

STATE OF NEW HAMPSHIRE 2025 Statement of Income and

Expenses for LOBBYISTS (RSA Chapter 15)

RECEIVED

APR 29 2025

NEW HAMPSHIRE DEPARTMENT OF STATE

PLEASE PRINT I. Name of Lobbyist(s) Jim Demers, Tom Prasol, Shaun Thomas, Jonathan Mc אס צייאט

	(Na	ame of partne	ership, firm o	r corporatio	on)			::		:
72		North M	1ain St.	St Co	ncord	11. ::	NH		0330-	.: -::
usine	ss Address: (S	Street)		(Tow	n/City)		(State)		(Zip Code)	
1	603.228	1498		Y:		e-	_{mail} jame	es.dem	ers@de	MERL
	(Telephone)				(Fax)	· · · · · · · · · · · · · · · · · · ·	::.	÷: ::.	:::	
1. TH	nis statement	rovers• (C)	nose one –	file senar	ata ranarte (for each cli	iont OD voi	ı may fila (:
	able expense							i may me a	i separate re	port 10
1 ^{: ; ;}			::. ::.	:	: ::. ::	· · · · ·		<u>:</u> ::-		
Al	l reportable tra	nsactions o	ccurring in	the months	s prior to the	reporting d	late relative	to the follow	wing client:	
::-:							1.1			
-		(Full Nar	ne of Client a	as it appears	on the Lobby	ist Registrat	ion Form)	-	:: : :::	· .
R						· i - i · · · ·				
All	reportable tran	sactions by	the lobbyis	t (includin	g the lobbyis	t's family),	or the lobby	ing firm li	sted below wi	hich a
rela	ited to any part	icular clien	t. :[::::]:		:			T .::.		
				√ √1				-		·
	te of Report		1 30, 2025				30, 2025			.::!
ports	cover: activity	from date o		<u>n to</u> 3/31/25	; a	ctivity from	4/1/25 to 6/3	9/25	.:	٠.
	1									
			29, 2025	9/25			28, 2026	1/25		:
	· · · · · · · · · · · · · · · · · · ·		29, 2025 7/1/25 to 9/30	0/25	act		28, 2026 L 0/1/25 to 12/3	1/25		
Th		ctivity from ?	7/1/25 to 9/30	mi - ::		ivity from 10	0/1/25 to 12/3		report.	
Th his l	ere have bee	n no fees	7/1/25 to 9/30 received a	nd no rej	ortable tra	ivity from 10 ansactions	0/1/25 to 12/3 s made sine	ce the last	report.	et,
his l		n no fees complete j	7/1/25 to 9/36 received a ust this form	nd no rep n and subn	ortable tra	ivity from 10 ansactions	0/1/25 to 12/3 s made sine	ce the last	report. th Main Stree	et,
his l te H	ere have bee box is checked Jouse, Room 2	n no fees , complete j ,04, Concord	7/1/25 to 9/30 received a ust this form d, NH 0330	nd no rep n and subn 1.	ortable tra	ivity from 10 ansactions	0/1/25 to 12/3 s made sine	ce the last	report. [th Main Stree	et;
his l ite H	ere have bee box is checked Iouse, Room 2 leck if additio	n no fees i , complete j ,04, Concord	received a ust this form d, NH 0330	nd no rep n and subn l.	portable transit it to the S	ivity from It ansactions ecretary of	0/1/25 to 12/3 s made sind State's Office	ce the last e, 107 Nor	th Main Stree	et,
his lite H	ere have bee box is checked louse, Room 2 leck if additio you have recei	n no fees complete j 04, Concord nal reports ved fees or	received a ust this form d, NH 0330 are attach made expen	nd no rep n and subn l. ed: nditures, yo	oortable transit it to the S	ivity from 10 ansactions ecretary of Addendum	N/1/25 to 12/3 s made since State's Office A – Fees an	ce the last ee, 107 Nor	th Main Stree	
his lete H	ere have bee box is checked louse, Room 2 leck if additio you have recei you have paid	on no fees on no fees on no fees of complete justing the concording the contract of the contra	received a ust this form d, NH 0330 are attach made expen	nd no rep n and subn l. ed: nditures, yo	oortable transit it to the S	ivity from 10 ansactions ecretary of Addendum	N/1/25 to 12/3 s made since State's Office A – Fees an	ce the last ee, 107 Nor	th Main Stree	
chis lete H	ere have bee box is checked louse, Room 2 leck if additio you have recei you have paid se Reimbursen	n no fees complete j 04, Concord nal reports ved fees or an honorari	received a ust this form d, NH 0330 are attach made experium or reimi	nd no report and submark. led: aditures, your bursed exp	portable transit it to the Sou must file enses, you n	ansactions ecretary of Addendum nust file Ad	N/1/25 to 12/3 s made since State's Office A – Fees and Idendum B –	ce the last ee, 107 Nor d Expenses Report of	th Main Stree	or
chis lite H	ere have bee box is checked louse, Room 2 leck if additio you have recei you have paid	n no fees complete j 04, Concord nal reports ved fees or an honorari	received a ust this form d, NH 0330 are attach made experium or reimi	nd no report and submark. led: aditures, your bursed exp	portable transit it to the Sou must file enses, you n	ansactions ecretary of Addendum nust file Ad	N/1/25 to 12/3 s made since State's Office A – Fees and Idendum B –	ce the last ee, 107 Nor d Expenses Report of	th Main Stree	or
