

#### STATE OF NEW HAMPSHIRE

2024 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15) RECEIVED

OCT 29 2024

NEW HAMPSHIRE DEPARTMENT OF STATE

# PLEASE PRINT I. Name of Lobbyist(s) Jodi Grimbilas, Adam Schmidt

(Name of partnership, firm or corporation)				
O Box 233	Northwood	NH	03261	
usiness Address: (Street)	(Town/City)	(State)	(Zip Code)	
) 603-496-2638 (Telephone)	( )	_ <sub>e-mail</sub> jodi@jgst	rategies.com	
(Telephone)	( )			
portable expense transactions wh	one – file separate reports for eac ich are not attributable to any one ing in the months prior to the reporti	client).	- -	
(	arunite Leaf Canr	ubis		
	Tranite Leaf Canr client as it appears on the Lobbyist Regi	stration Form)		
<u>)R</u>				
All reportable transactions by the irelated to any particular client.	lobbyist (including the lobbyist's fan	nily), or the lobbying	firm listed below v	
mountain to any particular official				
V. Date of Report April 24, eports cover: activity from date of reg October 30, 2 activity from 7/1/24	istration to 3/31/24 activity 2024 🗹 Jan	July 31, 2024		
	ived and no reportable transact his form and submit it to the Secretar I 03301.			
L. Check if additional reports are	attached:			
-	e expenditures, you must file Adden	dum A- Fees and Ex	penses	
	r reimbursed expenses, you must file			
If you, your firm, or your family	nas made political contributions, you	must file <b>Addendun</b>	n C Political Con	
worn Statement/Affirmation by Landaue read RSA 15, RSA 15-B, RSA and complete to the best of my knowl	14-C and RSA 664 and hereby swea	er or affirm that the fo	regoing information	
Tali A	1	0/28/2024		
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odi Grimbilas		(=	,	
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### P E A S E P R N

## STATE OF NEW HAMPSHIRE

#### **Lobbyists Fees and Expenses** Addendum A

(RSA Chapter 15:6)

<ul><li>II. Name of lobbyist's partnership, firm or corporation, if any:</li><li>J. Grimbilas Strategic Solutions LLC</li></ul>	
(Name of partnership, firm or corporation)  III. Name of Client Canabis	Date 10/28/2024
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
a) Total of all fees received in this reporting period	a)\$_/4,000
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) \$ <u>/ 7, 50 0</u> ear)
c) Total of all fees received to date (Add lines a and b)	c)\$ <u>31.500</u>
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 reffees. 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 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 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 greate 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 is may be filed for the lobbyist(s)/firm e aggregate total of all expenses paxpenses; (b) the aggregate total of a le: meals purchased during a busine ss than \$10 that is given to the person during period of greater than \$25.00 for less); arorting period of greater than \$25.00 for less of greater than \$25, but not greater than \$5, expense reimbursement, or politic
<ul> <li>a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.</li> <li>b) Total aggregate of expenditures during this reporting period.</li> </ul>	a)\$ <u>14,000</u>
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) \$

c) \$ \_\_\_\_\_

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$ _14.000
	<u></u>
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)\$ <u> </u>
f) Total of all expenses year to date	f)\$ 31,500°
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:
	\$
	\$
	\$
	\$
	\$
	\$
	•
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.	n that the foregoing information
Some of	10/28/2024
(Signature of lobbyist)	(Date)
Jodi Grimbilas	

(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: 3. Grantega Statement LU Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any particular client): Grante Leaf (a number)
Date of Report (check one):
April 24, 2024
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 lobby(s))  (Date)  (Print Name of lobbyist)