

STATE OF NEW HAMPSHIRE

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

RECEIVED

MAY 08 2025

NEW HAMPSHIRE DEPARTMENT OF STATE

PLEASE PRINT

I. Name of L	obbyist(s) JAMES P E	BOULEY & JESSI	CA E ESKELA	ND
II. Name of l	obbyist's partnership, firm	or corporation, if any:	•	
DENNE	HY & BOULEY GF	ROUP LLC	·	
	(Name of partnership, firm		-	
17	DEPOT ST	CONCORD	NH	03301
Business Addr	ess: (Street)	(Town/City)	(State)	(Zip Code)
$($ $)$ $\frac{603}{(Te)}$	B-228-1601 (ephone))(Fax)	e-mail	
reportable e	ement covers: (Choose one - xpense transactions which a table transactions occurring in	re not attributable to any o	ne client).	•
	, –	-	ting date relative to the	ionowing chem.
GRANI	TE STATE INDEP		- Carlon Page N	
OR	(Full Name of Client	as it appears on the Lobbyist Ro	gistration Form)	
All report	able transactions by the lobby any particular client.	st (including the lobbyist's fa	mily), or the lobbying	firm listed below which are
IV. Date of l	Report April 30, 2025 activity from date of registrati October 29, 2025 activity from 7/1/25 to 9/3	In to 3/3 1/25 activit J.	July 30, 2025 by from 4/1/25 to 6/30/25 anuary 28, 2026 from 10/1/25 to 12/31/25	
If this box is	ave been no fees received checked, complete just this for Room 204, Concord, NH 033	m and submit it to the Secre	ctions made since th ary of State's Office, 10	le last report. 77 North Main Street,
VI. Check if	additional reports are attac	hed:		
If you ha	ive received fees or made exp	enditures, you must file Add	endum A– Fees and Ex	penses
If you hat Expense Rei	ive paid an honorarium or reir mbursement	nbursed expenses, you must	ile Addendum B – Rep	ort of Honorariums or
If you, y	our firm, or your family has n	nade political contributions, y	ou must file Addendur	n C- Political Contributions
I have read F and complete (Signature o	ement/Affirmation by Lobby ASA 15, RSA 15-B, RSA 14-C et of the best of my knowledge of lobbyist)	and RSA 664 and hereby sv	vear or affirm that the fo	
(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
Statem	ent 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
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.
Mhoreland 4/29/25 (Date)
JESSICA E ESKELAND
(Print Name of lobbyist)