

(Print Name of lobbyist)

STATE OF NEW HAMPSHIRE 2019 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

RECEIVED

JUL 3 1 2019

NEW HAMPSHIRE DEPARTMENT OF STATE

PLEASE PRINT

II. Name of Lobbyist'	s partnership, firm or corpor	ation, if any:	
		CALLAHAN & C Iain Street, Conco	
603-228-		603-226-3334	worsowicz@gcglaw.com
(Telepho		(Fax)	(Email)
	vers: (Choose one – file sepa nasactions which are not attri		ch client, OR you may file a separate report for
		•	orting date relative to the following client.
ASSOCIA	TION OF EQUIPMENT MA	NUFACTURERS	c/o MULTISTATE ASSOCIATES INC.
	(Full Name of Client as it ap		
O.D.			
	ransactions by the lobbyist (inc particular client.	luding the lobbyist'	s family), or the lobbying firm listed below which are
IV. Date of Report:	April 24, 2019 🔲		July 31, 2019 🗵
Reports cover: ac	tivity from date of registration	to 3/31/19	activity from 4/1/19 to 6/30/19
	October 30, 2019 🔲		January 29, 2020 □
	activity from 7/1/19 to 9/30/19		activity from 10/1/19 to 12/31/19
	o fees received and no reports complete just this form and subt		nade since the last report. ry of State's Office, State House, Room 204,
	al reports are attached: eived fees or made expenditures	s, you must file Ado	dendum A – Fees and Expenses
If you have paid Expense Reimb	ursement		file Addendum B - Report of Honorariums or you must file Addendum C - Political Contribution
		modi ogna ibunosa,	you
Sworn Statement/Affit I have read RSA 15, RS to the best of my knowle	SA 15-B and RSA 664 and here	by swear or affirm	that the foregoing information is true and complete
1			
Baul 9	Worsowieg		7-29-19 (Date)
(Signature of Lobbyts	SI) //		(Date)
Paul A. Worsowicz			



STATE OF NEW HAMPSHIRE Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s) Paul A. Worsowicz; Heidi L. Kroll; Lisa K. Sl	hapiro, Pl	n.D.; Donald	J. Pfundstein
II. Name of lobbyist'	s partnership, firm or corporation, if any:			
	GALLAGHER, CALLAHAN & GARTRI	ELL, P.C.		
	(Name of partnership, firm or corporat	ion)		
III. Name of Client	ASSOCIATION OF EQUIPMENT MANUFACTURERS c/o MULTISTATE ASSOCIATES INC.	Date	July 31, 20)19
lobbying, including fee including research, mo by any expenses:	unt of all fees received from the client identified above es for services such as public advocacy, government rel initoring legislation, and related legal work. The gross	lations, or	public relation treported sh	ons services, all not be reduced
a) Total of all fees rec	eived in this reporting period		a) \$	11,500.00
	eived this calendar year, prior to this reporting period. the total prior monthly reports for this calendar year.)		b) \$	11,500.00
c) Total of all fees rec	eived to date.		c) \$	
(Add lines a and b)				23,000.00
d) Indicate the amoun yet been paid.	t of any such fees that are due, but have not		d) \$	3,036.25
fees. Separate reports lobbyist(s)/firm that are to be reported in reporting period for sexpenses where the exthe cost was \$25.00 or purchase of a ceremor statement of each indicovered by (a) (for exegiven to the subject of legislative reception).	partnerships, firms, or corporations are required to reare to be filed for expenditures made relative to each ore unrelated to any one client a separate report may be one of three categories of expenses: (a) the aggreg alaries, benefits, support staff, and office expenses; penditure was of \$25.00 or less (for example: meals per less, purchase of a pen with a value of less than \$10 hial object given to a person being lobbied with a value vidual expenditure made during this reporting period of emple: purchase of a meal with value of greater than \$6 lobbying with a value greater than \$25, but not greater than \$2	client and it is filed for ate total of (b) the agourchased that is give e of \$25.0 if greater than	if expenditure the lobbyist(s) of all expense gregate total during a bus en to the period or less); as han \$25.00 for ise of a cerent \$50, restaura	es are made by the s)/firm. Expenses es paid during the lof all individual iness lunch where son being lobbied and (c) an itemized or any purpose no monial object to be ant expenses for a
support staff, and office	penses for this reporting period for salaries, benefits, the expenses, related directly or indirectly to lobbying. Expenditures during this reporting period, not reported	a) : b) :		11,500.00
in a), of \$25 or less.		c) :	<u> </u>	
c) Total of all itemize	d expenditures reported in detail in section VI.	υ,.	-	00

Lobbyist Fees & Expenses, Addendum A – Page 2 Client: ASSOCIATION OF EQUIPMENT MANUFACTURERS c/o MULTISTATE	E ASSOCIATES	INC.
d) Total expenses for this reporting period.		
(Add lines a, b and c.)	d) \$	11,500.00
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.)	c) \$	11,500.00
f) Total of all expenses year to date.	f) \$	23,000.00
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from lobbying period, including by whom paid or to whom charged.	g fees during this	reporting
Paid to:	•	ount
	š	
	s	
·	š	
Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm that is true and complete to the best of my knowledge and belief. Signature of lobbyist)		nformation
(Signature of lobbyist) Paul A. Worsowicz	(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

	Affirmation by Lobbyist ie and Expenses for:		
Name of Lobbying p	partnership, firm or corpora	ation: GALLAGHER, CAL	LLAHAN & GARTRELL, P.C.
Name of Client (lear particular client):		the partnership, firm, or control Manufacturers c/o Mul	rporation and not related to any ItiState Associates Inc.
Date of Report (che	ck one):		
April 24, 2019 🗆	July 31, 2019 🗵	October 30, 2019 🗆	January 29, 2020 □
		Statement of Income and Exement (insert the number of	xpenses described above, and the Addendum forms being
1 Addendum A(s).		
0 Addendum B(s).		
_0 Addendum C(s	s).		
•	firm that the foregoing info of my knowledge and beli		nd each Addendum is true and
(Signature of Lobb)	. Kroll		7.17.2019
(Signature of Lobb)	yist)		(Date)
Heidi L. Kroll (Print Name of lob	hvist)		
TELLINE PRINCE OF TOO	U 1 101 /		

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

Swarn Statement/Affirmation by Labbuist

Statement of Income and Expenses for:			
Name of Lobbying partnership, firm or corporation: GALLAGHER, CALLAHAN & GARTRELL, P.C.			
Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any particular client): Association of Equipment Manufacturers c/o MultiState Associates Inc.			
Date of Report (chec	ck one):		
April 24, 2019 🗖	July 31, 2019 🗶	October 30, 2019 🗆	January 29, 2020 🗆
	RSA 15-B, RSA 664, the S as submitted with that States		penses described above, and the Addendum forms being
1 Addendum A(s	3).		
0 Addendum B(s).			
0 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	rist)		7-30 -19 (Date)
Lisa K. Shapiro, Ph (Print Name of lobb			

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: GALLAGHER, CALLAHAN & GARTRELL, P.C.			
Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any particular client): Association of Equipment Manufacturers c/o MultiState Associates Inc.			
Date of Report (check one):			
April 24, 2019 ☐ July 31, 2019 ☒ October 30, 2019 ☐ January 29, 2020 ☐			
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):			
1 Addendum A(s).			
0 Addendum B(s).			
0 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) Donald J. Pfundstein (Print Name of lobbyist)			