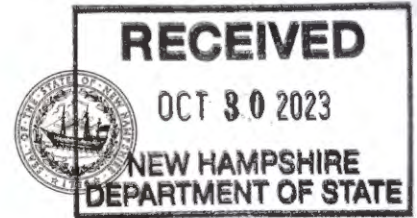


**STATE OF NEW HAMPSHIRE**  
Honorarium or Expense Reimbursement Report  
Executive Branch – RSA 15-B



Type or Print all Information Clearly:

Name: Shawn M Jones Work Phone No. 603-227-1509  
First Middle Last

Work Address: 1 Minuteman Way, Bldg-1 Concord, NH 03301

Office/Appointment/Employment held: Program Specialist II

List the full name, post office address, occupation, and principal place of business, if any, of the source of any reportable honorarium or expense reimbursement. When the source is a corporation or other entity, the name and work address of the person representing the corporation or entity in making the honorarium or expense reimbursement must be provided in addition to the name of the corporation or entity.

**Source of Honorarium or Expense Reimbursement:**

Name of source: \_\_\_\_\_  
First Middle Last

Post Office Address: \_\_\_\_\_

Occupation: \_\_\_\_\_

Principal Place of Business: \_\_\_\_\_

**If source is a Corporation or other Entity:**

Name of Corporation or Entity: Western Interstate Commission for Higher Education/TWV

Name of Corporate/Entity Representative: Mikayla Nelson

Work Address of Representative: 3035 Center Green Dr. Boulder, CO 80301

Value of Honorarium: 1,189.64 Date Received: 9/21/23 *If exact value is unknown, provide an estimate of the value of the gift or honorarium and identify the value as an estimate.* Exact  Estimate \_\_\_\_\_

Value of Expense Reimbursement: 358.02 Date Received: 10/17/23 *A copy of the agenda or an equivalent document must be attached to this filing.* Exact  Estimate \_\_\_\_\_

Briefly describe the service or event this Honorarium or Expense Reimbursement relates to:

Together With Veterans (TWV) Summit

"I have read RSA 15-B and hereby swear or affirm that the foregoing information is true and complete to the best of my knowledge and belief."

Shawn Jones  
Signature of Filer

10/19/2023  
Date Filed

**RSA 15-B:9 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.

**Return to:** Secretary of State's Office, 107 North Main Street, State House Room 204, Concord, NH 03301



WESTERN INTERSTATE COMMISSION FOR HIGHER EDUCATION

## 2023 Summit Attendee Travel Reimbursement Summary

### Documentation

- Travel voucher must be submitted within 30 days after the trip to guarantee reimbursement.
- Only ONE trip per travel voucher. (*One trip is considered travel starting from your home base and then returning to your home base.*)
- Only ONE Traveler per travel voucher.

### Hotel Accommodations

- SUMMIT lodging expenses are covered based on your specific registration arrival and departure dates; but include September 21<sup>st</sup>, 22<sup>nd</sup> and 23<sup>rd</sup>.
- Travelers are responsible for other incidental charges.

### Airline or Train

- Reimbursable fares are for round trips, from your nearest Airport to Denver International Airport (*DIA*).
- Only economy or coach travel is reimbursable.
- Advanced approval is required for unusual travel requirements (*seat upgrades, travel insurance, etc.*).

### Ground Transportation

- Travelers are encouraged to use the least expensive option available (*Airport shuttles, public transportation, ride share, or taxi*)

### Personal Vehicle

- Reimbursement for personal vehicle mileage is 65.5 cents per mile (*the current Federal mileage rate*).
- Gas for personal vehicle travel is not reimbursable.

### Meals

- WICHE will not reimburse for alcohol expenses.
- Meals that were provided by the event or purchased for you by another individual cannot be claimed.
- Current individual meal limits are, Breakfast \$18, Lunch \$20, Dinner \$40, including taxes and tips.

### Miscellaneous Expenses

- Expenses related to WICHE/ Together With Veterans business are reimbursable (*such as registration fees, luggage*).

## **ALL RECEIPTS ARE REQUIRED**

If receipt copies and electronic signatures are NOT legible, they will not be accepted.

### Lost Receipts

- WICHE will accept a copy of your credit card statement for lost receipts.
  - Be sure the statement includes your name, the vendor's name, date of charge, and amount.

For a complete travel guideline, questions, or to submit your travel voucher, please contact:  
Mikayla Nelson at [MNELSON@WICHE.EDU](mailto:MNELSON@WICHE.EDU)

