

## 2022 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

PLEASE PRINT

I. Name of Lobbyist(s) Mallory Nug			
II. Name of lobbyist's partnership, firm of Everytown for Gun Safety A	or corporation, if any:		
(Name of partnership, firm o	cuon Fund		
PO Box 4184	· ·		
Business Address: (Street)	New York	NY	10163
6463248250	(Town/City)	(State)	(Zip Code)
(Telephone)	917-410-6932	e-mail	everytown.org
	(Fax)		
III. This statement covers: (Choose one – reportable expense transactions which are	waste to any of	ic chemij.	
All reportable transactions occurring in the Everytown for Gun Safety. Ac	tion Fund	•	following client:
OR (Full Name of Client as	s it appears on the Lobbyist Reg	gistration Form)	
All reportable transactions by the lobbyist inrelated to any particular client.	(including the lobbyist's fa	mily), or the lobbying f	irm listed below which are
Reports cover: activity from date of registrati October 26, 2022 activity from 7/1/22 to 9/3	on to 3/31/22 activity J 30/22 activity	fuly 27, 2022 from 4/1/22 to 6/30/22 fanuary 25, 2023 from 10/1/22 to 12/31/22	
7. There have been no fees received and this box is checked, complete just this form that House, Room 204, Concord, NH 03301.	d <b>`no reportablè transact</b> and submit it to the Secretar	ti <b>ons made since the</b> Y of State's Office, 107	làst report.  North Main Street,
I. Check if additional reports are attached	ł:		
If you have received fees or made expend	itures you must file Addon.	dum A. Fees and France	<b></b>
	rsed expenses, you must file	Addendum B-Repor	nses t of Wonorovinus
rpense Reimbursement  If you your firm or your family have a see		icpor	of Holloratiums of
If you, your firm, or your family has made	political contributions, you	must file Addendum (	C-Political Contributions
worn Statement/Affirmation by Lobbyist nave read RSA 15, RSA 15-B, RSA 14-C and d complete to the best of my knowledge and	RSA 664 and hereby swear	r or affirm that the foreg	going information is true
UK Mo		1/22/22	
ignature of lobbyist)		1/22/23	
allory Nugent		(Date)	
rint Name of lobbyist)			RECEIVE
			IAN 2 5 2023

NEW HAMPSHIRE DEPARTMENT OF STATE

## 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: Everytown for Gun Safety Action Fund
Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any particular client): Everytown for Gun Safety Action Fund
Date of Report (check one):
April 27, 2022
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). 1
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)
(Signature of lobbyist) (Date)
Samuel Levy
(Print Name of lobbyist)

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JAN **25** 2023

NEW HAMPSHIRE DEPARTMENT OF STATE



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## Lobbyists-Fees-and-Expenses-Addendum A

(RSA Chapter 15:6)

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**NEW HAMPSHIRE** DEPARTMENT OF STATE

I. Name of Lobbyist(s) Mallory Nugent, Samuel Levy

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

Everytown For Gun Safety Action Fund

(Name of partnership, firm or corporation)

III. Name of Client Everytown for Gun Safety Action Fund Date 1/22/23

### IV. Fees Received

Indicate the gross amount of all fees received from the client identified above that are related, directly or indirectly, to lobbying, including fees for services such as public advocacy, government relations, or public relations services including research, monitoring legislation, and related legal work. The gross fee amount reported shall not be reduced by any expenses:

a) Total of all fees received in this reporting period

- a) \$ no fees received
- b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year)
  - b) § no-fees-received-

c) Total of all fees received to date (Add lines a and b)

- c) \$ no fees received
- d) Indicate the amount of any such fees that are due, but have not yet been paid
- $_{d)}\ _{\$}$  no fees received

