

STATE OF NEW HAMPSHIRE

Honorarium or Expense Reimbursement Report (RSA 14-C)
For Legislators and Legislative Employees



Type or Print all Information Clearly:

Name: HOWARD PEARL Work Phone #: 603 271 3066
First Middle Last

Work Address: 107 N MAIN ST CONCORD NH 03301

Office/Appointment/Employment held: STATE SENATE

Source of Expense Reimbursement, Honorarium, Ticket or Free Admission, or Meals and/or Beverages

List the full name, post office address, occupation, and principal place of business, if any, of the source of any reportable expense reimbursement, honorarium, ticket or free admission to a political, charitable, or ceremonial event, or meals or beverages consumed at a meeting or event, the purpose of which is to discuss official business, with a value greater than \$50.

If the source is an Individual:

Name of Source:
First Middle Last

Post Office Address:

Occupation:

Principal Place of Business:

If the source is a Corporation or other Entity:

Name of Corporation or Entity: CSG

Name of Person Representing the Corporation/Entity: JESSICA THOMAS

Work Address of Person Representing the Corporation/Entity: 1776 AVENUE OF STATES LEXINGTON KY

I am reporting:

[X] An Expense Reimbursement with value over \$50.00. (For costs that are waived, forgiven, reduced, prepaid, or reimbursed by a third party (other than the General Court) for attendance at a qualified event, pursuant RSA 14-C:2, III.)

Value of Expense Reimbursement: 279.50 Date Received: If exact value is unknown, provide an estimate of the value of the gift or honorarium and identify the value as an estimate. [X] Exact [] Estimate

[X] An Honorarium with value over \$50.00. (For payment from third parties for an appearance, speech, written article or other document, service as a consultant or advisor, or participation in a discussion group or similar activities related to legislative matters, pursuant to RSA 14-C:2, V.)

Value of Honorarium: 500.00 Date Received: If exact value is unknown, provide an estimate of the value of the gift or honorarium and identify the value as an estimate. [] Exact [X] Estimate

[] A ticket or free admission to a political, charitable, or ceremonial event with value over \$50.00. (Pursuant to RSA 14-C:4, I.)

[] Meals and/or beverages consumed at a meeting or event the purpose of which is to discuss official business with value over \$50.00. (Pursuant to RSA 14-C:4, II.)

[] A Donation to a State or National Legislative Association Event. (Pursuant to RSA 14-C:2, IV(b)(15).)

TURN OVER TO CONTINUE

For a report relating to an Expense Reimbursement or Honorarium, you are required to attach a copy of the agenda or an equivalent document which addresses the subjects addressed and the time schedule of all activities at the event. Indicate below the names of the sponsors of activities in cases where they are not indicated on the agenda or equivalent document.

Provide a brief description of the service or event that gave rise to this Expense Reimbursement, Honorarium, ticket or free admission to a political, charitable, or celebratory event, or meals or beverages.

CSG FORUM ON DENTAL COMPACT

Source of a Donation to a State or National Legislative Association Event

Provide an itemized report of all individuals, corporations, or other entities from whom you received a donation on behalf of a state or national legislative association event.

Full Name of Donator	Post Office Address	Value of Donation	Date Received	Name of Legislative Association

(Attach Additional Sheets if Necessary)


"I have read RSA 14-C and hereby swear or affirm that the foregoing information is true and complete to the best of my knowledge and belief."



SIGNATURE OF FILER

10/20/23
DATE FILED

RSA 14-C:7 Penalty. Any person who knowingly fails to comply with the provisions of this chapter or knowingly files a false report shall be guilty of a misdemeanor. Please provide the following information about the person filing this report.

