

PLEASE PRINT

STATE OF NEW HAMPSHIRE STATE OF NEW HAMPSHIRE 2024 Statement of Income and Expenses

for LOBBYISTS (RSA Chapter 15)

RECEIVED

JAN 29 2025

NEW HAMPSHIRE DEPARTMENT OF STATE

I. Name of Lobbyist	(s):	Robert	J. Dietel;	Heidi L. Krol	l; Rowan	K. Joyce			
II. Name of Lobbyist's	partnersh	ip, firm	or corpora	tion, if any:			· · · · · · · · · · · · · · · · · · ·		::
				CALLAHAN ain Street, Co			2.	-	
603-228				603-226-33	34		dietel@ge	cglaw.com	·:
(Teleph	one)		. :	(Fax)			:::: (En	nail)	
III. This statement cov reportable expense train	ers: (Chonsactions v	ose one – vhich are	- file separ e not attrib	ate reports fo utable to any	r each clie one clien	ent, OR you t.)	ı may file a	separate re	port for
X All reportable t	ransactions	occurrin	g in the mo	onth prior to th	e reportin	g date relati	ve to the foll	owing clien	t.
				MY OF ELI					<u> </u>
	(Full N	ame of C	lient as it a	ppears on the	Lobbyist F	Registration	Form)		
OR		:							
All reportable t unrelated to any	ransactions particular	by the lo	obbyist (inc	luding the lob	byist's fan	nily), or the	lobbying fir	n listed belo	ow which ar
		.:	· .				1		
IV. Date of Report:	April 2	24, 2024				Inly 3	1, 2024 🗆		
	- · · · · -		gistration t	o 3/31/24	acı	-	/1/24 to 6/30	/24	
	Octob	er 30, 202	24 🗆	•		Janua	ry 29, 2025	X	
a	ctivity fron	n 7/1/24 t	o 9/30/24	· · · · · · · · · · · · · · · · · · ·	act	ivity from 1	0/1/24 to 12/	31/24	
V. There have been n If this box is checked; co Concord, NH 03301.	o fees rece implete just	ived and t this forn	no reporta n and subm	able transacti it it to the Sec	ons made retary of S	since the la tate's Office	st report. e, State Hous	e, Room 20	4,
	***	****			· (=:.				
VI. Check if additional If you have reco				s, you must fil	e Addend	um A – Fee	s and Expen	ses	
If you have paid Expense Reimb If you, your firm	ursement.								
ii you, your ini	ii, or your i	anny na	s made pon	iticai continou	nons, you	must me At	idendum C.	– Ponticai C	Ontribution
Sworn Statement/Affirm I have read RSA 15, RSA	A 15-B and	RSA 664		y swear or aff	irm that th	e foregoing	information	is true and o	complete
to the best of my knowle	dge and be	lief.			: :				•
174	Eta	:	:::::::::::::::::::::::::::::::::::::::	ide	<u></u>	1/2	9/25		
(Signature of Lobbyist))	*.			•••	ar ((Date)	. **	
Robert J. Dietel (Print Name of lobby)			: <u>:</u> :::.	<u></u>		. 1 . 1	- -	. 1:	
(- This Timing of 1000)	••)								



