

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

l Name of	lobbuiste po-ta-catia	6.m	monation if		3%
	lobbyist's partnership,				
Jorner	stone Governm				
E 7	(Name of partnership			NILI	02201
57	N. Main St., S	uite 403		NH	03301
usiness Add			(Town/City)	(State)	(Zip Code)
<i>,</i>	02)448-9500	_ ()_	(Fax)	e-mail	
(16	elephone)		(rax)		
				each client, OR you may	file a separate re
portable o	expense transactions wh	ich are no	t attributable to any	one client).	
All reno	rtable transactions occur	ing in the r	nonths prior to the rei	porting date relative to the	following client:
] All Tepos	A 1-C-A	ing in the i	nontris prior to the rep	porting date relative to the	iono wing onom.
	NEUTA				
)D	(Full Name of	Client as it a	ppears on the Lobbyist	Registration Form)	
OR	table tennesations by the	abbuiet (in	oluding the Johnwist's	family), or the lobbying f	irm listed below w
	any particular client.	oooyisi (iii	cidding the loodyist's	rainity), of the loooying i	iiiii iisted below w
V. Date of	Report April 30,	2025 🗸		July 30, 2025	
eports cover	r: activity from date of reg		1/31/25 acti	vity from 4/1/25 to 6/30/25	
	October 29, 2			January 28, 2026	
	activity from 7/1/25	10 9/30/23	аспуц	ty from 10/1/25 to 12/31/25	_
. There b	ave been no fees rece	ived and r	o reportable tran	sactions made since th	e last report.
this box is	checked, complete just ti	his form and		retary of State's Office, 10	
ate House,	, Room 204, Concord, NI	103301.			
l. Check i	f additional reports are	attached:			
-	•		res, you must file Ad	Idendum A- Fees and Exp	enses
— ·		-		st file Addendum B- Rep	
	imbursement				
If you, y	our firm, or your family	has made p	olitical contributions,	, you must fil e Addendun	C- Political Cont
	ement/Affirmation by L		3SA 664 and hereby	swear or affirm that the fo	regaing informatic
have read F	RSA 15, RSA 15-B, RSA	14-C and I		swear or affirm that the fo	regoing information
have read F		14-C and I		swear or affirm that the fo	regoing informatio
have read I nd complete	RSA 15, RSA 15-B, RSA e to the best of my know the	14-C and I		swear or affirm that the fo	regoing informatio
have read F	RSA 15, RSA 15-B, RSA e to the best of my know the	14-C and I		swear or affirm that the fo 4130/2025 (Date	regoing information

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STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s) Marc Goldberg, Kirsten Koch, Mike	Vlacich, 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 NECTA	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 grareduced by any expenses:	relations, or public relations service
a) Total of all fees received in this reporting period	00.000,81 s (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)	ы s <u>0.00</u>
c) Total of all fees received to date (Add lines a and b)	c) \$ <u>18,000.00</u>
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$ 0.00
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 lessing lobbied, purchase of a ceremonial object given to a person being lobbie (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.	elient and if expenditures are made by may be filed for the lobbyist(s)/firm aggregate total of all expenses pair epenses; (b) the aggregate total of a e: meals purchased during a business st than \$10 that is given to the persod with a value of \$25.00 or less); an rting period of greater than \$25.00 for the of greater 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.	a) \$ 0.00
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) \$ 0.00
c). Total of all itemized expenditures reported in detail in section VI	0.00

d) Total expenses for this reporting period	d) \$ 0.00	
(Add lines a, b and c) 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	e) \$ 0.00 f) \$ 0.00	
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from loperiod, including by whom paid or to whom charged.	obbying fees during this reporting	
Paid to:	Amount:	
	\$	
H:	\$	
	\$	
	\$	
	\$	
<u> </u>	\$	
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	
Thydrian	4/30/2025	
(Signature of lobbyist)	(Date)	
(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): NECTA
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) $4/30/25$ (Date)
Main M bush
(Print Name of lobbyist)

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

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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)
(Signature of lobbyist) (Date)
More boldberg
(Print Name of lobbyist)

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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)
Michael Vlacich
(Print Name of lobbyist)