## V. Expenses:

Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to report all expenses made from lobbying fees: Separate reports are to be filed for expenditures made relative to each client and if expenditures are made by the lobbyist(s)/firm that are unrelated to any one client a separate report may be filed for the lobbyist(s)/firm. Expenses are to be reported in one of three categories of expenses: (a) the aggregate total of all expenses paid during the reporting period for salaries, benefits, support staff, and office expenses; (b) the aggregate total of all individual expenses where the expenditure was of \$25.00 or less (for example: meals purchased during a business lunch where the cost was \$25.00 or less, purchase of a pen with a value of less than \$10 that is given to the person being lobbied, purchase of a ceremonial object given to a person being lobbied with a value of \$25.00 or less); and (c) an itemized statement of each individual expenditure made during this reporting period of greater than \$25.00 for any purpose not covered by (a) (for example: purchase of a meal with value of greater than \$25, purchase of a ceremonial object to be given to the subject of lobbying with a value greater than \$25, but not greater than \$50, restaurant expenses for a legislative reception). Expenses for honorariums, expense reimbursement, or political contributions will be reported on separate addendums and should not be reported on Addendum A.

- a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.
- 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.
- a) \$ 40.44 b) \$ 10.27 c) \$ 21000.00

d) Total expenses for this reporting period (Add lines a, b and c)	<sub>d) \$</sub> 21050.71
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$ 65368.63
f) Total of all expenses year to date	ns 86419.34
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from loperiod, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
Demers & Prasol, Inc.	\$ 5000.00
Demers & Prasol, Inc.	\$ 8000.00
Demers & Prasol, Inc.	·
	<sub>\$</sub> 8000.00
	\$
	\$
	\$
Swow States at 100	
Sworn Statement/Affirmation by Lobbyist	1
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm is true and complete to the best of my knowledge and belief.	that the foregoing information
(Signature of lobbyist)	1/22/23
Mallory Nugent	(Date)
(Print Name of lobbyist).	

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JAN 25 2023

NEW HAMPSHIRE DEPARTMENT OF STATE

Lobbyists Report of Political Contributions Addendum C (RSA Chapter 15:6)

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JAN **25** 2023

)	I. Name of Lobbyist(s) Ma	allory Nugent, San	nuel Levy	NEW HAMPSHIRE DEPARTMENT OF STA
C	II. Name of lobbyist's pa	rtnership, firm or co	rporation, if any:	THE STATE OF STA
<u> </u>	Everytown for Gun S	afety Action Fund	•	
C	<del>-</del>	rtnership, firm or corporation)		
•	III. Name of Client Ever	ytown for Gun Saf	ety Action Fund	Date 1/22/23
X T	Political Contributions For each political contributions client/lobbyist and lobbyi		e pursuant to RSA Chapter ( collowing:	664 paid on behalf of the
	Full name of candidate:	Bradley	Amy	
	4	(Last Name)	(First Name)	(Middle Name/Initial)
	Amount of contribution \$	000	Office Candidate is Seeking _	tate Represenative
	Evil name of condidate.	Watters	David-	
	Full name of candidate:	Watters (Last Name)	David- (First Name)	(Middle Name/Initial)
	Full name of candidate:  Amount of contribution \$ 2	(Last Name)		(Middle Name/Initial) State Senate
	Amount of contribution \$ 2	(Last Name)  OOO  ind contribution, providentribution on the line above	(First Name)  Office Candidate is Seeking e a description of the goods or	State Senete
	Amount of contribution \$ 2  If the contribution is an in-k actual cost of the in-kind cost	(Last Name)  OOO  ind contribution, providentribution on the line above	(First Name)  Office Candidate is Seeking e a description of the goods or	State Senate services provided, and enter the
	Amount of contribution \$ 2  If the contribution is an in-k actual cost of the in-kind corenter an estimated value and full name of candidate:	(Last Name) OOO ind contribution, providentribution on the line about the word "estimate."	(First Name)  _ Office Candidate is Seeking e a description of the goods or ove for amount of contribution	State Senate services provided, and enter the

If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter the actual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not known, enter an estimated value and the word "estimate."
(If more than three contributions were made, report additional contributions on separate addendum C forms.)
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)  1/22/23
Mallory Nugent
(Print Name of lobbyist)

Lobbyists Report of Political Contributions Addendum C (RSA Chapter 15:6)

