

STATE OF NEW HAMPSHIRE

2021 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)



PLEASE PRINT

I. Name of Lobbyist(s) Kirby Thomas West

II. Name of lobbyist's partnership, firm or corporation, if any:

Institute for Justice

	(Name of partnership, firm or co	rporation)		
901	N. Glebe Rod, #900	Arlington	VA	22203
Business Address:	(Street)	(Town/City)	(State)	(Zip Code)
703 682-9320			_{e-mail} kwest@	ij.org
(Telepho	one)	(Fax)		

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:

Institute for Justice

OR

(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 Rep	oort April 28, 2021
Reports cover:	activity from clate of registration to 3/31/21
	October 27, 2021 activity from 7/1/21 to 9/30/21
	activity from 7/1/2] to 9730/21

July 28, 2021 activity from 4/1/21 to 6/30/21 January 26, 2022

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, 107 North Main Street, 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 lobbyist) **Kirby Thomas West**

(Print Name of lobbyist)

	STATE OF NEW HA. Lobbyists Fees and I Addendum (RSA Chapter 1	Expenses A	JAN 2 8 2022 NEW HAMPSHIRE DEPARTN ENT OF STA
I. Name of Lobbyist(s) Kirby Th	omas West		
II. Name of lobbyist's partnership Institute for Justice	, firm or corporation, if any:		
(Name of partnership, firm	or corporation)		
III. Name of Client Institute f	or Justice		
IV. Fees Received Indicate the gross amount of all fees re to lobbying, including fees for services including research, monitoring legislat reduced by any expenses:	such as public advocacy, government	relations, or public rel oss fee amount reports	lations services ed shall not be
a) Total of all fees received in this repo	rting period	a) \$ 0	
b) Total of all fees received this calend (This should equal the total of all p	lar year, prior to this reporting period rior monthly reports for this calendar ye	b) \$ <u>591.42</u>	
c) Total of all fees received to date (Add lines a and b)		_{c) \$} 591.42	
 Indicate the amount of any such fee yet been paid 	s that are due, but have not	d) \$_0	

b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.

c) Total of all itemized expenditures reported in detail in section VI.

b) \$	0
c) \$	192.00

 d) Total expenses for this reporting period (Add lines a, b and c) 	_{d) \$} 541.32
	e) \$
f) Total of all expenses year to date	ŋs <u>1,104.27</u>

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.

1771 00	
s_171.32	
s 20.68	
s	
\$	
\$\$	
\$\$	

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)

Kirby Thomas West

(Print Name of lobbyist)

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