

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



Type or Print all Information Clearly:

Name: PRADIP K. CHATTOPADHYAY Work Phone No. 603-271-2290
First Middle Last

Work Address: Suite 10 21 SOUTH FRUIT ST., CONCORD NH

Office/Appointment/Employment held: Commissioner, NHPUC

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: Critical Consumer Issues Forum (CNARUC endorsed) April 25th & 26th 2024 CCIF Summit 3 Boston MA

Name of Corporate/Entity Representative: Katrina McMurrian, Exec. Director,

Work Address of Representative: 615-905-1375, Katrina@CCIForum.com

Value of Honorarium: \$408.14 Date Received: 25th, 26th April, 2024 (estimated for meals, 1 breakfast, 2 lunches & coffee breaks)
the gift or honorarium and identify the value as an estimate. Exact _____ Estimate from Katrina McMurrian

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:

Estimated honorarium for 1 breakfast, 2 lunches & coffee breaks

"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

May 1, 2024
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