RECEIVED

P	I. Name of Lobbyist(s) Mallory	Nugent, S	Samuel Levy	JAN <b>25</b> 2023
L E	II. Name of lobbyist's partners	hin, firm o	corporation if any	NEW HAMPSHIRE DEPARTMENT OF STA
A S	Everytown for Gun Safety		•	
E	(Name of partnership,	firm or corporat	tion)	
P R	III. Name of Client Everytown	for Gun S	Safety Action Fund	Date 1/27/23
ı I	Political Contributions For each political contribution the client/lobbyist and lobbying firm	nat is reporta	able pursuant to RSA Chapter 60 ne following:	64 paid on behalf of the
	Full name of candidate: Fento		Donovan	
		(Last Name)	(First Name)	(Middle Name/Initial)
	Amount of contribution \$ 2000		Office Candidate is Seeking St	ate Senate
!	Full name of candidate: Tucke	er	Edith-	
	<del></del>	Last Name)		
	0000			(Middle Name/Initial)
	Amount of contribution \$ 2000		Office Candidate is Seeking	(Middle Name/Initial) State Representative
	Amount of contribution \$ \( \frac{2000}{the contribution is an in-kind contribution actual cost of the in-kind contribution enter an estimated value and the word	i on me une a	ide a description of the second	State Representative
	If the contribution is an in-kind contractual cost of the in-kind contribution enter an estimated value and the word	d "estimate."	ide a description of the goods or se above for amount of contribution.	State Representative
-	If the contribution is an in-kind contractual cost of the in-kind contribution enter an estimated value and the word	d "estimate."	ide a description of the goods or se above for amount of contribution.	State Representative

Lobbyists Report of Political Contributions Addendum C (RSA Chapter 15:6)

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1. I table of Lobbyist(s)	lory Nugent, Sa	muel Levy		JAN <b>2 5</b> 2023
II. Name of lobbyist's part				NEW HAMPSHIR DEPARTMENT OF S
Everytown for Gun Sar		-		
	nership, firm or corporation		<del> </del>	<del></del>
III. Name of Client Everyt	own for Gun Sa	fety Action Fund	Date	1/22/23
Political Contributions For each political contribut client/lobbyist and lobbying		le pursuant to RSA Chapter 6 following:	64 paid	on behalf of the
Full name of candidate:	/hitley	Becky		
	(Last Name)	(First Name)	•	Name/Initial)
Amount of contribution \$ 20	,00 	Office Candidate is Seeking S	tate S	enate
Full name of candidate: R	osenwald	Cindy-		
Full name of candidate:	(Last Name)	Cindy (First Name)	(Middle	Name/Initial)
Full name of candidate: R  Amount of contribution \$ 20	(Last Name)	<u> </u>	Ctata	Name/Initial) Senate
Amount of contribution \$ \frac{20}{100}\$  If the contribution is an in-kin	(Last Name)  OOO  d contribution, proviribution on the line a	(First Name)	State	Senate provided, and enter the
Amount of contribution \$ \frac{20}{\text{s}}\$  If the contribution is an in-kin actual cost of the in-kind contribution is an in-kind contribution.	(Last Name) 1000  Id contribution, proviribution on the line a he word "estimate."  Trisciani	(First Name)  Office Candidate is Seeking de a description of the goods or above for amount of contribution.  June	State services j If the ad	Senate  provided, and enter the ctual cost is not known,
Amount of contribution \$ 20  If the contribution is an in-kin actual cost of the in-kind cont enter an estimated value and t  Full name of candidate:	(Last Name)  OOO  d contribution, proviribution on the line a he word "estimate."	(First Name)  Office Candidate is Seeking  de a description of the goods or amount of contribution.	State services j If the ad	Senate provided, and enter the

If more than three contributions were made, report add	ditional contributions on separate addendum C forms.)
•	•
Sworn Statement/Affirmation by Lobbyist	
	4 and hereby swear or affirm that the foregoing information
s true and complete to the best of my knowle	edge and belief.
and Marie	1100100
MLAV (Signature of lobbyist)	
(Signature of lobbyist)  Mallory Nugent	
, ,	
Mallory Nugent	
Mallory Nugent	1122/23 (Date)
Mallory Nugent	
Mallory Nugent	1122/23 (Date)

Amount of contribution \$ 1000

## STATE OF NEW HAMPSHIRE

Lobbyists-Report-of-Political Contributions Addendum C (RSA Chapter 15:6)

