

STATE OF NEW HAMPSHIRE

2021 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15) JAN 26 2022

NEW HAMPSHIRE
DEPARTMENT OF STATE

PLEASE PRINT

I. Name of Lobbyist(s) Joh		DEPARTA SAT			
II. Name of lobbyist's partnership, firm or corporation, if any: The Professional Fire Fighters of New Hampshire					
(Name of parts	nership, firm or corporation)				
43 Centre St.	Concord,	NH	03301		
Business Address: (Street)	(Town/City)	(State)	(Zip Code)		
603, 223-3304	,603,223-3310	_{e-mail} john@p	offnh.org		
(Telephone)	(Fax)	C'illaii -			
	Choose one – file separate reports for eons which are not attributable to any c		y file a separate report for		
All reportable transactions	occurring in the months prior to the repo	rting date relative to the	e following client:		
The Professional F	Fire Fighters of New Ham	pshire			
The second secon	ame of Client as it appears on the Lobbyist R	•			
All reportable transactions by the lobbyist (including the lobbyist's family), or the lobbying firm listed below which are unrelated to any particular client.					
Reports cover: activity from a	er 27, 2021	July 28, 2021 ty from 4/1/21 to 6/30/21 January 26, 2022 ty from 10/1/21 to 12/31/2	21		
V. There have been no fees received and no reportable transactions made since the last report. If this box is checked, complete just this form and submit it to the Secretary of State's Office, 107 North Main Street, State House, Room 204, Concord, NH 03301.					
VI. Check if additional repor	ts are attached:				
If you have received fees or made expenditures, you must file Addendum A-Fees and Expenses					
If you have paid an honorarium or reimbursed expenses, you must file Addendum B - Report of Honorariums or Expense Reimbursement					
	amily has made political contributions, y	ou must file Addendur	n C- Political Contributions		
Sworn Statement/Affirmation I have read RSA 15, RSA 15-B and complete to the best of my	, RSA 14-C and RSA 664 and hereby sv	vear or affirm that the fo	pregoing information is true		
Um Mollinto		01/26/2022			
Jam M Wister (Signature of lobbyist)		(Date			
John McAllister		(=	,		
(Print Name of lobbyist)	1000				

P L E A S E P R I N T

STATE OF NEW HAMPSHIRE



Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

II. Name of lobbyist's partnership, firm or corporation, if any:	
The Professional Fire Fighters of New Hampshi	re
(Name of partnership, firm or corporation)	
III. Name of Client	Date
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 granduced by any expenses:	t relations, or public relations service
a) Total of all fees received in this reporting period	a) \$199.76
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	ь) \$ 925.15
Total of all free received to date	
c) Total of all fees received to date (Add lines a and b)	c) \$ 1,124.91
 d) Indicate the amount of any such fees that are due, but have not yet been paid 	d) \$ 0
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to refees. Separate reports are to be filed for expenditures made relative to each 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 examp lunch where the cost was \$25.00 or less, purchase of a pen with a value of lebeing lobbied, purchase of a ceremonial object given to a person being lobbie (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 be may be filed for the lobbyist(s)/firm e aggregate total of all expenses pai expenses; (b) the aggregate total of a le: meals purchased during a business than \$10 that is given to the person ed with a value of \$25.00 or less); an orting period of greater than \$25.00 for ue of greater than \$25, purchase of er 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) \$ 0
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	_{b)\$} 0
c) Total of all itemized expenditures reported in detail in section VI.	c) \$ O

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$ 0
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) \$ 0
f) Total of all expenses year to date	f) \$ 0
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
John McKleites	01/26/2022
(Signature of lobbyist)	(Date)
John McAllister	
(Print Name of lobbyist)	

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.

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

Name of Lobbying partnership, firm, or corporation:	he Professional Fire Fighters of New Hampshire
Name of Client (leave blank if Statement is for the par particular client):	
Date of Report (check one):	
April 28, 2021 Octobe	er 27, 2021 January 26, 2022 🗸
I have read RSA 15, RSA 15-B, RSA 664, the Statem the following Addendums submitted with that Statem submitted):	
✓ Addendum A(s).	
Addendum B(s).	
Addendum C(s).	
I hereby swear or affirm that the foregoing information complete to the best of my knowledge and belief.	on the Statement and each Addendum is true and
John McMister	01/26/2022
(Signature of lobbyist)	(Date)
John McAllister	
(Print Name of lobbyist)	