

#### STATE OF NEW HAMPSHIRE

2025 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

### RECEIVED

APR 30 2025

NEW HAMPSHIRE DEPARTMENT OF STATE

## PLEASE PRINT

The Drefessional Eiro Eigi	or corporation, if any:	nahira	
The Professional Fire Fig		psrine	
(Name of partnership, firm		NIL	02201
6 Loudon Rd Suite 506	Concord	NH	03301
Business Address: (Street)	(Town/City)	(State)	(Zip Code)
603-223-3304	(Fax)	e-mail Joini	pffnh.org
(Telephone)	(rax)		
II. This statement covers: (Choose one			file a separate rep
eportable expense transactions which a	re not attributable to any o	ne client).	
All reportable transactions occurring in	the months prior to the repo	rting date relative to the	following client:
The Professional Fire Figl			
	t as it appears on the Lobbyist R	-	
OR	as it appears on the Loody ist ic	egistration (offin)	
All reportable transactions by the lobby	ist (including the lobbyist's fa	amily), or the lobbying f	irm listed below whi
unrelated to any particular client.			
IV. Date of Report April 30, 2025		July 30, 2025	
Reports cover: activity from date of registrati		ty from 4/1/25 to 6/30/25	
October 29, 2025	The state of the s	anuary 28, 2026	
	20/25 activity	from 10/1/75 to 17/41/75	
activity from 7/1/25 to 9/.	30/25 activity	from 10/1/25 to 12/31/25	
			e last report.
V. There have been no fees received f this box is checked, complete just this for	and no reportable transa	ctions made since th	
V. There have been no fees received f this box is checked, complete just this for	and no reportable transa	ctions made since th	
V. There have been no fees received If this box is checked, complete just this for State House, Room 204, Concord, NH 033	and no reportable transarm and submit it to the Secret	ctions made since th	
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V. There have been no fees received of this box is checked, complete just this for State House, Room 204, Concord, NH 033  VI. Check if additional reports are attacked. If you have received fees or made expense Reimbursement. If you, your firm, or your family has no sworn Statement/Affirmation by Lobby have read RSA 15, RSA 15-B, RSA 14-C	and no reportable transarm and submit it to the Secret 01.  ched: enditures, you must file Addenbursed expenses, you must made political contributions, you fist and RSA 664 and hereby sy	ections made since the tary of State's Office, 10 endum A-Fees and Experience Addendum B-Reported must file Addendum	7 North Main Street,  penses ort of Honorariums of C-Political Contri
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#### STATE OF NEW HAMPSHIRE

#### Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s) Joh	n McAllister	
II. Name of lobbyist's parti	nership, firm or corporation, if any:	
The Professional F	Fire Fighters of New Hamp	shire
(Name of partne	ership, firm or corporation)	
III. Name of Client		Date 4/29/2025
to lobbying, including fees for	Il fees received from the client identified al services such as public advocacy, governing g legislation, and related legal work. Th	ment relations, or public relations services e gross fee amount reported shall not be
a) Total of all fees received in	this reporting period	a) \$ 614.28
	nis calendar year, prior to this reporting peri Il of all prior monthly reports for this calend	
c) Total of all fees received to (Add lines a and b)	o date	c) \$ 0
d) Indicate the amount of any yet been paid	such fees that are due, but have not	d) \$
fees. Separate reports are to the lobbyist(s)/firm that are un Expenses are to be reported in during the reporting period for individual expenses where the lunch where the cost was \$25.0 being lobbied, purchase of a confusion of the cost was the lunch where the cost was \$25.0 being lobbied, purchase of a confusion of the lunch where the cost was \$25.0 being lobbied, purchase of a confusion of the lunch where the cost was \$25.0 being lobbied, purchase of a confusion of the lunch where the cost was \$25.0 being lobbied, purchase of a confusion of the lunch where the lunch where the lunch where the lunch where the lunch was a lunch where the lunch where the lunch was a lunch where the lunch where	thips, firms, or corporations are required to be filed for expenditures made relative to enterelated to any one client a separate reput one of three categories of expenses: (as resalaries, benefits, support staff, and office expenditure was of \$25.00 or less (for expenditure was of a pen with a value of the eremonial object given to a person being lock individual expenditure made during this a) (for example: purchase of a meal with to the subject of lobbying with a value guild slative reception). Expenses for honorarion separate addendums and should not be resulted.	ach client and if expenditures are made by ort may be filed for the lobbyist(s)/firm the aggregate total of all expenses paid to expenses; (b) the aggregate total of all ample: meals purchased during a business of less than \$10 that is given to the persor obbied with a value of \$25.00 or less); and reporting period of greater than \$25.00 fo value of greater than \$25, purchase of a reater than \$25, but not greater than \$50 ums, expense reimbursement, or politica
support staff, and office expens	or this reporting period for salaries, benefits, ses, related directly or indirectly to lobbying	g. a) \$
b) Total aggregate of expendit in a), of \$25 or less.	ures during this reporting period, not repor	b) \$ 0
	litures reported in detail in section VI.	c) \$ 0

1.0 m 100.	4/29/2025
is true and complete to the best of my knowledge and belief.	
Sworn Statement/Affirmation by Lobbyist  I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affir	m that the foregoing information
	\$
	\$
	\$
	\$
	\$
	\$
Paid to:	Amount:
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from location, including by whom paid or to whom charged.	obbying fees during this reporting
f) Total of all expenses year to date	f) \$ 0
(This should be the amount on line f of addendum A for last month's report)	
e) Total of expenses paid this calendar year, prior to this reporting period	e) \$ <b>0</b>
(Add lines a, b and c)	

#### 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: T	he Professional Fire Fighters of New Hampshire
Name of Client (leave blank if Statement is for the part	nership, firm, or corporation and not related to any
particular client):	
Date of Report (check one):	
April 30, 2025 ☑ July 30, 2025 □ Octobe	er 29, 2025
I have read RSA 15, RSA 15-B, RSA 664, the Statem the following Addendums submitted with that Statem submitted):	the state of the s
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 Milliata	4/29/2025
(Signature of lobbyist)	(Date)
John McAllister	
(Print Name of lobbyist)	