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		(22012 Chapter 1010	
I. Name of Lobbyist(s) Mal	ory Nugent, Sa	amuel <sup>-</sup> Levy <sup>-</sup>	JAN <b>25</b> 2023
II. Name of lobbyist's part			NEW HAMPSHIRE DEPARTMENT OF ST
Everytown for Gun Sat		•	
	ership, firm or corporati		
III. Name of Client Everyto	own for Gun S	afety Action Fund	Date 1/22/23
Political Contributions For each political contribution client/lobbyist and lobbying	on that is reportal	ble pursuant to RSA Chapter e following:	664 paid on behalf of the
Full name of candidate:	handley	Shannon	
00	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$ 20	00-	_ Office Candidate is Seeking	State Senate
Full name of candidate:	entiss	Sue	
	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$ 20	<u> </u>	Office Candidate is Seeking	State Senate
If the contribution is an in-kind	I contribution, provibution on the line	above for amount of contribution	r services provided, and enter the
Full name of candidate:	Haubner	Wayne	
	(Last Name)	(First Name)	(Middle Name/Initial)

Office Candidate is Seeking\_State Senate

enter an estimated value a	kind contribution, provide a description of the goods or services provided, and e ontribution on the line above for amount of contribution. If the actual cost is not did the word "estimate."
ac .	
(If more than three contributi	ns were made, report additional contributions on separate addendum C forms.)
Sworn Statement/Affir	
I have read RSA 15, RS is true and complete to t	A 15-B and RSA 664 and hereby swear or affirm that the foregoing informed best of my knowledge and belief.
MIAns	-
(Signature of lobbyist)	1/22/23
Mallory Nugent	(Date)

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## STATE OF NEW HAMPSHIRE

Lobbyists Report of Political Contributions Addendum C (RSA Chapter 15:6)

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P I. Name of Lobbyist(s) Mal	lory Nugent, Sa	muel Levy		JAN <b>25</b> 2023
E II. Name of lobbyist's part	nership, firm or c	Ornoration if any		NEW HAMPSHIRE DEPARTMENT OF STA
Everytown for Gun Sat	fety Action Fund	- portuion, it any.		
(Name of partn	ership, firm or corporation	)		
III. Name of Client Everyt			Date	1/22/23
Political Contributions				
For each political contributi	on that is reportable	e pursuant to RSA Chapter	664 pai	d on behalf of the
client/lobbyist and lobbying	firm, indicate the	following:	P.	ar on contain of the
Full name of candidate:	obinson	John		
100	(Last Name)	(First Name)		lle Name/Initial)
Amount of contribution \$ 100		Office Candidate is Seeking	State	Senate
actual cost of the in-kind contri enter an estimated value and the Full name of candidate:	Newman	Raymond-		
mand of candidate.	(Last Name)	(First Name)	() (° 1.11	N
Amount of contribution \$ 100	0	Office Candidate is Seeking	<b>.</b>	e Name/Initial)
		candidate 13 DCCKIIB		Representative
If the contribution is an in-kind of actual cost of the in-kind contribenter an estimated value and the		-1 1.1		
		-1 1.1		
		-1 1.1		
	Larson (Last Name)	a description of the goods or ve for amount of contribution	services If the a	

If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter the actual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not known, enter an estimated value and the word "estimate."
If more than three contribution
If more than three contributions were made, report additional contributions on separate addendum C forms.)
Sworn Statement/Affirmation by Lobbyist
have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm that the foregoing information strue and complete to the best of my knowledge and belief.
MlMF 1/22/23
Signature of lobbyist)  [Date]
Mallory Nugent
Print Name of lobbyist)
• •