Ch If	ere have bee box is checked louse, Room 2 leck if additio you have recei you have paid se Reimbursen	n no fees complete j 04, Concord nal reports ved fees or an honorari	received a ust this form d, NH 0330 are attach made experium or reimi	nd no report and submark. led: aditures, your bursed exp	portable transit it to the Sou must file enses, you n	ansactions ecretary of Addendum nust file Ad	N/1/25 to 12/3 s made since State's Office A – Fees and Idendum B –	ce the last ee, 107 Nor d Expenses Report of	th Main Stree	or
Ch If If If	ere have bee box is checked louse, Room 2 leck if additio you have recei you have paid se Reimbursen you, your firm	en no fees of a complete j 04, Concord nal reports ved fees or an honorari nent, or your fai	received a ust this form d, NH 0330 are attach made experium or reiminally has ma	nd no report and submariation in the submariat	portable transit it to the Sou must file enses, you n	ansactions ecretary of Addendum nust file Ad	N/1/25 to 12/3 s made since State's Office A – Fees and Idendum B –	ce the last ee, 107 Nor d Expenses Report of	th Main Stree	or
his lete H Ch If If If pens	ere have been box is checked louse, Room 2 leck if addition you have receive you have paid se Reimbursem you, your firm	n no fees on no fees on no fees of the complete of the concordinal reports on the concordination or your fair firmation	received a ust this form d, NH 0330 are attach made experium or reiminally has maby Lobbyis	nd no report and submark. ed: additures, you bursed expande political	portable transit it to the Sou must file denses, you not contribution	ansactions ecretary of Addendum nust file Ad ns, you mu	o/1/25 to 12/3 s made sind State's Office A – Fees and Idendum B – st file Adde	ce the last e, 107 Nor d Expenses Report of ndum C- I	th Main Street Honorariums Political Cont	or
Charles I If I	ere have bee box is checked louse, Room 2 leck if additio you have recei you have paid se Reimbursen you, your firm	on no fees in complete j 04, Concord nal reports ved fees or an honorariment, or your fairmation RSA 15-B,	received a ust this form d, NH 0330 are attach made experium or reiminally has maby Lobbyis RSA 14-C.	nd no reparation in and submark. ed: additures, you bursed expande political and RSA 6	oortable transit it to the Sou must file denses, you must contribution	ansactions ecretary of Addendum nust file Ad ns, you mu	o/1/25 to 12/3 s made sind State's Office A – Fees and Idendum B – st file Adde	ce the last e, 107 Nor d Expenses Report of ndum C- I	th Main Street Honorariums Political Cont	or
Ch If If If If	ere have bee box is checked louse, Room 2 leck if additio you have recei you have paid se Reimbursen you, your firm Statement/A read RSA 15,	on no fees in complete j 04, Concord nal reports ved fees or an honorariment, or your fairmation RSA 15-B,	received a ust this form d, NH 0330 are attach made experium or reiminally has maby Lobbyis RSA 14-C.	nd no reparation in and submark. ed: additures, you bursed expande political and RSA 6	oortable transit it to the Sou must file denses, you must contribution	ansactions ecretary of Addendum nust file Ad ns, you mu	o/1/25 to 12/3 s made sind State's Office A – Fees and Idendum B – st file Adde	ce the last e, 107 Nor d Expenses Report of ndum C- I	th Main Street Honorariums Political Cont	or
Charte Harte	ere have bee box is checked louse, Room 2 leck if additio you have recei you have paid se Reimbursen you, your firm Statement/A read RSA 15,	on no fees in complete j 04, Concord nal reports ved fees or an honorariment, or your fairmation RSA 15-B,	received a ust this form d, NH 0330 are attach made experium or reiminally has maby Lobbyis RSA 14-C.	nd no reparation in and submark. ed: additures, you bursed expande political and RSA 6	oortable transit it to the Sou must file denses, you must contribution	ansactions ecretary of Addendum nust file Ad ns, you mu	o/1/25 to 12/3 s made sind State's Office A – Fees and Idendum B – st file Adde	ce the last e, 107 Nor d Expenses Report of ndum C- I	th Main Street Honorariums Political Cont	or

