

STATE OF NEW HAMPSHIRE

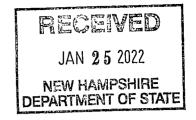
2021 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

RECEIVED JAN 25 2022 NEW HAMPSHIRE DEPARTMENT OF STATE

PLEASE PRINT

I. Name of Lobbyist(s) Jodi Grimbilas, Adam Schmidt			DEPARTMENT OF STA	
II. Name of lobbyist's partnership. J. Grimbilas Strategic S	·			
(Name of partnership	o, firm or corporation)			
PO Box 233	Northwood	NH	03261	
Business Address: (Street)	(Town/City)	(State)	(Zip Code)	
603 496-2638	()	_{e-mail} jodi@jgs	trategies.com	
(Telephone)	(Fax)			
III. This statement covers: (Choose reportable expense transactions w	hich are not attributable to any on	e client).		
All reportable transactions occur	ring in the months prior to the report	ting date relative to th	e following client:	
NH Ma	VINC TVAdes AS Client as it appears on the Lobbyist Reg	SOCIATION eistration Form)		
<u>OR</u>	Cononi as it appoints on the 2000 yist Nog	5104411011 1 01111)		
All reportable transactions by the unrelated to any particular client.	lobbyist (including the lobbyist's fa	mily), or the lobbying	firm listed below which are	
IV. Date of Report April 28, 20 Reports cover: activity from date of October 27, activity from 7/	registration to 3/31/21 activity, 2021	July 28, 2021 From 4/1/21 to 6/30/21 January 26, 2022 From 10/1/21 to 12/31	 21	2
V. There have been no fees reco If this box is checked, complete just a State House, Room 204, Concord, N	this form and submit it to the Secreta			
VI. Check if additional reports are	e attached:			
If you have received fees or made	le expenditures, you must file Adder	ndum A– Fees and E	kpenses	
If you have paid an honorarium	or reimbursed expenses, you must fi	le Addendum B – Re	port of Honorariums or	
Expense Reimbursement If you, your firm, or your family	has made political contributions, yo	ou must file Addendu	m C-Political Contributions	
Sworn Statement/Affirmation by I I have read RSA 15, RSA 15-B, RSA and complete to the best of my know	A 14-C and RSA 664 and hereby swe	ear or affirm that the i	Foregoing information is true	
Jodi Hunda	· · · · · · · · · · · · · · · · · · ·	1/25/2022		
(Signature of lobbyist)		(Dat	ce)	
Jodi Grimbilas		·		
(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.

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:

Name of Lobbying partnership, firm, or corporation: J.	Grimbilas Strategic Solutions LLC
Name of Client (leave blank if Statement is for the partn	
particular client):	
Date of Report (check one):	
April 28, 2021 July 28, 2021 October	27, 2021 January 26, 2022
I have read RSA 15, RSA 15-B, RSA 664, the Stateme the following Addendums submitted with that Stateme submitted):	
Addendum A(s).	
Addendum B(s).	
Addendum C(s).	
I hereby swear or affirm that the foregoing information complete to the best of my knowledge and belief.	on the Statement and each Addendum is true and 1/25/2022
(Signature of lobbyist)	(Date)
Adam J. Schmidt	
(Print Name of lobbyist)	