

STATE OF NEW HAMPSHIRE

Honorarium or Expense Reimbursement Report (RSA 15-B)



This was not a gift. It was work I performed during leave time + was outside of my regular duties.

Name: Barbara Jean Patch Work Phone No. 603 271-2273

Work Address: 101 Pleasant St, Concord, NH 03301

Office/Appointment/Employment held: Education Consultant @ Dept. of Education NH Migrant Education Director

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: _____

If source is a Corporation or other Entity:

Name of Corporation or Entity: Fort Scott Community College

Name of Corporate/Entity Representative: Cindy Bartelsmeyer, Associate Dean

Work Address of Representative: 2108 S. Horton, Fort Scott, KS 66701

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

Value of Honorarium: \$1940.00 (Mentoring Fee) Date Received: 6/28/13

Value of Expense Reimbursement: \$833.29 Date Received: 6/28/13

Briefly describe the service or event this Honorarium or Expense Reimbursement relates to: During my leave time from the state, I worked as a mentor for the Out-of-School Youth Consortium for the state of Alabama.

"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: Barbara J Patch

Date Filed: 7/23/13



2108 South Horton • Fort Scott, Kansas 66701
(620) 223-2700 • www.fortscott.edu

AP-330062



83-56/1011

Pay*****2,773 Dollars and 29 Cents**
to the order of

CHECK NO. 0330062-C DATE 06/25/2013 AMOUNT *****2,773.29

BARBARA PATCH
33 WALHOWDEN WAY
LEBANON

NH 03766

NOT VALID AFTER 90 DAYS
Clayton N. Satro
Myrtle Anne Coleen
[Signature]
AUTHORIZED SIGNATURES

⑈ 330062 ⑈ [Barcode] ⑈ [Barcode]

FORT SCOTT COMMUNITY COLLEGE • • •

PLEASE DETACH THIS VOUCHER BEFORE CASHING

Inv Date	Inv Number	Description	Account	Amount
06/18/2013	35819	TRVL REIMB-BARBARA PATCH	3737566080	833.29
06/18/2013	35819	MENTORING SERVICE FEES	3737566080	1,940.00

\$2,773.29