

STATE OF NEW HAMPSHIRE

Honorarium or Expense Reimbursement Report (RSA 14-C)
For Legislators and Legislative Employees



Type or Print all Information Clearly:

Name: Maegan Ann Levesque Work Phone No.: 271 0021
First Middle Last

Work Address: 107 N Main St Concord NH 03301

Office/Appointment/Employment held: Senator

List the full name, post office address, occupation, and principal place of business, if any, of the **source** of any reportable honorarium, expense reimbursement, ticket or free admission to a political, charitable, or ceremonial event, or meals or beverages consumed at a meeting or event, the purpose of which is to discuss official business, with a value greater than \$50.

Source of Expense Reimbursement, Honorarium, Ticket or Free Admission, Meals and/or Beverages, or Donation to a State or National Legislative Association Event:

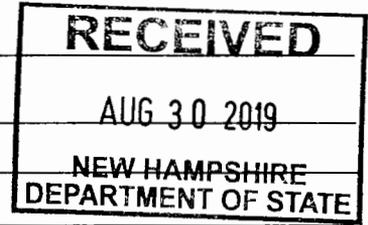
If the source is an Individual:

Name of Source: _____
First Middle Last

Post Office Address: _____

Occupation: _____

Principal Place of Business: _____



If the source is a Corporation or other Entity:

Name of Corporation or Entity: Future Now

Name of Person Representing the Corporation/Entity: Lauren Popper Ellis

Work Address of Person Representing the Corporation/Entity: 700 Thirteenth St NW suite 600 Washington DC 20005

I am reporting:

An **Expense Reimbursement with value over \$50.00.** (For costs that are waived, forgiven, reduced, prepaid, or reimbursed by a third party (other than the General Court) for attendance at a qualified event, pursuant RSA 14-C:2, III.)

Value of Expense Reimbursement: _____ 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

An **Honorarium with value over \$50.00.** (For payment from third parties for an appearance, speech, written article or other document, service as a consultant or advisor, or participation in a discussion group or similar activities related to legislative matters, pursuant to RSA 14-C:2, V.)

Value of Honorarium: 1425.00 Date Received: July 23-24 *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

A **ticket or free admission** to a political, charitable, or ceremonial event **with value over \$50.00.** (Pursuant to RSA 14-C:4, I.)

Meals and/or beverages consumed at a meeting or event the purpose of which is to discuss official business **with value over \$50.00.** (Pursuant to RSA 14-C:4, II.)

A **Donation** to a State or National Legislative Association Event (Pursuant to RSA 14-C:2, IV(b)(15))

TURN OVER TO CONTINUE

For a report relating to an Honorarium or Expense Reimbursement, you are required to attach a copy of the agenda or an equivalent document which addresses the subjects addressed and the time schedule of all activities at the event. Indicate below the names of the sponsors of activities in cases where they are not indicated on the agenda or equivalent document.

Provide a brief description of the service or event that gave rise to this Honorarium, Expense Reimbursement, ticket or free admission to a political, charitable, or celebratory event, or meals or beverages:

See attached agenda

Provide an itemized report of all individuals, corporations, or other entities making a donation to a state or national legislative association event:

Full Name of Donator Post Office Address Value of Donation Date Received Name of Legislative Association

(Attach additional sheets if necessary)

“I have read RSA 14-C and hereby swear or affirm that the foregoing information is true and complete to the best of my knowledge and belief.”

Melanie Lawson
SIGNATURE OF FILER

08/28/19
DATE FILED

RSA 14-C:7 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.

This information will not be made public:

