

STATE OF NEW HAMPSHIRE

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

PLEASE PRINT

I. Name of Lobbyist(s)	n, Casey Pick		
II. Name of lobbyist's partnership, firm o	r corporation, if any:		
The Trevor Project			
(Name of partnership, firm or	r corporation)		
P.O. Box 69232	West Hollywood	CA	90069
Business Address: (Street)	(Town/City)	(State)	(Zip Code)
() 646-456-3605 (Telephone)	<u>N/A</u>	e-mail <u>TheTrevorProje</u>	ctLobbying@venable.com
(Telephone)	(Fax)		
III. This statement covers: (Choose one – reportable expense transactions which are	e not attributable to any one	client).	
 All reportable transactions occurring in the Trevor Project 	the months prior to the reporti	ng date relative to the foll	owing client:
-	s it appears on the Lobbyist Regi	stration Form)	
OR	is it appears on the Lobbyist Kegi	stration Form)	
All reportable transactions by the lobbyis unrelated to any particular client.	st (including the lobbyist's fam	nily), or the lobbying firm	listed below which are
IV. Date of Report April 27, 2022 Reports cover: activity from date of registra. October 26, 2022 activity from 7/1/22 to 9	tion to 3/31/22 activity f	rom 4/1/22 to 6/30/22 anuary 25, 2023 from 10/1/22 to 12/31/22	
V. There have been no fees received an If this box is checked, complete just this form State House, Room 204, Concord, NH 0330	n and submit it to the Secretar		
VI. Check if additional reports are attached If you have received fees or made expended if you have paid an honorarium or reimbed Expense Reimbursement If you, your firm, or your family has ma	nditures, you must file Addend oursed expenses, you must file	Addendum B- Report o	f Honorariums or
Sworn Statement/Affirmation by Lobbyis I have read RSA 15, RSA 15-B, RSA 14-C a and complete to the best of my knowledge an	and RSA 664 and hereby swea nd belief.		ing information is true
185		18/2023	
(Signature of lobbyist)		(Date)	
Troy Stevenson			RECEIVED
(Print Name of lobbyist)	61		l
			JAN 25 2023

NEW HAMPSHIPZ

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 corporatio	n: The Trevor Project
	partnership, firm, or corporation and not related to any
Date of Report (check one):	
April 27, 2022 July 27, 2022 O	ctober 26, 2022
	atement of Income and Expenses described above, and atement (insert the number of Addendum forms being
Addendum A(s).	
Addendum B(s).	
Addendum C(s). 0	
I hereby swear or affirm that the foregoing inform complete to the best of my knowledge and belief.	ation on the Statement and each Addendum is true and
assertists	1/18/2023
(Signature of loub) ist)	(Date)
Casey Pick	
(Print Name of lobbyist)	RECEIVED
	JAN 2 5 2023
	NEW HAMPSHIRE