1115

STATE OF NEW HAMPSHIRE

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

PLEASE PRINT

I. Name of Lobbyist(s) Troy Ste	venson, Case	y Pick	·
II. Name of lobbyist's partnership, firm	or corporation, if any:	·	
The Trevor Project			
(Name of partnership, firm			
P.O. Box 69232		ywood CA	90069
Business Address: (Street)	(Town/City)	(State)	(Zip Code)
$(-) \frac{646-456-3605}{(\text{Telephone})}$) <u>IN/A</u>	TheTrevorProjectl	Lobbying@Venable.com
(Telephone)	(Fax)	•	
III. This statement covers: (Choose one	- file separate reports f	or each client, OR you may	file a separate report for
reportable expense transactions which	are not attributable to a	ny one chent).	
All reportable transactions occurring	in the months prior to the	reporting date relative to the	following client:
The Trevor Project			
	nt as it appears on the Lobby	ist Registration Form)	
OR			
All reportable transactions by the lobbunrelated to any particular client.	yist (including the lobbyi	st's family), or the lobbying f	firm listed below which are
IV. Date of Report April 27, 2022		July 27, 2022	
Reports cover: activity from date of regis	stration to 3/31/22	activity from 4/1/22 to 6/30/22	
October 26, 202	· · · · · · · · · · · · · · · · · · ·	January 25, 2023	
activity from 7/1/22	to 9/30/22	activity from 10/1/22 to 12/31/2	2
V. There have been no fees received If this box is checked, complete just this f State House, Room 204, Concord, NH 03	form and submit it to the S	ansactions made since the ecretary of State's Office, 10	e last report.
VI. Check if additional reports are atta	iched:		
If you have received fees or made ex		Addendum A-Fees and Exp	penses
If you have paid an honorarium or re	imbursed expenses, you n	nust file Addendum B - Repo	ort of Honorariums or
Expense Reimbursement If you, your firm, or your family has	made political contribution	ons vou must file Addendum	C-Political Contributions
		ns, you must mo raddondur	a o Tomour Commons
Sworn Statement/Affirmation by Lobb I have read RSA 15, RSA 15-B, RSA 14 and complete to the best of my knowledge	-C and RSA 664 and here	by swear or affirm that the fo	
	,		<u>о</u> п
(Signature of lobbyist)		(Date	CEIVED
Troy Stevenson		`	ECEIVE UL 2.9 202
(Print Name of lobbyist)			
(1 mm 1 mine of 1000 y ms)			
•			

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/Attirmation by Lobbyist Statement of Income and Expenses for:
Name of Lobbying partnership, firm, or corporation: The Trevor Project
Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any particular client): The Trevor Project
particular chent).
Date of Report (check one):
April 27, 2022 July 27, 2022 October 26, 2022 January 25, 2023
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 an complete to the best of my knowledge and belief.
Casey Pick Casey Pick (Jul 25, 2022 15:45 PDT) 7/26/2022
(Signature of lobbyist) (Date)
Casey Pick
(Print Name of lobbyist)

STATE OF NEW HAMPSHIRE

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

PLEASE PRINT

I. Name of Lobbyist(s)	nson, Casey Pick	·	· ·
II. Name of lobbyist's partnership, fir	rm or corporation, if any:		
The Trevor Project			
(Name of partnership, fi	irm or corporation)	<u> </u>	
P.O. Box 692;	West Hollywood	CA	90069
Business Address: (Street)	(Town/City)	(State)	(Zip Code)
646-456-3605	() N/A	e-mail TheTrevorProjectLobby	
(Telephone)	(Fax)		
III. This statement covers: (Choose o reportable expense transactions which All reportable transactions occurring	h are not attributable to any one	e client).	
The Trevor Project			
(Full Name of C	lient as it appears on the Lobbyist Reg	istration Form)	
<u>OR</u>			
All reportable transactions by the lounrelated to any particular client.	bbyist (including the lobbyist's far	nily), or the lobbying	firm listed below which are
IV. Date of Report April 27, 2022 Reports cover: activity from date of reports cover: activity from date of reports activity from 7/1/2 V. There have been no fees receive If this box is checked, complete just this State House, Room 204, Concord, NH VI. Check if additional reports are a If you have received fees or made If you have paid an honorarium or Expense Reimbursement If you, your firm, or your family have	gistration to 3/31/22 activity 22 2 2 activity 22 to 9/30/22 activity 22 to 9/30/22 activity 23 activity 24 and no reportable transact 25 form and submit it to the Secreta 26 03301. 27 ttached: 28 expenditures, you must file Adder 29 reimbursed expenses, you must file	ry of State's Office, 10 dum A– Fees and Explee Addendum B– Rep	penses ort of Honorariums or
Sworn Statement/Affirmation by Lo I have read RSA 15, RSA 15-B, RSA 1 and complete to the best of my knowle (Signature of lobby st) Troy Stevenson	14-C and RSA 664 and hereby swe	ear or affirm that the fo	
(Print Name of lobbyist)			