STATE OF NEW HAMPSHIRE

2024 Statement of Income and Expenses for LOBBYISTS

(RSA Chapter 15)

RECEIVED

JAN 29 2025

NEW HAMPSHIDE

PLEASE PRINT

I. Name of L	obbyist(s):	<u>H</u>	eidi L. Kro	II, Caroline	K. Leonard	1		DEPAR	TMENT	OFIRE OF STA
II. Name of Lo	hhviet'e na	 rtnershin	firm or co	rnoration i	fany			John M.	. 14177	JF 31A
:: Name of Lo	DUYISE S PA	i inersnip,	iii iii or co	i poration, i	rany.		: : : : : : : : : : : : : : : : : :	*	11.	
		.::.': (SALLAGH	ER, CALL	AHAN & G	ARTREL	L. P.C.	.:::	::::::	
mi' i m	::	::			reet, Concor				. i _.	:
(503-228-118	31 - :	: ::'	603-	226-3334	·	leo	nard@gcgla	w.com	
. :::	(Telephone).:			(Fax)		 	(Email)		•
III. This staten	ent covers	: : (Choose	one – file s	senarate rei	orts for eac	h client. ()R von may	file a sepa	rate repor	t for
reportable expe							:			:.
						111.			:	
X All rep	ortable trans	sactions oc	curring in t	he month pr	ior to the rep	orting dat	e relative to	the followin	g client.	
		Δ·MT	RICAN R	FSORT DE	VELOPMI	NT ASSO	CIATION			
	* * *				on the Lobb) · · ·	. :	
arai.				::··. **		.		* ::	: .:	
<u>OR</u>	·	· .	1		1		``			
				st (including	the lobbyist	's family).	or the lobb	ying firm lis	ted below	which ar
unrelate	ed to any pa	rucular cii	ent.	ļ. i. i.	::::.			•	11711	.:::-
				- :	*:.			:	•	
IV. Date of Rep	-	April 24,			: '	: .	July 31, 20			
Reports cover:	activity	from date	of registra	tion to 3/31	/24	activity	from 4/1/24	to 6/30/24		
!	•	October 3	30, 2024 🗆				January 29	, 2025 🗵		
	activ	ity from 7.	/1/24 to 9/3	0/24		activity		4 to 12/31/2	4	•
** ***			<u> </u>					- HIII -	<u> </u>	::`
V. There have If this box is che									204	.:: ::.
Concord, NH 0		ieie jusi in	is jorm ana	suomii ii io	ine secretar	y oj sigie	s Ojjice, sia	<i>ie пои</i> ѕе, ко	00M 2U4,	.:
							:	. :		
VI. Check if a					iii :-i			::: .:.	: .	
X If you h	nave receive	d fees or n	nade expen	ditures, you	must file Ad	dendum	A – Fees and	Expenses		: .
If you i	have paid an	honorariu	m or reimb	ursed expen	ses, you mus	t file Add	endum B –	Report of H	onorarium	s or
· · • • •	e Reimburs							71.27		
If you,	your firm, c	r your fan	ily has mad	le political c	ontributions	, you must	file Adden	dum C – Po	litical Con	tribution
Sworn Stateme	nt/Affirma	ion by I o	hhvist			:				
I have read RSA	. 15. RSA 1:	5-B and R	SA 664 and	hereby swe	ar or affirm t	hat the for	egoing info	mation is tr	ie and com	nlete
to the best of my				riorop, parei	ar or unining	indi ino ioi	obonib mio	macion is tr	ie una con	ibioto
· · · · · · · · · · · · · · · · · · ·		;		·	****					
4.1.	7 17 10		:		1:	A .	n all 175	- 1:: 1		
(Signature of I	h. Ihr	,;;;	.:::	::::	.:::::	id *	<u> لک ۱۲۰۰ کا کی ل</u>	Doto): :	 .::	
(Oignature Of I	-cooyist)	***.		: [*]	·		Q	Date):::	٠	* *
Heidi L. Krol		. ; [.]	· · · ·	· · · · ·					•	
(Print Name of	of lobbyist)				17 - 14			<u>:</u> :i.		



