

STATE OF NEW HAMPSHIRE 2024 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

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JAN 29 2025

NEW HAMPSHIRE DEPARTMENT OF ST.

PLEASE PRINT

I. Name of Lobbyist(s): Heidi L. Kroll, Donald J. Pfundstein; Lisa K. Shapiro, Ph.D.; Paul A. Worsowicz II. Name of Lobbyist's partnership, firm or corporation, if any: GALLAGHER, CALLAHAN & GARTRELL, P.C. 214 North Main Street, Concord, NH 03301 603-228-1181 603-226-3334 shapiro@gcglaw.com (Telephone) (Fax) (Email) III. This statement covers: (Choose one - file separate reports for each client, OR you may file a separate report for reportable expense transactions which are not attributable to any one client.) All reportable transactions occurring in the month prior to the reporting date relative to the following client. PHANTOM FIREWORKS SHOWROOMS, LLC (Full Name of Client as it appears on the Lobbyist Registration Form) All reportable transactions by the lobbyist (including the lobbyist's family), or the lobbying firm listed below which are unrelated to any particular client. IV. Date of Report: April 24, 2024 July 31, 2024 \Box Reports cover: activity from date of registration to 3/31/24 activity from 4/1/24 to 6/30/24 October 30, 2024 January 29, 2025 X activity from 7/1/24 to 9/30/24 activity from 10/1/24 to 12/31/24 V. There have been no fees received and no reportable transactions made since the last report. If this box is checked, complete just this form and submit it to the Secretary of State's Office, State House, \overline{Room} 204, Concord, NH 03301. VI. Check if additional reports are attached: If you have received fees or made expenditures, you must file **Addendum A** – Fees and Expenses If you have paid an honorarium or reimbursed expenses, you must file Addendum B - Report of Honorariums or Expense Reimbursement If you, your firm, or your family has made political contributions, you must file Addendum C - Political Contributions 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. (Signature of Lobbyist) (Date) Heidi L. Kroll. (Print Name of lobbyist)



STATE OF NEW HAMPSHIRE Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

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I. Name of Lobbyist(s)	Heidi L	. Kroll, I	Oonald J.	Pfundste	in; Lisa k	K. Shapiro	o, Ph.D.; P	aul A. Wo	rsowicz
II. Name of lobbyist's p	artnershin	firm or c	ornoratio	n if any			• : .		
iii ivanie of lobbylst s p	ar incremp,		or por acto				: ::		
	GAL	LAGHE	R, CALL	AHAN &	GARTR	ELL, P.C	•	:	
	· :	(Name o	f partnersl	hip, firm (or corpora	tion)			
III. Name of Client	PHANTO	M FIDES	VODKS 9	SHOWD	OOMS	· · · · · Date	Janua	ry 29, 202	<u>. </u>
	LLC		VOICES	 	JONIS,	Daic	Janua	1 y 23, 202	J
•		:				 -			
TT 70 11 10 10 10 10 10 10 10 10 10 10 10 10						111	:.		:
IV. Fees Received Indicate the gross amount	of all fees re	eceived fr	om the cli	ent identi	fied above	that are'r	elated dire	ectly or ind	::: lirectly to
lobbying, including fees f	or services s	uch as pu	blic advoc	cacy, gove	rnment re	lations, or	public rel	ations servi	ices.
including research, monit									
by any expenses:	:	.::::	.: ::	!:			::::::::::::::::::::::::::::::::::::::		
a) Total of all fees recei	ved in this re	norting n	ariad		: <u>.</u>		a) \$		2,000.00
· uj Total of an fees feech	. ved in tills re		Criou		11.	· . :			2,000.00
b) Total of all fees recei	ved this cale	ndar year	, prior to t	his repor	ing period	i.	b) \$		i
(This should equal the	ne total prior	monthly	reports for	r this cale	ndar year.) ::	:		10,200.00
a) Total of all food roosi	wad ta data	· :.:	• • :		1.		: • • • • • • • • • • • • • • • • • •		
c) Total of all fees recei	ved to date.			: .			c) \$. **	12,200.00
(Tad miles a and b)							•	•	12,200.00
d) Indicate the amount of	of any such f	ees that a	re due, bu	t have not		•.	d) \$		
yet been paid.			,				· :	<u>: :</u>	1,000.00
V. Expenses:							ł 		
Lobbyist(s)/Lobbying par	tnerships, fir	ms, or co	rporations	are requi	red to rep	ort all exp	enses mad	e from lobb	oying fees
Separate reports are to b	e filed for e	xpenditur	es made:	relative to	each cli	ent and if	expenditu	ires are ma	ade by the
lobbyist(s)/firm that are u									
are to be reported in one of period for salaries, benefit									
the expenditure was of \$2	5.00 or less (for examp	ole:∷meals	purchase	d during a	business	unch wher	e the cost v	vas \$25.00
or less, purchase of a pen v	with a value o	of less tha	n \$10 that	is given t	o the perso	on being lo	bbied, pur	chase of a c	eremonia
object given to a person b									
expenditure made during purchase of a meal with va									
with a value greater than	\$25, but not	greater th	ian \$50, r	estaurant	expenses	for a legis	lative rece	ption). Ex	penses fo
honorariums, expense reir	nbursement,								
be reported on Addendum	ı A.						: .		Ť
								· ·	
: :: :: :: : : : : : : : : : : : : : :		· · ·		• • • • • • • • • • • • • • • • • • • •				1.	
a) Total aggregate exper						a).\$		
support staff, and office	expenses, re	lated dire	ctly or ind	lirectly to	lobbying.		<u> </u>	: 3,	,000.00
b) Total aggregate of ex	nenditures d	uring this	 reporting	neriod n	: of renorte) \$: : : : :		
in a), of \$25 or less.	.ponditures u	armg uns		, periou, II	· reporte	u (₁ ,		****	
		:		. ::		c) \$. :	:
c) Total of all itemized	expenditures	reported	in detail i	n section	VI.	:	:: <u>. :::</u>	·:· .:·	.00