STATE OF NEW HAMPSHIRE Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

T. Name of Yakhada(a)							i
I. Name of Lobbyist(s)		. Dietel; Heidi		van K. Joyc	<u>e</u>		
II. Name of lobbyist's pa	artnership, fi	irm or corpora	tion, if any:				· :-
	GALL	AGHER, CAL	.::: LAHAN & O	ARTRELI	. P.C.	:	:
· · · · · · · · · · · · · · · · · · ·		Name of partne	_				
		1111				:-	
III. Name of Client	NATIONAL ATTORNE		OF ELDER I	i AW :	Date J	anuary 29,	2025
	• •			1			
IV. Fees Received						·:`	
Indicate the gross amount	of all fees rec	eived from the	client identifie	ed above that	are related	, directly o	r indirectly, to
lobbying, including fees for	or services su	ch as public adv	ocacy, govern	ment relatio	ns, or publi	c relations	services,
including research, monito	oring legislation	on, and related	legal work. Ti	ne gross fee	amount rep	orted shall	not be reduced
by any expenses:	.::::::	1,11111.				;;	
a) Total of all fees recei	ved in this rep	orting period				ı) \$	1,330.00
b) Total of all fees recei	ved this calen	: dar vear prior t	o this reportin	a period	1.111.	o) \$: ::	
(This should equal th							50.00
c) Total of all fees recei	ved to date.					;) \$	
(Add lines a and b)	· · · · · · · · · · · · · · · · · · ·	÷:	:			·:	1,380.00
d) Indicate the amount of yet been paid.	of any such te	es that are due,	but have not		·, c	1) \$	
yet been paid.	·" ·…·						· <u>.00</u>
V. Expenses:	***	· .		: ::::			
Lobbyist(s)/Lobbying part	tnerships, firn	ns, or corporation	ons are require	d to:report al	ll expenses	made.from	lobbying fees
Separate reports are to be	e filed for ex	penditures mad	e relative to	each client a	nd if expe	nditures ar	e made by the
lobbyist(s)/firm that are u are to be reported in one of	three categor	is one chent a s	separate report (a) the aggre	may be file	d for the fo	obyist(s)/ii s paid durir	irm. Expense
period for salaries, benefit	s, support sta	ff, and office ex	penses; (b) the	e aggregate t	otal of all i	ndividual e	expenses where
the expenditure was of \$25	5.00 or less (fo	or example: mea	als purchased o	luring a busi	ness lunch	where the c	ost was \$25.00
or less, purchase of a pen v	vith a value of	less than \$10 th	at is given to t	he person be	ing lobbied	, purchase o	of a ceremonia
object given to a person be expenditure made during t	ing loodled v	vith a value of 5	25.00 or less);	and (c) and	itemized sta	tement of e	each individua
purchase of a meal with va	llue of greater	than \$25, purch	ase of a cerem	onial object	to be given	to the subi	ect of lobbying
with a value greater than !	\$25, but not g	reater than \$50	, restaurant ex	penses for a	legislative	reception).	Expenses fo
honorariums, expense rein	nbursement, o	r political contr	ibutions will b	e reported or	n separate a	ddendums	and should no
be reported on Addendum	Α.	••••	* ::			•	
		ia i		11.1		: .	
a) Total aggregate exper					a) \$		
support staff, and office	expenses, rela	ted directly or i	ndirectly to lo	bbying.	·		537.00
b) Total aggregate of ex	nenditures du	ring this reports	na period not	reported	b) \$:::		. •
in a), of \$25 or less.	ponditures du	ing una reporti	ng periou, not	reported	.`		
			:.:		c) \$		
c) Total of all itemized e	expenditures r	eported in detai	l in section VI	• • • • • • • • • • • • • • • • • • • •	- :::::: <u>-</u>		.00

d) Total expenses for this reporting period. (Add lines a, b and c.) d) \$ 537.00 e) Total of expenses paid this calendar year, prior to this reporting period. e) \$ 50.00 (This should be the amount on line f of addendum A for last month's report.) f) Total of all expenses year to date. f) \$ _____587.00 VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from lobbying fees during this reporting period, including by whom paid or to whom charged. Paid to: Amount 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) Robert J. Dietel (Print Name of Lobbyist)

Lobbyist Fees & Expenses, Addendum A – Page 2

Client: NATIONAL ACADEMY OF ELDER LAW ATTORNEYS

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 Inco	ome and Expenses for:	•	
Name of Lobbying	g partnership, firm or corp	oration: GALLAGHER, CA	ALLAHAN & GARTRELL, P.C.
Name of Client (le particular client):	eave blank if Statement is: Naional Academy of	for the partnership, firm, or c	orporation and not related to any
Date of Report (cl	heck one):		
April 24, 2024 □	July 31, 2024 □	October 30, 2024	January 29, 2025 🔀
I have read RSA 1 following Addendersubmitted):	5, RSA 15-B, RSA 664, the that S	ne Statement of Income and I tatement (insert the number of	Expenses described above, and the of Addendum forms being
1 Addendum A	a (s).		
0 Addendum B	S (s).		
0 Addendum C	C(s).		
I hereby swear or a complete to the bes	affirm that the foregoing in st of my knowledge and be	nformation on the Statement elief.	and each Addendum is true and
(Signature of Lobb	- Kwl		<u> </u>
(Signature of Lobl	byist)		(Date)
Heidi L. Kroll			
(Print Name of l	obbyist)		

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

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Sworn Statement/Affirmation by Lobbyist

Statement of Incom	e and Expenses for:	•	
Name of Lobbying p	eartnership, firm or corp	oration: GALLAGHER, CA	LLAHAN & GARTRELL, P.C.
Name of Client (leav particular client):	ve blank if Statement is to Naional Academy of	for the partnership, firm, or continuous Elder Law Attorneys	orporation and not related to any
Date of Report (chec	ck one):		
April 24, 2024 □	July 31, 2024 □	October 30, 2024	January 29, 2025
		ne Statement of Income and I tatement (insert the number of	Expenses described above, and the of Addendum forms being
1 Addendum A(s	3).		
_0 Addendum B(s).		
_0 Addendum C(s).		
I hereby swear or aff complete to the best	irm that the foregoing in of my knowledge and be	nformation on the Statement a	and each Addendum is true and
h	An		1/28/2025
(Signature of Lobby	rist		(Date)
Rowan K. Joyce	1		
(Print Name of lob	obyist)		