**TOGETHER WITH VETERANS**

RURAL VETERAN SUICIDE PREVENTION PROGRAM

# Summit Agenda: Day 1

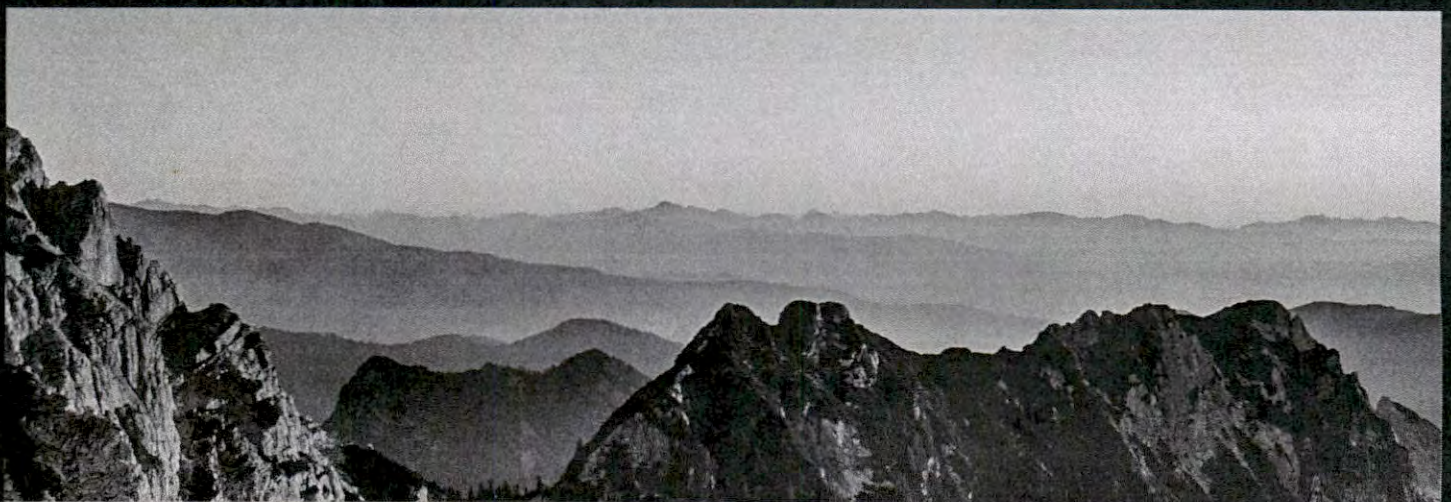
Friday, September 22nd 2023

Time	Opening Ceremony
7:30 AM	Breakfast
8:00 AM	Welcome words and posting of the colors
8:30 AM	WICHE Speakers: Demi Michelau, PhD and Dennis Mohatt
9:15 AM	MIRECC Speaker: Lisa Brenner, PhD and Kelly Lora Lewis, PhD
10:00 AM	Break
10:15 AM	Ice Breaker
	Breakout Sessions
10:30AM	<i>Special Projects – Veteran Homelessness (Westminster Ballroom 1)</i> <i>Telling your story with Data (Westminster Ballroom 2)</i> <i>Leadership (Westminster Ballroom 3)</i> <i>Special Interest Groups (Westminster Ballroom 4)</i>
11:30 AM	Lunch
12:05 PM	Plenary Speaker: Peter Schmidt, PhD
1:05 PM	Break
1:15 PM	S.P.A.R.K Presentations
3:00 PM	Break
3:10 PM	S.P.A.R.K Presentations Continued
	Day 1 Wrap-Up
3:45 PM	VA Speaker: Ryan Holliday, PhD
4:15 PM	Closing Words
	Break
4:30 PM	Facilitator/Coordinator Meeting ( <i>ONLY for these roles</i> )
6:00 PM	Dinner

# Summit Agenda: Day 2

Saturday, September 23rd 2023

Time	Opening Day 2
7:30 AM	Breakfast
8:00 AM	Opening words
8:20 AM	Plenary Speaker: Vernon Davis
9:20 AM	Break
9:35 AM	Sustainability Meeting
10:35 AM	VA Speaker: Joanna Sells, PhD and Aaron Eagan, MPH
11:05 AM	Trivia Lunch
12:30 PM	Group Photos
1:45 PM	Break
	Closing Commencement
2:00 PM	Kindness Group Activity Closing Words
3:00 PM	Summit Evaluation



## Mikayla Nelson

**From:** United Airlines, Inc. <unitedairlines@united.com>  
**Sent:** Wednesday, August 23, 2023 8:33 AM  
**To:** Mikayla Nelson  
**Subject:** Your United reservation for Denver, CO, US (DEN) is processing

You don't often get email from unitedairlines@united.com. Learn why this is important

**CAUTION-EXTERNAL EMAIL: Don't click unless you know content is safe.**

Add UnitedAirlines@news.united.com to your address book. [See instructions.](#)

Wednesday, August 23, 2023

## Thank you for choosing United



Once we've finished processing your reservation, you'll receive a second email containing your eTicket itinerary so that you can request additional receipts, export to your calendar, check in, cancel, upgrade, email or print your itinerary. This may take up to 24 hours.

