

STATE OF NEW HAMPSHIRE

Honorarium or Expense Reimbursement Report (RSA 15-B)



Type or Print all Information Clearly:

Name: Pamela Z Tucker Work Phone No. 271.3070

Work Address: STATE House Room 312 Concord, NH

Office/Appointment/Employment held: 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.

Source of Honorarium or Expense Reimbursement:

Name of source: _____

Post Office Address: _____

Occupation: _____

Principal Place of Business: _____

RECEIVED MAR 26 2012 NEW HAMPSHIRE DEPARTMENT OF STATE

If source is a Corporation or other Entity:

Name of Corporation or Entity: AUS IB

Name of Corporate/Entity Representative: Ken MORTON

Work Address of Representative: 1645 FALMOUTH RD Centerville MA 02632

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

Value of Honorarium: 310.77 Date Received: 12/9/11 If exact value is unknown, provide an estimate of the value of the gift or honorarium and identify the value as an estimate.

Value of Expense Reimbursement: 437.20 Date Received: 3/2012 A copy of the agenda or an equivalent document must be attached to this filing.

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

International CONFERENCE / EDUCATION Summit of STATE LEADERS & Indian Schools

"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: Pamela Z Tucker

Date Filed: March 26, 2012

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



SLLF / AUSIB Education Summit

Mumbai, Pune, India
Dec. 2-9, 2011

Estimated Expense Breakdown
Representative Pamela Z. Tucker

	approximate cost
<u>Lodging and Dining</u>	
Hotel in New York, Thursday, December 2, 2011 1 night (single occupancy)	\$125.00
Note: No hotel on Dec. 3 - flight to India	
Hotel in Mumbai, Dec. 4-5, 2011 2 nights	\$248.98
Hotel, food, transport, misc. in Pune, Dec. 6-9, 2011	\$960.00
<u>Travel</u>	
US Flight to and from New York	\$502.79
International Air India flight	\$1,265.00
Total	<u>\$3,101.77</u>



State Legislative Leaders Foundation and AUSIB

**US India Leadership Summit
Mumbai and Pune, India**

December 2 - 9, 2011

Reimbursement Request

Name Pamela Tucker

Mailing Address 15 Eagle Court

City, State Zip Greenland, NH 03840

Phone (office) 603 271 3661 (cell) 603 531.0085

Email Pamzt@comcast.net

Visa application fees \$ 240⁰⁰

Flight charges 197.⁰⁰

Make check payable to: Pamela Tucker

Please note: SLLF cannot make checks payable to a political action committee.

Please attach receipts and mail or scan and email to:

Ken Morton (kmorton@sllf.org)
State Legislative Leaders Foundation
1645 Falmouth Road, Building D
Centerville, MA 02632

*12/20/11
93959211*

Transaction Date: 11/02/2011 Wed
Transaction Description: TRAVEL DOCUMENT SYSTWASHINGTON DC
2026383800
Cardmember Name: PAMELA Z TUCKER
Amount \$: 240.00
Doing Business As: TRAVEL DOCUMENT SYSTEMS
Merchant Address: 925 15TH ST NW FL 3
WASHINGTON
DC
20005-2305
UNITED STATES
Reference Number: 320113070427875170
Category: Other - Miscellaneous

Transaction Date: 12/08/2011 Thu
Transaction Description: COLPITTS WORLD TRAVEDEHAM MA
TRAVEL AGENCY SERVICE

From:	To:	Carrier:	Class:
N/A	N/A	YY	00
	N/A	YY	00
	N/A	YY	00
	N/A	YY	00

Ticket Number: 89005697346344 **Date of Departure:** 12/31
Passenger Name: TUCKER/PAMELA
Document Type: TRAVEL AGENCY FEE

Cardmember Name: JOHN H TUCKER
Amount \$: 22.50
Doing Business As: AIRLINES RPRTING CORPTAF
Merchant Address: 3000 WILSON BLVD
STE 300 - TASF DEPT
ARLINGTON
VA
22201
UNITED STATES

Reference Number: 320113430384236780
Category: Travel - Travel Agencies

Transaction Date: 12/08/2011 Thu
Transaction Description: COLPITTS WORLD TRAVEDEDHAM MA
DELTA AIR LINES INC.

From:	To:	Carrier:	Class:
N.Y. J F KENNEDY I	BOSTON LOGAN INTER	DL	Q
	N/A	YY	00
	N/A	YY	00
	N/A	YY	00

Ticket Number: 00687260082541 **Date of Departure:** 12/09
Passenger Name: TUCKER/PAMELA
Document Type: PASSENGER TICKET

Cardmember Name: JOHN H TUCKER
Amount \$: 174.70
Doing Business As: DELTA AIR LINES
Merchant Address: ATLANTA AIRPORT
ATLANTA
GA
30320
UNITED STATES

Reference Number: 320113430384236781
Category: Travel - Airline