

STATE OF NEW HAMPSHIRE

2024 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

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JUL 3 0 2024

NEW HAMPSHIRE DEPARTMENT OF STATE

PLEASE PRINT

I. Name of Lobbyist(s) C.Jay Coles			
II. Name of lobbyist's partnership, firm Verified Voting Foundation	or corporation, if any:		
(Name of partnership, firm	or corporation)		_
1500 Chestnut St #231	5 Philadelphia	PA	تـ1910 2
Business Address: (Street)	(Town/City)	(State)	(Zip Code)
760-8048683	`	info@veri e-mail	ifiedvoting.org
(Telephone)	(Fax)	с-шан	-
III. This statement covers: (Choose one reportable expense transactions which a			y file a separate report for
All reportable transactions occurring in	the months prior to the rep	orting date relative to the	following client:
Verified Voting Foundation			
(Full Name of Client	as it appears on the Lobbyist F	Registration Form)	
All reportable transactions by the lobby unrelated to any particular client.	ist (including the lobbyist's	family), or the lobbying	firm listed below which are
IV. Date of Report April 24, 2024 Reports cover: activity from date of registrati October 30, 2024 activity from 7/1/24 to 9/3 V. There have been no fees received:	30/24 activity and no reportable trans		
If this box is checked, complete just this for State House, Room 204, Concord, NH 0336	01.	nary of State's Office, 10	ii Norin Main Sireei,
VI. Check if additional reports are attac		landon A. Francis Fra	
If you have received fees or made experimental If you have paid an honorarium or rein Expense Reimbursement			
If you, your firm, or your family has m	ade political contributions,	you must file Addendur	n C- Political Contributions
Sworn Statement/Affirmation by Lobby: I have read RSA 15, RSA 15-B, RSA 14-C and complete to the best of my knowledge	and RSA 664 and hereby s	wear or affirm that the fo	oregoing information is true
C.: Jay Coles (Jul 22, 2024 12:32 MDT)		07/22/2024	
(Signature of lobbyist)		(Date)
C.Jay Coles			
(Print Name of lobbyist)			

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STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A

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NEW HAMPSHIRE DEPARTMENT OF STATE

(RSA Chapter 15:6)

II. Name of lobbyist's partnership, firm or corporation, if any: Verified Voting Foundation	
(Name of partnership, firm or corporation)	N .
III. Name of Client Verified Voting Foundation	Date 07/22/2024
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, governmen including research, monitoring legislation, and related legal work. The gr reduced by any expenses:	t relations, or public relations service
a) Total of all fees received in this reporting period	a) \$
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 y	b) \$_0
c) Total of all fees received to date	0
(Add lines a and b)	c) \$
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$
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 of 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 exindividual expenses where the expenditure was of \$25.00 or less (for examplement where the cost was \$25.00 or less, purchase of a pen with a value of lebeing lobbied, purchase of a ceremonial object given to a person being lobbied (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greate restaurant expenses for a legislative reception). Expenses for honorariums contributions will be reported on separate addendums and should not be reported.	client and if expenditures are made be may be filed for the lobbyist(s)/firm e aggregate total of all expenses pai expenses; (b) the aggregate total of a le: meals purchased during a busines so than \$10 that is given to the perso ed with a value of \$25.00 or less); an orting period of greater than \$25.00 for the of greater than \$25, purchase of er than \$25, but not greater than \$50, expense reimbursement, or politics
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	a) \$ <u>0</u>
in a), of \$25 or less.	b) \$
c) Total of all itemized expenditures reported in detail in section VI.	c) \$

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$
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)\$
f) Total of all expenses year to date	f)\$ 319.28
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:
	\$
	\$
	\$
	\$
	\$
	\$
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.	m that the foregoing information
C. Jay Coles (Jul 22, 2024 12:13 MOT)	07/22/2024
(Signature of lobbyist)	(Date)
C.Jay Coles	
(Print Name of lobbyist)	