

RECEIVED

OCT 26 2016

NEW HAMPSHIRE DEPARTMENT OF STATE

| | | STATE OF NEW HAMPSHIRE |
|---|--------------|---------------------------------------|
| | | 2016 Statement of Income and Expenses |
| | | for LOBBYISTS |
| - | | (RSA Chapter 15) |
| | PLEASE PRINT | • / |

| 1. Name of Lobby | rist(s): ROBE | ERT J. DIETEL | | , , , , , , , , , , , , , , , , , , , |
|---------------------------------------|--------------------------|--|-----------------------------|---|
| II. Name of Lobby | ist's partnership, fir | m or corporation, if any | /: | |
| | | LAGHER, CALLAHA | - | c. |
| 602.2 | 28-1181 | 214 North Main Street, | | diatal@acatam.com |
| | ephone) | 603-226-3 | 4// | dietel@gcglaw.com (Email) |
| | | (Fax) e – file separate reports | for each client, OR yo | u may file a separate report for |
| | | are not attributable to a | | |
| ☐ All reportable | transactions occurrin | g in the month prior to th | ne reporting date relative | to the following client. |
| | (Full Name of C | Client as it appears on the | Lobbyist Registration I | Form) |
| OR All reportable unrelated to any pa | • | obbyist (including the lot | obyist's family), or the le | obbying firm listed below which a |
| IV. Date of Report | : April 27, 201 | 16 🗆 | July | 27, 2016 🗆 |
| Reports cover: | activity from date of | registration to 3/31/16 | activity from | 4/1/16 to 6/30/16 |
| | October 26, 2 | 2016 🗵 | Janua | ary 25, 2017 🔲 |
| | activity from 7/1/1 | 6 to 9/30/16 | activity from | 10/1/16 to12/31/16 |
| | d, complete just this fo | d no reportable transac form and submit it to the S | | st report. ce, State House, Room 204, |
| VI. Check if addit | ional reports are atta | ached: | | |
| ☐ If you have rece | eived fees or made exp | penditures, you must file | Addendum A – Fees as | nd Expenses |
| Expense Reimbursen | nent | • | | - Report of Honorariums or |
| If you, your firm | n, or your family has | made political contribution | ons, you must file Adde | ndum C – Political Contributions |
| | | | affirm that the foregoing | g information is true and complete |
| Int & | 9 | | 10/20 | A (Cate) |
| (Signature of Lob) | yıst) | | • | (Date) |
| ROBERT J. DIETE | | | | |
| Trilli iname of look | JAISTI | | | |



STATE OF NEW HAMPSHIRE

Lobbyists Report of Political Contributions Addendum C

(RSA Chapter 15:6)

| I. Name of Lobbyist(s) | ROBERT J. DIETEL | | | | | | |
|---|--|------------------------------|---------------------------------|--|--|--|--|
| II. Name of lobbyist's pa | rtnership, firm or corporatio | n, if any: | | | | | |
| GALLAGHER, CALLAHAN & GARTRELL, P.C. | | | | | | | |
| (Name of partnership, firm or corporation) | | | | | | | |
| III. Name of Client | | Date | October 26, 2016 | | | | |
| _ | bution that is reportable purs ving firm, indicate the follow | _ | paid on behalf of the | | | | |
| Full name of candidate: | Political Action Comr VAN OSTERN | nittee: VAN OSTERN FO | OR NH | | | | |
| | (Last Name) | (First Name) | (Middle Name/Initial) | | | | |
| Amount of Contribution \$2 | 250.00 Office Candidate is Se | eking GOVERNOR | | | | | |
| enter an estimated value ar | Political Action Comm | ittee: | | | | | |
| Full name of candidate: | (Last Name) | (First Name) | (Middle Name/Initial) | | | | |
| Amount of Contribution \$ | Office Candidate is S | | | | | | |
| actual cost of the in-kind c enter an estimated value ar | kind contribution, provide a de ontribution on the line above for the word "estimate." | r amount of contribution. Is | f the actual cost is not known, | | | | |
| Full name of candidate: | Political Action Commi (Last Name) | | (Middle Name/Initial) | | | | |
| | | | , | | | | |
| Amount of Contribution \$_ | Office Candidate is S | eeking | over to continue A | | | | |

| If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter the actual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not known, enter an estimated value and the word "estimate." | | | | | |
|---|--|--|--|--|--|
| | | | | | |
| | | | | | |
| (If more than three contributions were made, report additional contrib | outions 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. | | | | | |
| By: Que | 10/24/16 | | | | |
| (Signature of lobbyist) | (Date) | | | | |
| | | | | | |
| ROBERT J. DIETEL | | | | | |
| (Print Name of Lobbyist) | | | | | |