PLEASE PRINT

STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

RECEIVED

APR 29 2025

NEW HAMPSHIRE DEPARTMENT OF STATE

I. Name of Lobbyist(s)	DETARTIMENT OF S					
II. Name of lobbyist's partnership, firm or corporation, if any:						
Demens, Prasol + Thomas tu (Name of partnership, firm or corporation)	l.					
(Name of partnership, firm or corporation)	1					
III. Name of Client	Date 4/27/25					
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 grareduced by any expenses:	relations, or public relations services					
a) Total of all fees received in this reporting period	a) \$					
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 year).	b) \$ ear)					
c) Total of all fees received to date (Add lines a and b)	c) \$					
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 repfees. 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 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 example lunch where the cost was \$25.00 or less, purchase of a pen with a value of lest 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 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 by may be filed for the lobbyist(s)/firm. e aggregate total of all expenses paid expenses; (b) the aggregate total of all le: meals purchased during a business st than \$10 that is given to the person ed with a value of \$25.00 or less); and orting period of greater than \$25.00 for the of greater than \$25, purchase of a per 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.b) Total aggregate of expenditures during this reporting period, not reported	a)\$ 308,351.76					
in a), of \$25 or less.	b) \$					
c) Total of all itemized expenditures reported in detail in section VI.	c)\$					

d) Total expenses for this reporting period (Add lines a, b and c)	d)\$ 308, 351.76
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) \$
f)' Total of all expenses year to date	ns 308,351.76
Provide the following detail for all expenditures of more than \$25 made from period, including by whom paid or to whom charged.	,
Paid to:	Amount:
	\$
	\$
	\$
	\$
	\$
	\$
Swam Statement/Affirm ation by Labbuilt	
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
(Signature of lobbyist). Cured M. Demens (Print Name of lobbyist)	4/27/25
(Signature of lobbyist)	(Date)
(Print Name of lobbyist)	
(The County of 1000) list)	