STATE OF NEW HAMPSHIRE Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s)	Heidi L. Kroll		*ti		. 1,1	
	· · · · · · · · · · · · · · · · · · ·				1	- 11
II. Name of lobbyist's pa	artnership, firm or o			TRELL P.C	· · · · · · · · · · · · · · · · · · ·	. i.,.
		of partnership,				•
H	author unit			1	· HE.	
III. Name of Client	AMERICAN RESO ASSOCIATION	JRT DEVEL	OPMENT	Date	Januar	y 29, 2025
	ASSOCIATION		· · · · · · · · · · · · · · · · · · ·			 :
IV. Fees Received Indicate the gross amount	of all fees received f	com the aliant	identified at	ove that are re	lated direc	the or indirectly t
lobbying, including fees for						
including research, monito						
by any expenses:		:	• :• •••			
a) Total of all fees receive	ved in this reporting i	period	· ·		a) \$	1,815.0
	in in indicating I				ω, Ψ <u></u>	
b) Total of all fees recei					b) \$. tuiti
(This should equal th	e total prior monthly	reports for thi	is calendar y	ear.)	·- <u>·</u>	6,385.0
c) Total of all fees receive	ved to date.	· · · ·	:		c) \$	
(Add lines a and b)			:			:
- i		1		***	· —	i.
d) Indicate the amount of	of any such fees that a	re due, but ha	ve not	: -	d) \$	
yet been paid.			: :	or or the last is	:	312.5
V. Expenses:					:.	
Lobbyist(s)/Lobbying part	tnerships, firms, or co	orporations are	required to	report all expe	nses made	from lobbying fee
Separate reports are to be	e filed for expenditu	res made rela	tive to each	client and if	expenditure	es are made by the
lobbyist(s)/firm that are us are to be reported in one of	three categories of ex	ment a separa	te report ma he aggregate	y be filed for total of all ext	ine lobbyisi enses naid	(s)/IIrm. Expense
period for salaries, benefit	s, support staff, and o	office expense	s; (b) the ag	gregate total o	f all individ	ual expenses whe
the expenditure was of \$25	5.00 or less (for exam	ple:∃meals pui	rchased durir	ng a business li	inch where	the cost was \$25.0
or less, purchase of a pen v						
object given to a person be expenditure made during t						
purchase of a meal with va	lue of greater than \$2	5, purchase of	f a ceremonia	al object to be	given to the	subject of lobbyir
with a value greater than !	\$25, but not greater t	han \$50, resta	urant expens	ses for a legisl	ative recept	ion). Expenses f
honorariums, expense rein be reported on Addendum	nbursement, or politic	cal contributio	ns will be re	ported on sepa	rate addend	ums and should n
•			1. 1			•
.:::		·	.:: :::			
-> m-4-1	i :::				. · .	
a) Total aggregate expersupport staff, and office					·\$	1,810.00
iiiii iiii iiii iiii iiii	expenses, related unc	city of manet	ily to loody	g. :::::: b)	\$:::::::	1,810.00
b) Total aggregate of ex	penditures during thi	s reporting per	riod, not repo		· i	
in a), of \$25 or less.					<u>. i </u>	···
c) Total of all itemized e	expenditures réported	in detail in se	ection VI	: : c)	\$.00
-, rounda un nonnizou c	which are no rehoused	m domin in sc	CHOII VI.			

d) Total expenses for this reporting period. (Add lines a, b and c.)	d) \$	1,810.00
e) Total of expenses paid this calendar year, prior to this reporting (This should be the amount on line f of addendum A for last months)	period. th's report.) e) \$	7,345.00
f) Total of all expenses year to date.	f) \$	9,155.00
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 m period, including by whom paid or to whom charged.	nade from lobbying fees during this r	reporting
Paid to:		nount
	*	
	\$	
	\$	
	\$	
Sworn Statement/Affirmation by Lobbyist		
I have read RSA 15, RSA 15-B and RSA 664 and hereby swe is true and complete to the best of my knowledge and belief.	ear or affirm that the foregoing in	formation
(Signature of lobbyist)	1.28-25	
(Signature of lobbyist)	1 · 28 · 25 (Date)	
Heidi L. Kroll		
(Print Name of Lobbyist)		

Client: AMERICAN RESORT DEVELOPMENT ASSOCIATION

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:

Statement of Income and Expenses for:						
Name of Lobbying partnership, firm or corporation: GALLAGHER, CALLAHAN & GARTRELL, P.C.						
Name of Client (leav particular client):	ve blank if Statement is fo American Resort Deve		orporation and not related to any			
Date of Report (che	ck one):					
April 24, 2024 □	July 31, 2024 □	October 30, 2024	January 29, 2025 🗵			
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	s).					
0 Addendum B(s	3).					
0 Addendum C(s	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	Walnus		//28/2) (Date)			
Caroline K. Leonar			er.			
(Print Name of lobb	ovist)					