******					11111	: ;
If you have received fees			must file A	Addendum	A- Fees and	Expenses			:
☐ If you have paid an hono				. 1 . 1				s or	
Expense Reimbursement								: i.::i	
If you, your firm, or you	r family has mad	de political	contributio	ns, you mus	st file Adden	dum C- F	olitical Cor	tributions	:::-::
				:					
									:
Sworn Statement/Affirmati					or illian	6			
I have read RSA 15, RSA 15 and complete to the best of n			and hereb	y swear or	affirm that th	e foregoir	ig informati	on is true	:;
	vi				13	17 1			
(Signature of lobbyist)	zmei-	::: :::			10/2	Date)	<u>'::'</u>		
La Constitute of toobyist	Dema	M	: .:		, (I				:
James 1	yene	7 1	. :::::						
(Print Name of lobbyist)	****	*****	*****	****	****	*****	******	*****	.:

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STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

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NEW HAMPSHIRE DEPARTMENT OF STATE

I. Name of Lobbyist(s) James Demers, Thomas Prasol, Nancy	Stiles, Bette Lasky
II. Name of lobbyist's partnership, firm or corporation, if any: Demers & Prasol, Inc	·
(Name of partnership, firm or corporation)	
III. Name of Client MH WINE AND SPIRITS BROKERS ASS	N Date 16/21/21
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 service oss fee amount reported shall not b
a) Total of all fees received in this reporting period	a) \$
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 y	b) \$ 54,000.00
c) Total of all fees received to date (Add lines a and b)	a) \$ 54,000.00 car) \$ 54,000.00
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 expindividual 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.	client and if expenditures are made by may be filed for the lobbyist(s)/firm aggregate total of all expenses paid 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 ad with a value of \$25.00 or less); and orting period of greater than \$25.00 for the of greater than \$25, but not greater than \$50 or than \$25, but not greater than \$50 or the period of greater than \$50 or than \$25, but not greater tha
 a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying. b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less. 	a) \$ b) \$
c) Total of all itemized expenditures reported in detail in section VI.	c) \$

	Marion secretary	
CINVEN.	d) Total expenses for this reporting period (Add lines a, b and c)	d) \$
1368 61	(Add files a, o and c)	
ampshire Ent of Stat	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) \$
The Control of the Co	f) Total of all expenses year to date	f) \$
	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.	obbying fees during this reporting
	Paid to:	Amount:
		\$
	to dishift interest that is done they all which is	and the state of
	· · · · · · · · · · · · · · · · · · ·	\$
		\$
		\$
		\$
		-
	Swarn Statement/Affirm	
	Sworn Statement/Affirmation by Lobbyist	
	I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm	n that the foregoing information
	is true and complete to the best of my knowledge and belief.	<i>y y</i>
		1 1 . 1
	Jemen Jemen	10/L1/21
	Signature of Tobbyist W. Delmen	(Date)
	(Print Name of lobbyist)	