STATE OF NEW HAMPSHIRE

Honorarium or Expense Reimbursement Report (RSA 15-B)

Type or Print all Information Clearly:

Name: Robert (First) A (Middle) Foose (Last) Work Phone No. 603 252-4256

Work Address: 55 Twin Lake Villa Rd New London NH 03257

Office/Appointment/Employment held: State Representative

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)

RECEIVED
JAN 10 2011
NEW HAMPSHIRE
DEPARTMENT OF STATE

Post Office Address: _____

Occupation: _____

Principal Place of Business: _____

If source is a Corporation or other Entity:

Name of Corporation or Entity: Taipei Economic & Cultural Office

Name of Corporate/Entity Representative: Alex Huang

Work Address of Representative: 99 Summer Street Suite 801 Boston MA 02110

Food and/or beverages consumed pursuant to RSA 15-B:6, II with **value over $25.00** ☑

Value of ~~Honorarium~~ Gift 6000 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 ☒ Estimate

Value of Expense Reimbursement: _____ Date Received: _____ ***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:

Northern New England Legislative Leaders Economic/Cultural Trip to Taiwan

"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."

Signature of Filer _____ Date Filed 10 Jan 2011

9/07

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, State House Room 204, Concord, NH 03301

Air Fair	4225
Hotel	900
Meals	500
Internal Transportation event admission And incidentals	375
	$ 6,000

Trip Dates
December 5 - 13 2010

Program Included
American Institute in Taiwan
Various Taiwanese Ministries
Various Taiwanese Trade Groups
Taiwan Ministry of Health Insurance
Taipei Hospital
Science / Industrial Parks and Exposition
Taipei University
Taipei College of Performing Arts
Ken Men Island
International Floral Exposition