

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

03301 (Zip Code)	NH			in firm			
	NH			р,	's partnersh	me of lobbyist's	l. Nai
	NH					nerstone	Cor
	NH	_	_	_	ime of partners		
(Zip Code)		Concord	403	, Suite			57
	(State)	(Town/City)			Street)		usines
	e-mail	(5.))_	(3-9500	(202)448)
		(Fax)				(Telephone)	
file a separate rep	each client, OR you may fil						
	one cheft).	attributable to a	ire not	willen a	LHUSHCHOUS	table expense tr	eport -
ollowing client:	porting date relative to the fol	onths prior to the	n the m	curring in	nsactions occ	Il reportable trans	All
•	PLI Hammarin	2000	Dan		1.0	Manney in	- (
	Registration Form	ppears on the Lobby	Las it a	of Client	(Edll Name	CHIMINI	70
	· · · · · · · · · · · · · · · · · · ·	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			2.4		OR
m listed below wh	s family), or the lobbying firm	luding the lobbyis	ist (inc	he lobbyi	sactions by tl	reportable transa	All
					icular client.	ated to any partic	inrela
						. en	
	July 30, 2025 ivity from 4/1/25 to 6/30/25	/31/25 a		30, 2025 registratio		ate of Report is cover: activity j	
	January 28, 2026	- 1.02		_	October 2		
	ty from 10/1/25 to 12/31/25	act			ctivity from 7/1	acti	
	sactions made since the la retary of State's Office, 107 N		rm and	st this for	, complete jus		this l
			hed:	are attac	nal renorts a	beck if addition	1. Cb
enses	Idendum A- Fees and Expen	es, you must file					-
	st file Addendum B- Report						∠lfy
Con incline and an incline						'you have paid a	
	, you must file Addendum C					se Reimburseme	lf y
North M	retary of State's Office, 107 N	submit it to the So	rm and 01. ched: enditu	st this for NH 0336 are attac nade expe	, complete jus 04, Concord, nal reports a ved fees or m	box is checked, of House, Room 204 heck if additionary you have received	this late h

PLEASE PRINT

STATE OF NEW HAMPSHIRE



Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s) Marc Goldberg, Kirsten Koch, Mike V	/lacich, Maura Weston
II. Name of lobbyist's partnership, firm or corporation, if any: Cornerstone Government Affairs	
(Name of partnership, firm or corporation)	
III. Name of Client Community Power Coultin of NH	Date 4/30/2025
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 gro reduced by any expenses:	relations, or public relations services
a) Total of all fees received in this reporting period	a) \$ <u>21,000.00</u>
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 ye	b) \$ 0.00
c) Total of all fees received to date (Add lines a and b)	0)\$ 21,000.00
d) Indicate the amount of any such fees that are due, but have not yet been paid	c) \$ <u>21,000.00</u> d) \$ <u>0.00</u>
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to reperfees. 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 metapenses 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 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.	lient and if expenditures are made by hay be filed for the lobbyist(s)/firm. aggregate total of all expenses paid penses; (b) the aggregate total of all e: meals purchased during a business s than \$10 that is given to the person d with a value of \$25.00 or less); and tring period of greater than \$25.00 for e of greater than \$25, purchase of a r than \$25, but not greater than \$50, expense reimbursement, or political and on Addendum A.
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$ 0.00
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) \$ 0.00 c) \$ 0.00
c) Total of all itemized expenditures reported in detail in section VI.	c) \$ 0.00

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) f) Total of all expenses year to date VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from lobbying fees during this reporting period, including by whom paid or to whom charged. Paid to: Amount: \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	d) Total expenses for this reporting period (Add lines a, b and c)	d) \$ 0.00
V1. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from lobbying fees during this reporting period, including by whom paid or to whom charged. Paid to: S S S S S S S S S S S S S S S S S S		
Provide the following detail for all expenditures of more than \$25 made from lobbying fees during this reporting period, including by whom paid or to whom charged. Paid to: Amount: \$	f) Total of all expenses year to date	f) \$ 0.00
\$	Provide the following detail for all expenditures of more than \$25 made from lo	obbying fees during this reporting
	Paid to:	Amount:
		\$
		\$
		\$
		\$
•		\$
		\$
Sworn Statement/Affirmation by Lobbyist	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.		n that the foregoing information
Signature of lobbyist) 4/30/2025 (Date)	Mattolle (Signature of Johnson)	4/30/2025
Viral on Varia		(Duit)
(Print Name of lobbyist)	(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: Cornerstone Government Affairs
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 30, 2025 ☑ July 30, 2025 □ October 29, 2025 □ January 28, 2026 □
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). X
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 lobbyist) 4/30/95 (Date)
mara pr bush
(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: Cornerstone Government Affairs
Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to as
Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to an particular client): Comm, Pow Cog hur & M //
Date of Report (check one):
April 30, 2025 🗹 July 30, 2025 🗆 October 29, 2025 🗀 January 28, 2026 🗀
I have read RSA 15, RSA 15-B, RSA 664, the Statement of Income and Expenses described above, ar the following Addendums submitted with that Statement (insert the number of Addendum forms beir submitted):
Addendum A(s). X
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 lobbyist)
Signature of lobbyist) (Date)
Michel Vluian
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: Cornerstone Government Affairs
Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to an particular client):
Date of Report (check one):
April 30, 2025 🗹 July 30, 2025 🗆 October 29, 2025 🗀 January 28, 2026 🗆
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). X
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 lobbyist) (Date)
Marc Lolcher (Print Name of lobbyist)