

STATE OF NEW HAMPSHIRE 2019 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

RECEIVED JAN 2 9 2020 **NEW HAMPSHIRE** 

DEPARTMENT OF STATE

PLEASE PRINT

I. Name of Lobbyist(s) Stuart D. Trachy

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

(Name of partn	ership, firm or corporation)		, <u> </u>
Two Eagle Square, Suite 300	Concord	NH	03301
Business Address: (Street)	(Town/City)	(State)	(Zip Code)
(603)520-0822	(603)	email strachy@aol.com	
(Telephone)	(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:

## NH Chapter – National Assoc. of Social Workers

(Full Name of Client as it appears on the Lobbyist Registration Form)

 $\overline{\Box}$  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 Report** April 24, 2019 🔲 Reports cover: activity from date of registration to 3/31/19 October 30, 2019 activity from 7/1/19 to 9/30/19

July 31, 2019 🔲 activity from 4/1/19 to 6/30/19 January 29, 2020 🔼 activity from 10/1/19 to 12/31/19

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, 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 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)

Stuart D. Trachy

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(Print Name of lobbyist)