

STATE OF NEW HAMPSHIRE 2025 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

PLEASE PRINT

I. Name of Lobbyist(s):	I. Name of Lobbyist(s): Lisa K. Shapiro, Ph.D.				
II. Name of Lobbyist's partr	nership, firm or corporation, if any:	x ·			
	GALLAGHER, CALLAHAN &	& GARTRELL, P.C.			
	214 North Main Street, Cor				
603-228-1181	603-226-333				
(Telephone)	(Fax)	(Email)			
	Choose one – file separate reports for ons which are not attributable to any o	each client, OR you may file a separate report for one client.)			
X All reportable transac	tions occurring in the month prior to the	reporting date relative to the following client.			
	PLANNED PARENTHOOD OF NOR	THERN NEW ENGLAND			
(Fi	all Name of Client as it appears on the L	obbyist Registration Form)			
	3				
All reportable transac unrelated to any parti		yist's family), or the lobbying firm listed below which a			
IV. Date of Report: A	spril 30, 2025 ⊠	July 30, 2025			
Reports cover: activity fr	om date of registration to 3/31/25	activity from 4/1/25 to 6/30/25			
	_				
	ctober 29, 2025 7, 2025 7, 2025 7, 2025	January 28, 2026 ☐			
activity	from 7/1/25 to 9/30/25	activity from 10/1/25 to 12/31/26			
	received and no reportable transactio e just this form and submit it to the Secre	ns made since the last report. etary of State's Office, State House, Room 204,			
VI. Check if additional repo	erts are attached:				
If you have received	fees or made expenditures, you must file	Addendum A - Fees and Expenses			
		must file Addendum B – Report of Honorariums or			
Expense Reimbursem		C. Deliairel Contribution			
if you, your firm, or y	our family has made political contribution	ons, you must file Addendum C - Political Contribution			
Sworn Statement/Affirmation	n by Lobbyist				
		m that the foregoing information is true and complete			
to the best of my knowledge ar	nd belief.				
1KKS	3 80	4/30/25			
(Signature of Lobbyist)		(Date)			
Lisa K. Shapiro, Ph.D.					
(Print Name of lobbyist)					

RECEIVED

APR 30 2025

NEW HAMPSHIRE DEPARTMENT OF STATE



STATE OF NEW HAMPSHIRE Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

	(RSA Cha)	pter 15:0)		
I. Name of Lobbyist(s)	Lisa K. Shapiro, Ph.D.	. .		
II. Name of lobbyist's p	partnership, firm or corporation, if any:			
	GALLAGHER, CALLAHAN & GAF	RTRELL, P.C.		
	(Name of partnership, firm or con			
III. Name of Client	PLANNED PARENTHOOD OF NORTHE NEW ENGLAND	ERN Date	April 30, 20)25
		88		
lobbying, including fees t	t of all fees received from the client identified a for services such as public advocacy, governme oring legislation, and related legal work. The g	nt relations, or	public relations	services,
a) Total of all fees recei	ived in this reporting period		a) \$	500.00
	ived this calendar year, prior to this reporting po he total prior monthly reports for this calendar y		b) \$	
c) Total of all fees recei (Add lines a and b)	ived to date.		c) \$	500.00
d) Indicate the amount of yet been paid.	of any such fees that are due, but have not		d) \$.00
Separate reports are to be lobbyist(s)/firm that are to are to be reported in one of period for salaries, benefit the expenditure was of \$2 or less, purchase of a person be expenditure made during purchase of a meal with which a value greater than	rtnerships, firms, or corporations are required to be filed for expenditures made relative to each annelated to any one client a separate report may fithree categories of expenses: (a) the aggregate its, support staff, and office expenses; (b) the ag 5.00 or less (for example: meals purchased duries with a value of less than \$10 that is given to the peing lobbied with a value of \$25.00 or less); and this reporting period of greater than \$25.00 for alue of greater than \$25, purchase of a ceremoni \$25, but not greater than \$50, restaurant expension and a contributions will be remained.	the client and if ay be filed for the e total of all exp agregate total of ing a business lu- person being lob- and (c) an itemized any purpose no ial object to be guses for a legisl	expenditures are the lobbyist(s)/forenses paid during fall individual counch where the cobied, purchase ed statement of the covered by (agiven to the subjative reception)	re made by the Firm. Expenses ing the reporting expenses where cost was \$25.00 of a ceremonial each individual (for example: ject of lobbying a Expenses for
support staff, and office	nses for this reporting period for salaries, benef expenses, related directly or indirectly to lobby	ving. b)		0
 b) Total aggregate of ex in a), of \$25 or less. 	spenditures during this reporting period, not rep			
c) Total of all itemized	expenditures reported in detail in section VI.	c)	Ð	.00

Lobbyist Fees & Expenses, Addendum A – Page 2 Client: PLANNED PARENTHOOD OF NORTHERN NEW ENGLAND				
d) Total expenses for this reporting period. (Add lines a, b and c.)	d) \$.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.)	e) \$			
f) Total of all expenses year to date.	f) \$.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.	ng fees during this repo	rting		
Paid to:	. Amour	Amount		
State of NH	<u>\$</u>	.00		
	\$			
	\$	39		
State of INT	\$			
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.	the foregoing inform	nation		
(Signature of lobbyist)	4/30/25			
(Signature of Tobbyist)	(Date)			
	80			
Lisa K. Shapiro, Ph.D.				
(Print Name of Lobbyist)				
94				