

## STATE OF NEW HAMPSHIRE

2025 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15) OCT 23 2025

NEW HAMPSHIRE
DEPARTMENT OF STATE

PLEASE PRINT

I. Name	of Lobbyist(s) JAMES PB	OULEY & JESSI	CA E ESKELA	ND
II. Nam	e of lobbyist's partnership, firm o	r corporation, if any:		
	NEHY & BOULEY GF			
	(Name of partnership, firm o		NO T	00004
17	DEPOT ST	CONCORD	NH	03301
	Address: (Street)	(Town/City)	. (State)	(Zip Code)
( )	603-228-1601 (Telephone)	(Fax)	e-mail	-
III. Thi	s statement covers: (Choose one – ble expense transactions which ar	file separate reports for e e not attributable to any o	ach client, OR you may ne client).	y file a separate report for
AIL	reportable transactions occurring in	the months prior to the repo	rting date relative to the	following client:
GRA	NITE STATE INDEPE			
	(Full Name of Client	as it appears on the Lobbyist R	egistration Form)	
	eportable transactions by the lobbying to any particular client.	st (including the lobbyist's f	amily), or the lobbying t	firm listed below which are
	te of Report April 30, 2025  cover: activity from date of registration  October 29, 2025  activity from 7/1/25 to 9/3	n to 3/31/25 activi	July 30, 2025  ty from 4/1/25 to 6/30/25  anuary 28, 2026  from 10/1/25 to 12/31/25	•—•
If this b	ere have been no fees received a lox is checked, complete just this for louse, Room 204, Concord, NH 0330	m and submit it to the Secre	actions made since th tary of State's Office, 10	ne last report.  77 North Main Street,
VI. Che	eck if additional reports are attac	hed:		
If y	ou have received fees or made experou have paid an honorarium or rein e Reimbursement	The state of the s		
-	you, your firm, or your family has m	ade political contributions,	you must file Addendur	m C-Political Contributions
	9			
I have r	Statement/Affirmation by Lobby read RSA 15, RSA 15-B, RSA 14-C nplete to the best of my knowledge	and RSA 664 and hereby s	wear or affirm that the fo	oregoing information is true
	By		10/14/25 (Date	
(Signa	fure of lobbyist)	-	(Date	e)
JAM	IES P BOULEY			
(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: DENNEY & BOULEY GROUP LLC				
Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any				
particular client): GRANITE STATE INDEPENDENT LIVING				
Date of Report (check one):				
April 30, 2025 □ July 30, 2025 □ October 29, 2025 □ January 28, 2026 □				
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):				
Addendum A(s)				
Addendum B(s)				
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.				
Office (Signature of lobbyist)  10/14/25 (Date)				
JESSICA E ESKELAND				
(Print Name of lobbyist)				