## 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

I. Name of Lobbyist(s) Jobi	Grimbila:	s , Adam :	Schmidt	
11. Name of lobbyist's partnership, firm	or corporation, if any	;		
J. Grimbila	s Strategi	i Solutions, La	_c	
J. 6rim bila (Name of partnership, firm	or corporation)			
POBOX 233 Business Address: (Street)	Northu	H W book	#1 25 24 (	
Business Address: (Street)	(Town/City)	(State)	(Zip Code)	
(603) 4962638 (Telephone)	(Fax)	e-mail Jodi	Q jastrutegi	eis, Com.
III. This statement covers: (Choose one reportable expense transactions which			y file a separate report fo	r
All reportable transactions occurring i			e following client:	
(Full Name of Clier	afield Po	wist Registration Form)		
OR	is as it appears on the Loot	yisi Registration Folia)		
All reportable transactions by the lobb unrelated to any particular client.	yist (including the lobby	rist's family), or the lobbying	firm listed below which ar	С
IV. Date of Report April 24, 2019	_	July 31, 2019	-	
IV. Date of Report April 24, 2019 [ Reports cover: activity from date of regist		activity from 4/1/19 to 6/30/19		
October 30, 2019 activity from 7/1/19 t		January 29, 2020 C activity from 10/1/19 to 12/31.	/19	
V. There have been no fees received If this box is checked, complete just this fo State House, Room 204, Concord, NH 03,	erm and submit it to the			
VI. Check if additional reports are atta	ched:			
If you have received fees or made exp	•			
☐ If you have paid an honorarium or rei Expense Reimbursement	mbursed expenses, you	must file Addendum B- Re	port of Honorariums or	
If you, your firm, or your family has	nade political contribut	ions, you must file Addendu	m C- Political Contribution	18
Sworn Statement/Affirmation by Lobby I have read RSA 15, RSA 15-B, RSA 14- and complete to the best of my knowledge	C and RSA 664 and her	eby swear or affirm that the	Foregoing information is tru	c
(Signature of lobbyist)		7/31/19 (Dai	se)	
(Signature of lobbyist)  John Grandlus  (Print Name of lobbyist)	<del></del>			

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## STATE OF NEW HAMPSHIRE

# Lobbyists Fees and Expenses Addendum A



(RSA Chapter 15:6)

1. Name of Lobbyist(s) Jooi Grimbilar,	Adam Schmidt
II. Name of lobbyist's partnership, firm or corporation, if any:	
J- Grimbilus Strategic Solution	ins, LLC.
(Name of partnership, firm or corporation)  III. Name of Client Springfield Power	Date 7/31/19.
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 groreduced by any expenses:	relations, or public relations services
a) Total of all fees received in this reporting period	a) s 3625
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) \$ <u>2375</u>
c) Total of all fees received to date (Add lines a and b)	c) S 6000
<ul> <li>d) Indicate the amount of any such fees that are due, but have not yet been paid</li> </ul>	d) \$
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to replees. Separate reports are to be filed for expenditures made relative to each of the tobbyist(s)/firm that are unrelated to any one client a separate report in 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 exampleunch 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 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.	client and if expenditures are made by hay be filed for the lobbyist(s)/firm. aggregate total of all expenses paid epenses; (b) the aggregate total of all expenses; (b) the aggregate total of all expenses; (b) the aggregate total of all expenses; (b) that is given to the person d with a value of \$25.00 or less); and tring period of greater than \$25.00 for the of greater than \$25, purchase of a 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)s 3625
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) \$
e) 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) S 3625
(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)	e)s <u>3375</u>
f) Total of all expenses year to date	ns <u>(1</u> 000
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 affire	m that the foregoing information
is true and complete to the best of my knowledge and belief.	
Southents	7/31/19
(Signature of lobbyist)	(Date)
(Print Name of lobbyist)	
(Final Name of 1000yist)	

## 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.

(Print Name of lobbyist)

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for: Name of Lobbying partnership, firm, or corporation: J. Grimblus 54 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): 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.