

STATE OF NEW HAMPSHIRE 2019 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

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JAN 29 2020

NEW HAMPSHIRE

PLEASE PRINT

I. Name of Lobbyist(s):

Paul A. Worsowicz (Print Name of lobbyist) Paul A. Worsowicz; Lisa K. Shapiro, Ph.D.; Ari B. Pollack

II. Name of Lobbyist's partnership, firm or corporation, if any: GALLAGHER, CALLAHAN & GARTRELL, P.C. 214 North Main Street, Concord, NH 03301 603-228-1181 603-226-3334 worsowicz@gcglaw.com (Telephone) (Fax) (Email) III. This statement covers: (Choose one - file separate reports for each client, OR you may file a separate report for reportable expense transactions which are not attributable to any one client.) All reportable transactions occurring in the month prior to the reporting date relative to the following client. DEMOULAS SUPER MARKETS, INC. (Full Name of Client as it appears on the Lobbyist Registration Form) OR All reportable transactions by the lobbyist (including the lobbyist's family), or the lobbying firm listed below which are unrelated to any particular client. IV. Date of Report: April 24, 2019 July 31, 2019 \Box activity from 4/1/19 to 6/30/19 activity from date of registration to 3/31/19 Reports cover: January 29, 2020 🔀 October 30, 2019 activity from 7/1/19 to 9/30/19 activity from 10/1/19 to 12/31/19 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, State House, Room 204, Concord, NH 03301. VI. Check if additional reports 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 If you, your firm, or your family has made political contributions, you must file Addendum C - Political Contributions Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm that the foregoing information is true and complete to the best of my knowledge and belief. (Signature of Lobbyist)

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STATE OF NEW HAMPSHIRE Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s)	Paul A. Worsowicz; Lisa K. Shapiro, Ph.D.;	Ari B. Poll	lack		
II. Name of lobbyist's pa	artnership, firm or corporation, if any:				
	GALLAGHER, CALLAHAN & GARTI	RELL, P.C.	_		
	(Name of partnership, firm or corpor				
III. Name of Client	DEMOULAS SUPER MARKETS, INC.		January 29,	y 29, 2020	
			_		
lobbying, including fees for	of all fees received from the client identified above for services such as public advocacy, government repring legislation, and related legal work. The gros	elations, or	public relation	s services,	
a) Total of all fees received in this reporting period			a) \$.00	
	ed this calendar year, prior to this reporting period total prior monthly reports for this calendar year.)		b) \$	150.00	
c) Total of all fees receive (Add lines a and b)	ed to date.		c) \$ 	150.00	
d) Indicate the amount of yet been paid.	any such fees that are due, but have not		d) \$.00	
fees. Separate reports are lobbyist(s)/firm that are u are to be reported in one reporting period for salar expenses where the expenthe cost was \$25.00 or lespurchase of a ceremonial statement of each individual covered by (a) (for examp given to the subject of legislative reception). Ex	rtnerships, firms, or corporations are required to e to be filed for expenditures made relative to each unrelated to any one client a separate report may be of three categories of expenses: (a) the aggreaties, benefits, support staff, and office expenses additure was of \$25.00 or less (for example: meals ass, purchase of a pen with a value of less than \$10 object given to a person being lobbied with a valual expenditure made during this reporting period to be purchase of a meal with value of greater than obbying with a value greater than \$25, but not go the properties of the properties of a meal with value of the properties of a meal with value of greater than suppenses for honorariums, expense reimbursement, and should not be reported on Addendum A.	telient and the filed for egate total of the age of that is given of \$25.0 of greater than or political	if expenditures the lobbyist(s), of all expenses agregate total of during a businent of the person of or less); and han \$25.00 for ase of a ceremo \$50, restaurant contributions	are made by the firm. Expenses paid during the of all individual tess lunch where n being lobbied, any purpose not onial object to be t expenses for a	
support staff, and office e	ses for this reporting period for salaries, benefits, xpenses, related directly or indirectly to lobbying.	a) : b) :		.00_	
b) Total aggregate of exp in a), of \$25 or less.	penditures during this reporting period, not reported		<u></u>	.00_	
c) Total of all itemized ex	xpenditures reported in detail in section VI.	c) :	D	.00	

Lobbyist Fees & Expenses, Addendum A – Page 2 Client: DEMOULAS SUPER MARKETS, INC.		
d) Total expenses for this reporting period.		
(Add lines a, b and c.)	d) \$.00
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.)	2 (a	150.00
(This should be the amount on line For addendant A for last month's report.)	c)	150.00
f) Total of all expenses year to date.	f) \$	150.00
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from lobbying for period, including by whom paid or to whom charged.	ees during this re	eporting
Paid to:	Amo	unt
	\$	
	<u>\$</u>	
	—— ¿ ——	
	š	
	<u>\$</u>	
Sworn Statement/Affirmation by Lobbyist		
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm that the is true and complete to the best of my knowledge and belief.	e foregoing info	ormation
Gaal Chorsony	1-27-2	- 6'
(Signature of lobbyist)	(Date)	
Paul A. Worsowicz		
(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

	ne and Expenses for:		
Name of Lobbying p	partnership, firm or corpor	ration: GALLAGHER, CA	LLAHAN & GARTRELL, P.C.
•	ve blank if Statement is fo Demoulas Super Mark	• • • •	orporation and not related to any
Date of Report (che	ck one):		
April 24, 2019 🗆	July 31, 2019 🗆	October 30, 2019 🗆	January 29, 2020 🔀
		Statement of Income and E tement (insert the number o	xpenses described above, and the f Addendum forms being
1 Addendum A(s	s).		
0 Addendum B(s	3).		
0 Addendum C(s	s).		
•	firm that the foregoing inf of my knowledge and bel		and each Addendum is true and
(Signature of Lobby	vist)		1-29-20 (Date)
Lisa K. Shapiro, Pl (Print Name of lob			

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 Lobbvist

Statement of Income and Expenses for:						
Name of Lobbying partnership, firm or corporation: GALLAGHER, CALLAHAN & GARTRELL, P.C.						
Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any particular client):						
Date of Report (check one):						
April 24, 2019 ☐ July 31, 2019 ☐ October 30, 2019 ☐ January 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):						
1 Addendum A(s).						
0 Addendum B(s).						
0 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 Lobbyist) (Date)						
Ari B. Pollack (Print Name of lobbyist)						