LEASE PRIN

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: Demers, Prasol & Thomas, Inc	
(Name of partnership, firm or corporation)	
III. Name of Client AIR BAB INC	Date 4/27/25
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 greduced by any expenses:	re that are related, directly or indirectly
a) Total of all fees received in this reporting period	a) \$ 8000 - TV b) \$ 8
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 year)	b) \$
c) Total of all fees received to date (Add lines a and b)	c) 8 8 60 0 - 170
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 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. 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 condividual 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 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.	client and if expenditures are made by may be filed for the lobbyist(s)/firm e aggregate total of all expenses paid xpenses; (b) the aggregate total of all le: meals purchased during a business ses than \$10 that is given to the person ed with a value of \$25.00 or less); and orting period of greater than \$25.00 for ue of greater than \$25, but not greater than \$50,
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) S
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) S
c) Total of all itemized expenditures reported in detail in motion XV	

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$
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) \$
f) Total of all expenses year to date	f) \$
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from period, including by whom paid or to whom charged.	lobbying fees during this reporting
Paid to:	Amount:
	\$
	\$
	\$
	\$
	S
	\$
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affin	rm that the foregoing information
is true and complete to the best of my knowledge and belief.	4/27/25
(Signature of lobbyist) Cures M. Demen	(Date)
(Print Name of lobbyist)	
(1 THE TABLE OF TODOYEST)	



STATE OF NEW HAMPSHIRE

Lobbyists Report of
Political Contributions
Addendum C
(RSA Chapter 15:6)

RECEIVED

APR 29 2025

NEW HAMPSHIRE DEPARTMENT OF STATE

II. Name of	lobbyist's	partner	ship, fir	m or coi	poratio	n, if any					
Demers,	Prasol &	Thoma	s Inc	: :: : :-			- : :			:::	i'
Domoio,		f partnershi		rporation)	<u> </u>		<u> </u>			**:	: : : :
	: ':::::.										::
III. Name of	Client	<u> </u>						Date	:		••
Political Co	ontributio	ns ,		.i 			organia Palia	**************************************		111.1	· · · ·
For each po							Chapter	664 paid	on beh	alf of the	e
client/lobby	ist and lob	bying fir	m, indica	ite the fo	ollowing:					;;, ;;,	: . - :
								· · · · · · · · · · · · · · · · · · ·	, , ,		. :
					1	$\mathcal{T}{\mathbb{H}^{n}}$) :::::: -	-	::::		1.
Full name o	of candidate	•	<u> </u>	Se S	0	Hae	hnei	₩	:		:
i ili ilanio d		: ::	(Last Na	me)	(Fi	rst Name)		(Middl	e Name/Ir	nitial)	.: .
Amount of c	detelli	1.111111 pr. 1111		11111)ffice Cor	didata id	Caalsina Caalsina		7777		:: :.·
Amount of C	ominoution :	D: <u>:</u>	<u> </u>		ince Car	ididate is	Seeking _	<u> </u>			:
enter an estir	nated value	and the w	ord "estir		ve for am	11111		: :			:
enter an estir	nated value	and the w	ord "estir								
enter an estir	nated value	and the w	ord "estir								
enter an estir	nated value	and the w	ord "estir								
enter an estir	nated value	and the w	ord "estîr								
enter an estir				nate."							
			ord "estir	nate."		rst Name)		(Middl	e Name/Ir	iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii	
	of candidate			nate."	(Fi		is Seekin		e Name/Ir	initial)	
Full name o	of candidate		(Last Na	mate."	(Fi	rst Name) Candidate		g:::::::::::::::::::::::::::::::::::::			
Full name o	of candidate	e:	(Last Na	me)	(Fi Office C	rst Name) Candidate	e goods o	r services	provideo	l, and en	
Full name of Amount of collisions of the contributions of the contributi	of candidate ontribution so oution is an i	: n-kind co contribut	(Last Na	me) , provide	(Fi Office C	rst Name) Candidate	e goods o	r services	provideo	l, and en	
Full name of Amount of collisions of the contributions of the contributi	of candidate ontribution s oution is an i	: n-kind co contribut	(Last Na	me) , provide	(Fi Office C	rst Name) Candidate	e goods o	r services	provideo	l, and en	
Full name of Amount of collisions of the contributions of the contributi	of candidate ontribution s oution is an i	: n-kind co contribut	(Last Na	me) , provide	(Fi Office C a descrip ve for am	rst Name) Candidate tion of the	e goods o	r services	provideo	l, and en	
Full name o	of candidate ontribution s oution is an i	: n-kind co contribut	(Last Na	me) , provide	(Fi Office C	rst Name) Candidate tion of the	e goods o	r services	provideo	l, and en	
Full name of Amount of collif the contributions actual cost of	of candidate ontribution s oution is an i	: n-kind co contribut	(Last Na	me) , provide	(Fi Office C a descrip ve for am	rst Name) Candidate tion of the	e goods o	r services	provideo	l, and en	
Full name of Amount of collif the contributions actual cost of	of candidate ontribution s oution is an i	: n-kind co contribut	(Last Na	me) , provide	(Fi Office C a descrip ve for am	rst Name) Candidate tion of the	e goods o	r services	provideo	l, and en	
Full name of the contribution actual cost of enter an estir	ontribution soution is an if the in-kind nated value	s: n-kind co contribut and the w	(Last Na	me) , provide	(Fi Office C a descrip ve for am	rst Name) Candidate tion of the	e goods o	r services	provideo	l, and en	
Full name of Amount of collif the contributions of	ontribution soution is an if the in-kind nated value	s: n-kind co contribut and the w	(Last Na	me) , provide c line abo	(Fi Office C a descrip ve for am	rst Name) Candidate tion of the	e goods o	r services n. If the a	provideo	l, and en	

