PLEASE PRINT

STATE OF NEW HAMPSHIRE

2019 Statement of Income and Expenses for LOBBYISTS

(RSA Chapter 15)

RECEIVED

APR 2 4 2019

RE TATE

I. Name of Lobbyist(s) Jooi Grinbilas, Adam Schmidt DEPARTMENT OF STATE
II. Name of lobbyist's partnership, firm or corporation, if any:
J. Grinbilus Strategic Solutions LLC. (Name of partnership, firm or corporation)
Obox 233 Business Address: (Street) (Town/City) (State) O 3884 (Zip Code)
(403) 496-2638 () e-mail Josephone) (Fax) e-mail Josephone)
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 months prior to the reporting date relative to the following client:
(Full Name of Client as it appears on the Lobbyist Registration Form)
OR 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, 2019
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, 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, RSA 14-C 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)
(Signature/of lobbyist) (Date) (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 CLC
Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any
particular client):
Date of Report (check one):
April 24, 2019 🖸 July 31, 2019 🗆 October 30, 2019 🗆 January 29, 2020 🗆
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.
(Signature of lobbyist) (Date)
Adam Schnoot
(Print Name of lobbyist)