

**STATE OF NEW HAMPSHIRE**  
Honorarium or Expense Reimbursement Report (RSA 15-B)



Type or Print all Information Clearly:

Name: William L O'Brien Work Phone No. 673-6610  
First Middle Last

Work Address: PO Box 154, Mont Vernon, NH 03057

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: ALEC  
First Middle Last

Post Office Address: 1101 Vermont Ave., NW, 11th Floor, Wash, DC 20005

Occupation: Not Applicable

Principal Place of Business: See above

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

Name of Corporation or Entity: American Legislative Exchange Council (ALEC)

Name of Corporate/Entity Representative: Not Applicable

Work Address of Representative: See above

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

Value of Honorarium: \_\_\_\_\_ 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: 750.96 Date Received: Applied For *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:

2013 Spring Task Force Summit; Member, Civil Justice Task Force

"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]  
Signature of Filer

5-8-2013  
Date Filed

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

**RECEIVED**

**MAY 08 2013**

**NEW HAMPSHIRE  
DEPARTMENT OF STATE**