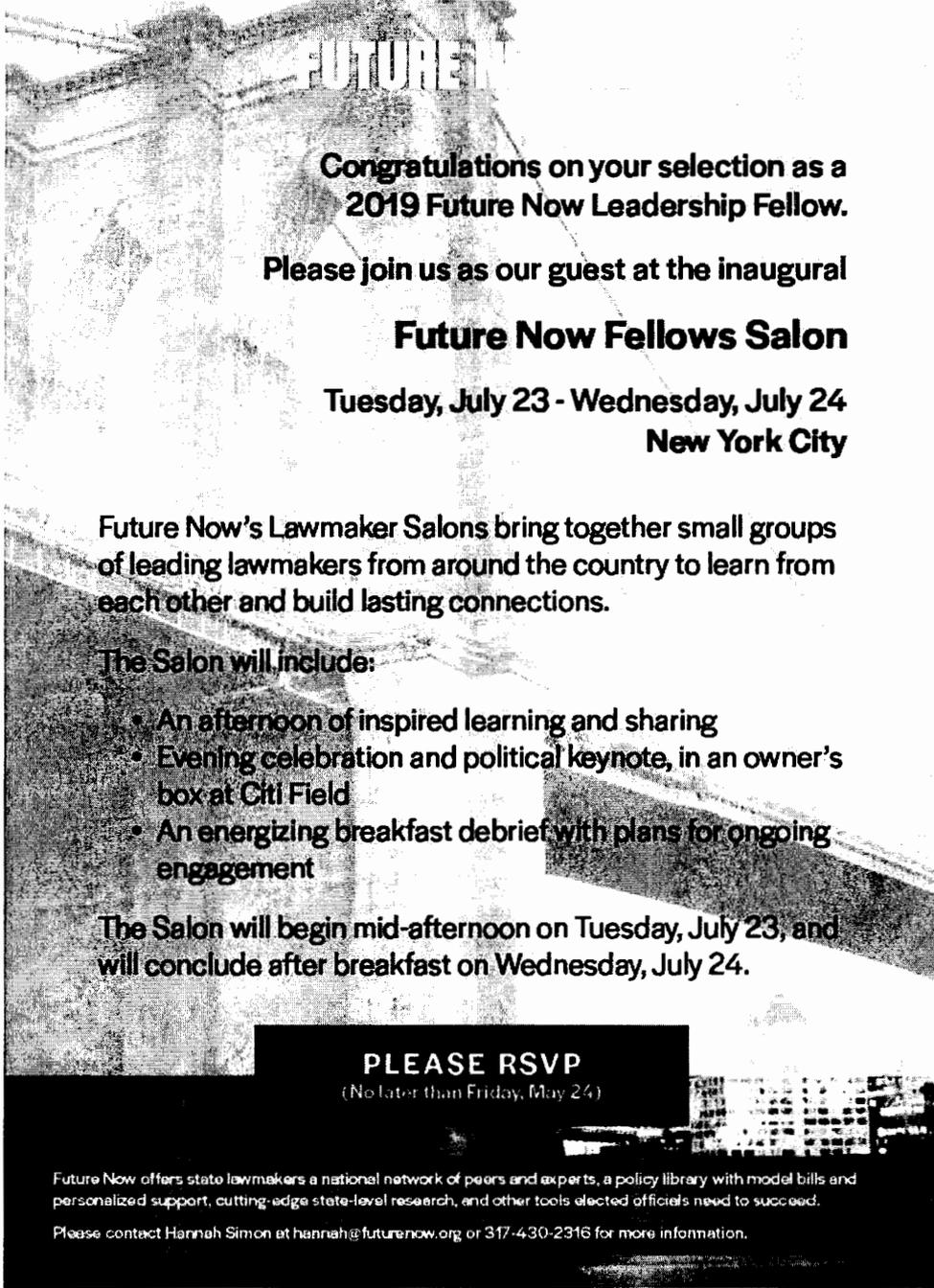
Home Phone: _____

Home Address: _____
STREET TOWN/CITY ZIP

Mailing Address if different: _____

E-mail Address: _____

Return to: Secretary of State’s Office, 107 North Main Street, State House Room 204, Concord, NH 03301



FUTURE

**Congratulations on your selection as a
2019 Future Now Leadership Fellow.**

Please join us as our guest at the inaugural

Future Now Fellows Salon

**Tuesday, July 23 - Wednesday, July 24
New York City**

Future Now's Lawmaker Salons bring together small groups of leading lawmakers from around the country to learn from each other and build lasting connections.

The Salon will include:

- An afternoon of inspired learning and sharing
- Evening celebration and political keynote, in an owner's box at Citi Field
- An energizing breakfast debrief with plans for ongoing engagement

The Salon will begin mid-afternoon on Tuesday, July 23, and will conclude after breakfast on Wednesday, July 24.

PLEASE RSVP

(No later than Friday, May 24)

Future Now offers state lawmakers a national network of peers and experts, a policy library with model bills and personalized support, cutting-edge state-level research, and other tools elected officials need to succeed.

Please contact Hannah Simon at hannah@futurenow.org or 317-430-2316 for more information.