Lobbyist Fees & Expenses, Addendum A – Page 2 Client: PHANTOM FIREWORKS SHOWROOMS, LLC		
d) Total expenses for this reporting period. (Add lines a, b and c.)	d) \$	3,000.00
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) \$	9,200.00
f) Total of all expenses year to date.	f) \$	12,200.00
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from lobbying fees period, including by whom paid or to whom charged.	during this r	eporting
Paid to:	Am	ount
	\$	
	\$	
	\$	
· · · · · · · · · · · · · · · · · · ·	\$	
Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm that the fois true and complete to the best of my knowledge and belief.		
(Signature of lobbyist) (Signature of lobbyist)	<u>.e - 2025</u> Date)	
Heidi L. Kroll. (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

St	Statement of Income and Expenses for:					
Na	Name of Lobbying partnership, firm or corporation: GALLAGHER, CALLAHAN & GARTRELL, P.C.					
	•	e blank if Statement is f Phantom Fireworks S	<u> </u>	orporation and not related to any		
De	ate of Report (chec	k one):				
AĮ	oril 24, 2024 🏻	July 31, 2024 □	October 30, 2024 🗆	January 29, 2025 🔀		
fo	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)).				
_0	Addendum B(s)	ı .				
_0	Addendum C(s)					
	<u> </u>	rm that the foregoing in of my knowledge and be		and each Addendum is true and		
<u></u>	Signature of Lobbyi	Junh -		/27/25 (Date)		
		V'		(Dute)		
-	Donald J. Pfundsteir Print Name of lobb					

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 (lea particular client):	ve blank if Statement is f Phantom Fireworks S		orporation and not related to any			
Date of Report (che	ck one):					
April 24, 2024 □	July 31, 2024 □	October 30, 2024	January 29, 2025 🔀			
		e Statement of Income and E atement (insert the number o	Expenses described above, and the f Addendum forms being			
1 Addendum A(s).					
_0 Addendum B(s).					
_0 Addendum C(s).					
•	firm that the foregoing in of my knowledge and be		and each Addendum is true and			
(Signature of Lobby	yist)		1-28-25 (Date)			
Paul A. Worsowicz						
(Print Name of lob	byist)					

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:

(Print Name of lobbyist)

	•					
Name of Lobbying partnership, firm or corporation: GALLAGHER, CALLAHAN & GARTRELL, P.C.						
Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any particular client): Phantom Fireworks Showrooms, LLC						
Date of Report (chec	k 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)).					
0 Addendum B(s)).					
0 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.						
(Signature of Lobby	ist)		1/29/25 (Date)			
Lisa K. Shapiro, Ph.D.						
Lisa K. Bhapho, I h.						