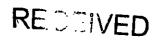


#### STATE OF NEW HAMPSHIRE

#### 2019 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)



MAY 0 2 2019

PLEASE PRINT

NEW HAMPSHIRE DEPARTMENT OF STATE

1. Name of Lobbyist(s	) Sam Levy, Mallory Nugent	<del></del>	
II. Name of lobbyist's	partnership, firm or corporation, if	any:	
Everytown for Gun	Safety Action Fund		
(Nam	e of partnership, firm or corporation)		<u> </u>
PO Box 4184	New York	. NY	10163
Business Address: (Stre		(State)	(Zip Code)
(646) 324-8250	(917)410-6932	c-mail Johbyred	@everytown.org
(Telephone)	(Fa	(x)	agovery.ourn.org
III. This statement co- reportable expense tra	vers: (Choose one – file separate rep insactions which are not attributable	orts for each client, OR you ma e to any one client).	ry file a separate report for
X All reportable trans	actions occurring in the months prior t	o the reporting date relative to th	e following client:
Everytown for Gun	Safety Action Fund	•	
	(Full Name of Client as it appears on the	Lobbyist Registration Form)	
OR			
unrelated to any particu	ections by the lobbyist (including the le lar client.	obbyist's family), or the lobbying	; firm listed below which are
IV. Date of Report Reports cover: activit	April 24, 2019 🕅  y from date of registration to 3/31/19	July 31, 2019 [] activity from 4/1/19 to 6/30/19	
a	October 30, 2019   ctivity from 7/1/19 to 9/30/19	January 29, 2020 [] activity from 10/1/19 to 12/31/	(19
V. There have been If this box is checked, co Concord, NH 03301.	no fees received and no reportab complete just this form and submit it to	le transactions made since the secretary of State's Office, So	he last report.   Grant House, Room 204,
VI. Check if additiona	reports are attached:		
	d fees or made expenditures, you must	file Addendum A- Fees and Ex	penses .
□ - If you have paid an Expense Reimbursemer	honorarium or reimbursed expenses, y	you must file Addendum B- Rep	port of Honorariums or
X If you, your firm, o	r your family has made political contri	butions, you must file Addendu	m C- Political Contributions
Sworn Statement/Affin I have read RSA 15, RS and complete to the bes	rmation by Lobbyist A 15-B, RSA 14-C and RSA 664 and t of my knowledge and belief.	hereby swear or affirm that the fo	oregoing information is true
(Signature of lobbyist)		(Date	e)
. Mallory Nugent			
(Print Name of lobbyis	1)		

# PLEASE PRIN

#### STATE OF NEW HAMPSHIRE

# Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s) Sam Levy, Mallory Nugent	<u>·</u>
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
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The greduced by any expenses:	nt relations, or public relations service
a) Total of all fees received in this reporting period	a) \$ <u>31,430.12</u>
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	b) \$ <u>0.00</u> year)
c) Total of all fees received to date (Add lines a and b)	c) \$ <u>31.430.12</u>
<ul> <li>d) Indicate the amount of any such fees that are due, but have not yet been paid</li> </ul>	d) \$ <u>0.00</u>
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to refees. Separate reports are to be filed for expenditures made relative to each the lobbyist(s)/firm that are unrelated to any one client a separate report Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office of individual expenses where the expenditure was of \$25.00 or less (for examplunch where the cost was \$25.00 or less, purchase of a pen with a value of being lobbied, purchase of a ceremonial object given to a person being lobbied; an itemized statement of each individual expenditure made during this repany purpose not covered by (a) (for example; purchase of a meal with value grean person being lobbied; and itemized statement of each individual expenditure made during this repany purpose not covered by (a) (for example; purchase of a meal with value grean person lobby to be given to the subject of lobbying with a value grean restaurant expenses for a legislative reception). Expenses for honorarium contributions will be reported on separate addendums and should not be reported.	client and if expenditures are made by may be filed for the lobbyist(s)/firm ne aggregate total of all expenses paid expenses; (b) the aggregate total of all ple: meals purchased during a businesses than \$10 that is given to the person iced with a value of \$25.00 or less); and porting period of greater than \$25.00 folue of greater than \$25, purchase of a ter than \$25, but not greater than \$50 s, expense reimbursement, or political
<ul><li>a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.</li><li>b) Total aggregate of expenditures during this reporting period, not reported</li></ul>	a) \$ <u>8,930.12</u>
in a), of \$25 or less.	b) \$ <u>0.00</u>
c) Total of all itemized expenditures reported in detail in section VI.	c) \$ 22,500.00

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$ <u>31,430.12</u>
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)	c) \$ <u>0.00</u>
f) Total of all expenses year to date	0 \$ 31,430.12
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from leperiod, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
Demers, Blaisdell & Prasol Inc.	\$22,500.00
	\$
	\$
	\$
	\$
	\$
•	
Sworn Statement/Affirmation by Lobbyist	
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.	n that the foregoing information
(Signature of lobbyish)	4/20/19 (Date)
Mallory Nugent	
(Print Name of lobbyist)	



## STATE OF NEW HAMPSHIRE

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

I. Name of Lobbyist(s) Sam I	evy, Mallory Nuc	gent	
II. Name of lobbyist's partne	ership, firm or co	rporation, if any:	
Everytown for Gun Safety			
	thip, firm or corporation)		
III. Name of Client Everytow	n for Gun Safety	Action Fund	Date
Political Contributions For each political contribution client/lobbyist and lobbying f			eter 664 paid on behalf of the
Full name of candidate:	Morgan	Jon	
	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$	- 1,000	Office Candidate is	s Seeking State Senate - 23
If the contribution is an in-kind of actual cost of the in-kind contribution and the enter an estimated value and the NOTE: EGSAF made a	ution on the line abo word "estimate."	ve for amount of contribu	Is or services provided, and enter the ation. If the actual cost is not known,
designated for the Gene		· · · · · · · · · · · · · · · · · · ·	
The net contribution is \$6	0.00.		
Full name of candidate: Nev	w Hampshire Se	enate Democratic C	Caucus
	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$ 1,00	)0	Office Candidate is	Seeking N/A
	ution on the line abo		ls or services provided, and enter the actual cost is not known,
N/A	<u> </u>		
Full name of candidate:			
i dii ilaine di candidate.	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$			

(If more than three contributions were made, report additional ec	ontributions on separate addendum C forms.)
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and he is true and complete to the best of my knowledge and (Signature of lobbyist)	reby swear or affirm that the foregoing inform I belief.
Mallory Nugent (Print Name of lobbyist)	
(Fine Name of 1000yist)	

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### 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.

(Print Name of lobbyist)

	ffirmation by Lobby e and Expenses for:		
Name of Lobbying par	tnership, firm, or corpo	oration; Everytown for Gun	Safety Action Fund
Name of Client (leave	blank if Statement is fo	or the partnership, firm, or	corporation and not related to any
particular client): <u>Eve</u>	rytown for Gun Safety Act	ion Fund	
Date of Report (check	one):		
April 24, 2019 🍑	July 31, 2019 🗆	October 30, 2019  .	January 29, 2020 □
the following Addendi submitted):	ums submitted with the	ne Statement of Income ar at Statement (insert the nu	nd Expenses described above, and umber of Addendum forms being
Addendum A(s	s).		
Addendum B(s	s).		
Addendum C(s	<b>s)</b> .		
I hereby swear or affin complete to the best of (Signature of lobbyist)	m that the foregoing in my knowledge and bel	formation on the Statemer ief.	and each Addendum is true and
Sam Levv			