If the contribution is an in-kind contribution, provi						
actual cost of the in-kind contribution on the line a	bove for	amount of co	ntribution.	If the actual	cost is no	known,
enter an estimated value and the word "estimate."	1 .	· · · .		11.1.		

(If more than three contributions were made, report additional contributions on separate addendum C forms.)

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)

(Print Name of lobbyist)

DEMERS, PRASOL & THOMAS INC. Transaction Detail by Account

January through March 2025

Date	Name	Original Amount					
Political Contribution							
01/08/25	NH Senate Republicans PAC	500.00					
01/15/25	NH House Democratic Victory Co	500.00					
01/22/25	NH Senate Democratic Caucus	500.00					
02/01/25	Friends of Donovan Fenton	250.00					
02/05/25	Perkins Kwoka for New Hampshire	500.00					
02/06/25	Friends of Tim McGough	500.00					
02/06/25	Friends of Cindy Rosenwald	500.00					
02/06/25	Abbas for NH	250.00					
02/06/25	Debra Altschiller for NH	250.00					
02/18/25	Friends of Janet Stevens	300.00					
03/04/25	Kelly for NH	2,500.00					
03/05/25	Friends of Sue Prentiss for NH Se	250.00					
03/06/25	Vote Tim Lang	250.00					
03/06/25	Keith Murphy 4 NH	250.00					
03/06/25	Denise for Senate	250.00					
03/06/25	Friends of Howard Pearl	250.00					
03/06/25	McConkey for NH	250.00					
03/06/25	David Rochefort For NH	250.00					
03/06/25	Ruth Ward for Senate	250.00					
03/06/25	Kevin Avard for Senate	250.00					
03/06/25	Friends of Dan Innis	250.00					
03/06/25	Gray 4 NH Senate	250.00					
03/06/25	Friends of Victoria Sullivan	250.00					
03/06/25	Gannon for State Senate	250.00					
03/06/25	Friends of Tara Reardon	250.00					
03/06/25	Committee to Elect David Watters	250.00					
03/06/25	Long for NH Senate	250.00					
03/11/25	Friends of Regina Birdsell	500.00					
03/11/25	Kenney for Executive Council	300.00					
03/11/25	Friends of Sharon Carson	500.00					
03/12/25	Committee to elect House Republ	500.00					
03/18/25	NH Democratic Party	2,500.00					
03/26/25	Friends of John Stephen	300.00					

Total Political Contribution

TOTAL