We're processing your reservation and will send you an eTicket Itinerary and Receipt email once completed. This process usually takes less than an hour, but in rare cases it could take longer. If you don't receive an eTicket Itinerary and Receipt email within 24 hours, please call the United Customer Contact Center

Confirmation number:

Boston, MA, US (BOS)  
to Denver, CO, US (DEN)

# AWP2XD

Manage  
reservation

### Purchase summary


1 adult (18-64)	\$454.14
Taxes and fees	\$63.86

<b>Total</b>	<b>\$518.00</b>
--------------	-----------------

Credit card payment: \$518.00 (MasterCard-\*\*\*0481)

## Trip summary

Thu, Sep 21, 2023

 UA 662

Nonstop


**9:40 am**  
Boston, MA, US (BOS)



**12:22 pm**  
Denver, CO, US (DEN)

Duration: 4h 42m  
United Economy (S)  
Meals for purchase

Sun, Sep 24, 2023

 UA 2436

Nonstop

**9:55 am**  
Denver, CO, US (DEN)



**3:51 pm**  
Boston, MA, US (BOS)

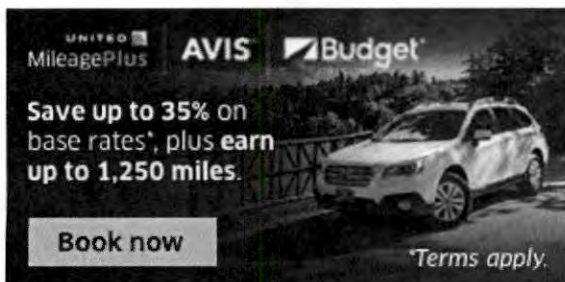
Duration: 3h 56m  
United Economy (S)  
Meals for purchase

## Travelers

Shawn Jones	BOS to DEN	34F	Email address:	Uscgr1987@tds.net
	DEN to BOS	34F	Home phone:	+1 6034960204

### REAL ID requirement

Do you have a REAL ID? Beginning May 7, 2025, every air traveler 18 and older will need a state-issued REAL ID-compliant license or identification card, or another acceptable form of ID (such as a passport), to fly within the United States. If you don't have a REAL ID, you'll need to use another acceptable form of identification, when flying within the U.S.



UNITED MileagePlus AVIS Budget

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\*Terms apply.



<i>Reference</i>	<i>Invoice No.</i>	<i>Description</i>	<i>Amount</i>
4180005304	S.Jones_TV_41.8	Jones, Shawn	\$358.02

**Check Amount:****\$358.02**





TRAVEL EXPENSE VOUCHER-Together with Veterans/ NON STAFF  
3035 Center Green Drive, Boulder, CO 80301

Revised 04/20/2023

WICHE travel vouchers must be submitted within 30 days of travel.

Name and mailing address (please print)	Telephone number	Email address
Shawn Jones 530 N State St Concord, NH 03301	603-496-0204 603-227-1509	uscgr2011@gmail.com Shawn.M.Jones@DMAVS.nh.gov

Departure Date and Time (when you leave from home or office)	Purpose or title of Meeting	Meeting City/State	Return Date and Time (when you return to home or office)
9/21/23 6:15 AM	TWV 2023 Summit	Westminister, CO	9/24/23 6:30 PM

TRANSPORTATION EXPENSES-Receipts are required for airfare, to Denver International Airport.  
Personal vehicle mileage will be reimbursed according to the current WICHE Travel Rate of \$0.665 per mile.

Dates	Airport/City	Airline or Train	Amount
9/21/23	Boston Logan Boston	United	Flight paid for by Mikayla Nelson/WICHE
9/24/23	Denver Airport CO	United	
Dates	City	Personal Vehicle Mileage	Amount

Taxis -please itemize and explain

Dates	City	Destination and mode of travel	Amount
9/21/23	Concord, NH	Boston Logan Airport / Bus	0
9/21/23	Denver, CO	Westin Hotel, Westminister, CO / Uber	56.96
9/24/23	Westminister, CO	Denver Airport / Uber	60.06
9/24/23	Boston, MA Airport	Concord, NH / Bus	45.00

INDIVIDUAL Meals ONLY - WICHE does not reimburse for meals provided by the hotel, conference, or others.  
Form has been pre-filled with "Provided" for meals that are covered during SUMMIT attendance.  
Meal maximums are B=\$18, L=\$20, D=\$40.

Dates	Breakfast	Lunch	Dinner	Comments	Day Total
9/21/2023	\$18	\$20	\$40		\$78.00
9/22/2023	Provided	Provided	Provided		\$0.00
9/23/2023	Provided	Provided	\$40		\$40.00
9/24/2023	\$18	\$20	\$40		\$78.00

Miscellaneous-please see instructions and itemize. Receipts are required for reimbursement.

Date	Item	Description	Amount

TOTAL COST OF TRAVEL TO BE CHARGED TO THE PROGRAM UNIT \$ 358.02

Shaded areas below are for staff use only

LESS ANY ADJUSTMENTS	
TOTAL REIMBURSEMENT	

CERTIFICATE: I hereby certify this to be a true statement of reasonable and necessary travel expenses incurred in the performance of official duties for the Western Interstate Commission for Higher Education.

Shawn Jones 9/29/23

Signed by traveler/date

WICHE approved/date

Please print name: Shawn Jones

Please print name:

Areas below are for staff use only.

Meeting Description	Account Number(s)	Amount
Vendor #	Date Paid	