This information will not be made public:

Home Phone 

 STREET TOWN/CITY ZIP

Mailing Address if different: _____

E-mail Address: _____

Return to: Secretary of State's Office, State House Room 204, Concord, NH 03301

DDH Dentist and Dental Hygienist Compact

Dentist and Dental Hygienist Compact Legislative Summit
September 12, 2023. 9:00 AM – 3:00 PM
Hall of the States. 444 N Capitol St. NW. Washington, DC 20001
Room 235

Welcoming Remarks <i>The Council of State Governments</i>	9:00 AM
The Department of Defense Perspective <i>Tammie Perrault, Defense State Liaison Office</i>	9:05 AM
Current State of Dental Licensure <i>Dr. Meg Strotman, American Dental Association</i> <i>Sarah Ostrander, American Dental Association</i>	9:15 AM
Overview of the Dentist and Dental Hygienist Compact <i>Matt Shafer, The Council of State Governments</i>	9:45 AM
Break	10:45 AM
Addressing Compact Misinformation <i>Samantha Nance, EMWN Law</i>	11:00 AM
Lunch	12:00 PM
Trends in Oral Health Workforce <i>Dr. Marko Vujicic, American Dental Association</i>	1:00 PM
Compact Perspectives <i>Rep. Michelle Caldier, Washington House of Representatives</i> <i>Bridgett Anderson, Minnesota Board of Dentistry</i> <i>Susan Melton, Tennessee Dental Hygiene Association</i> <i>Dr. Joseph Crowley, Past President- American Dental Association</i>	1:30 PM
Break	2:30 PM
Overview of Compact Resources; Adjourn <i>Jessica Thomas, The Council of State Governments</i>	2:45 PM

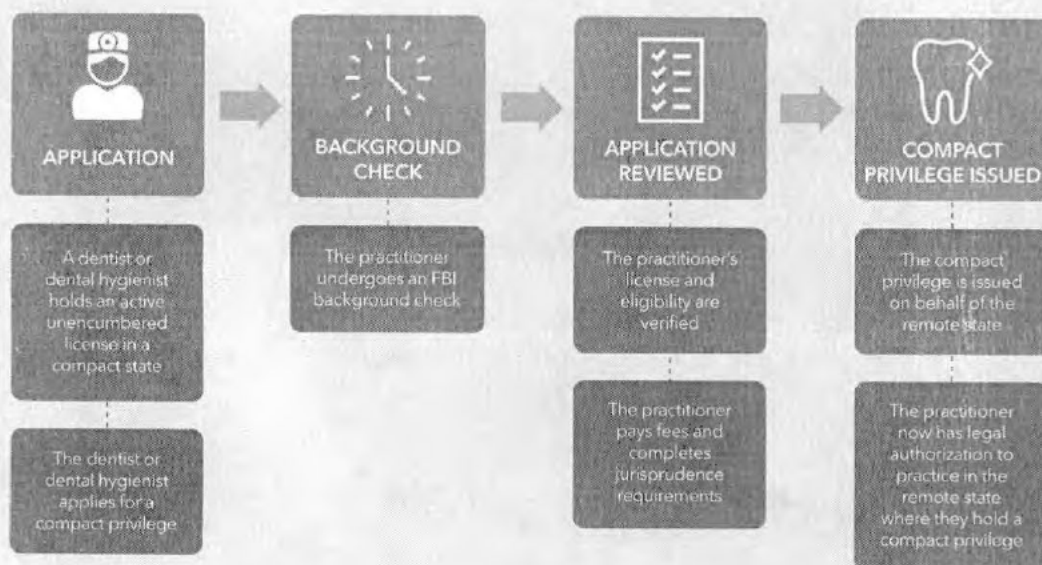


DDH Dentist and Dental Hygienist Compact

This project is funded by the Department of Defense

What is the Dentist and Dental Hygienist Compact?

The Dentist and Dental Hygienist Compact is an interstate occupational licensure compact. Interstate compacts are constitutionally authorized, legally binding, legislatively enacted contracts among states. This compact enables licensed dentists and dental hygienists to practice in all states participating in the compact, as opposed to them obtaining an individual license in every state they want to practice.



What other professions have an interstate compact?

Interstate Medical Licensure Compact (IMLC)

Nurse Licensure Compact (NLC) and Advanced Practice Nurse Compact (APRN Compact)

Emergency Medical Service Officials Licensure Compact (EMS Compact)

Physical Therapists Licensure Compact (PT Compact)

Psychology Interjurisdictional Compact (PSYPACT)

Audiology and Speech-Language Pathology Interstate Compact (ASLP-IC)

Occupational Therapy Interstate Licensure Compact (OT Compact)

Counseling Interstate Licensure Compact



National Center for Interstate Compacts

THE COUNCIL OF STATE GOVERNMENTS