## STATE OF NEW HAMPSHIRE

**Lobbyists Report of Political Contributions** Addendum C (RSA Chapter 15:6)

RECEIVED

JAN 25 2023

I. Name of Lobbyist(s) Ma	allory Nugent, San	nuel Levy		NEW HAMPSHIRE
II. Name of lobbyist's par	rtnership, firm or co	rporation, if any		DEPARTMENT OF ST
Everytown for Gun Sa		-portations in any.		
	tnership, firm or corporation)		- · · · · · · · ·	
III. Name of Client Every	town for Gun Saf	ety Action Fund	Date	1/22/23
Political Contributions For each political contributions client/lobbyist and lobbyir	tion that is reportable	e pursuant to RSA Chapter old old owing:	664 paid	on behalf of the
Full name of candidate:	Newman	Sue		
10	(Last Name)	(First Name)	-	Name/Initial)
Amount of contribution \$ 10		Office Candidate is Seeking _	tate Rep	resentative
enter an estimated value and	the word "estimate."	ove for amount of contribution	. If the a	ctual cost is not known,
enter an estimated varue and	the word "estimate."		. If the a	ctual cost is not known,
Full name of candidate:	Horrigan (Last Name)	Timothy  (First Name)		
enter an estimated varie and	Horrigan (Last Name)	Timothy <sup>-</sup>	(Middle	Name/Initial) Representative
Full name of candidate:	Horrigan (Last Name)  OOO  ad contribution, provide ribution on the line abo	Timothy  (First Name)  Office Candidate is Seeking	(Middle State	Name/Initial) Representative
Full name of candidate:  Amount of contribution \$ 10  If the contribution is an in-kin actual cost of the in-kind contribution contribution is an in-kind contribution in-kind co	Horrigan (Last Name)  OOO  Id contribution, provide ribution on the line about word "estimate."  Marsh	Timothy  (First Name)  Office Candidate is Seeking	(Middle State	Name/Initial) Representative
Full name of candidate:  Amount of contribution \$ 10  If the contribution is an in-kin actual cost of the in-kind cont enter an estimated value and t	Horrigan (Last Name)  OOO  Id contribution, provide ribution on the line about word "estimate."  Marsh (Last Name)	Timothy  (First Name)  Office Candidate is Seeking a description of the goods or ove for amount of contribution	(Middle State   services p If the ac	Name/Initial) Representative

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the foregoing information
22/23
(Date)

Lobbyists-Report-of-**Political Contributions** Addendum C (RSA Chapter 15:6)

JAN 25 2023 TE

I. Name of Lobbyist(s)	lallory Nugent, San	nuel Levy		07-11 2 J 2023
II. Name of lobbyist's n	ortnorship time			NEW HAMPSHIRE DEPARTMENT OF STA
= 1 1 10 2 3 13 с 5 р		rporation, if any:	£	THE OF SI
Everytown for Gun (Name of p	safety Action Fund			
	partnership, firm or corporation)			
III. Name of Client Eve	rytown for Gun Safe	ety Action Fund	Date _	1/22/23
<b>Political Contributions</b>				
For each political contrib	oution that is reportable	pursuant to RSA Chapter	664 pai	d on hehalf of the
client/lobbyist and lobby	ing firm, indicate the fo	ollowing:	per.	a on bonari of the
Full name of candidate:	New Hampshire	Senate Democrati	ic Cau	cus
	(Last Name)	(First Name)	(Midd	le Name/Initial)
Amount of contribution \$	1 <b>0000</b> -	Office Candidate is Seeking	N/A	
actual cost of the in-kind co	ind contribution, provide	a description of the goods of	r services	provided, and enter the
enter an estimated value and	maroundi di me ime and	ve for amount of contribution	n. If the	actual cost is not known,
	obulitatio.			
			_	
The state of the s				
Full name of candidate:	New Hampshire Ho	use Democratic Victo	rv Cam	maion.
	(Last Name)	(First Name)		Name/Initial)
Amount of contribution \$ _1	5000	•		Name/mual)
		Office Candidate is Seeking		
If the contribution is an in-ki	nd contribution, provide	a description of the goods or	services	provided and enter the
actual cost of the in-kind cor enter an estimated value and	miodion on the line abov	e for amount of contribution	. If the a	ctual cost is not known,
The state of the s	the word estimate.			
·				
			<del></del>	
Full name of candidate:	Madam	e President PAC		
	(Last Name)	(First Name)		Name/Initial)
Amount of contribution \$ 10	0000	•		- · ··································
		Office Candidate is Seeking	14/7	

(If more than three contribution	s were made, report additional cont	ributions on separate addendum C forms.)
Sworn Statement/Affirm		addonutin C forms.)
I have read RSA 15, RSA is true and complete to the	15-B and RSA 664 and here best of my knowledge and b	by swear or affirm that the foregoing infelief.
(Signature of lobbyist)		1122-123
Mallory Nugent		(Date)
(Print Name of lobbyist)		