STATE OF NEW HAMPSHIRE

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



Type or Print all Information Clearly:	Sw. m. j-		OF STATE
Name: TAMES Y.	GRAY W	ork Phone #:	603) 271-30
First Middle Work Address: 107 NoRTH MANN Office/Appointment/Exployment held:	ST; Room las	CONCO	(D) NH 0330
Office/Appointment/Employment held:	TTE SENATOR		
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Source of Expense Reimbursement, Honoraria	um, Ticket or Free Admiss	ion, or Meals	and/or Beverages
List the full name, post office address, occupate reportable expense reimbursement, honorarium, event, or meals or beverages consumed at a meet with a value greater than \$50.	, ticket or free admission to	o a political, ch	naritable, or ceremonial
If the source is an Individual:		Г	DECEMEN
Name of Source:			RECEIVED
First Post Office Address:	Middle	Last	DEC A 9 2022
Occupation:			NEW HARL SHIRE
Principal Place of Business:		L	DEPARTMENT OF STATE
If the source is a Corporation or other Entity:			
Name of Corporation or Entity: America	1 18 GISINETIVE	EXCHA	JGF COUNCIL
Name of Corporation of Entity.	michael	72 Ban	aman
Name of Person Representing the Corporation/Entit	y. MICHTEL		- 4 - 44
Work Address of Person Representing the Corporat	tion/Entity: 2900 CK	457AL)	PRIVE, SUITE
I am reporting:	ARLINGTO	an, VA	22202
An Expense Reimbursement with value ov	er \$50.00. (For costs that a	re waived, for	given, reduced, prepaid,
or reimbursed by a third party (other than the C			
14-C:2, III.)	-11	1	
Value of Expense Reimbursement: #578.	Date Received: 11/	18-29/22	fexact value is unknown,
provide an estimate of the value of the gift or honorariu	m and identify the value as dn e	estimate.	xact Estimate
An Hanararium with value aver \$50.00 (Toe novement from third north	ias far an anna	rance speech written
 An <u>Honorarium</u> with value over \$50.00. (Farticle or other document, service as a consultant 			
activities related to legislative matters, pursuant to		in a discussion	group or sininar
	Received:	If exact val	ue is unknown, provide an
estimate of the value of the gift or honorarium and identi		□ Exac	
A ticket or free admission to a political, chari	table, or ceremonial event w	ith value over S	50.00. (Pursuant to RSA
14-C:4, I.)			
☐ Meals and/or beverages consumed at a meet	ing or event the purpose of w	which is to discu	ss official business with
value over \$50.00. (Pursuant to RSA 14-C:4, II			
☐ A Donation to a State or National Legislati	i	DC4	

TURN OVER TO CONTINUE

For a report relating to an Expense Reimbursement or Honorarium, 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.
AMERICAN LEGISLATIVE EXCHANGE COUNCIL-
AMERICAN LEGISLATIVE EXCHANGE COUNCIL-
Provide a brief description of the service or event that gave rise to this Expense Reimbursement, Honorarium
ticket or free admission to a political, charitable, or celebratory event, or meals or beverages.
20 LEGISLATORS ACROSS THE COUNTRY PARTICIPATED IN KOUNDI
DISCUSSIONS WITH POLICY EXPERTS TO DISCUSS SIGNIFICANT
CHALLENGES ARISING OUT OF THE NOVEMBER 8, 2022 ELECTION, WENT RIGHT, AND WHAT DIDNOT BEST PRACTICES WERE ALSO
WENT RIGHT, AND WHAT DID NOT. BEST PRACTICES WERE ALSO
Source of a Donation to a State or National Legislative Association Event . SHARED.
Provide an itemized report of all individuals, corporations, or other entities from whom you received a donation
on behalf of a state or national legislative association event.
Full Name of Donator Post Office Address Value of Donation Date Received Name of Legislative Association
The state of the s
(Au th Additional Characters)
(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."
Dures 2404 12/19/22
SIGNATURE OF FILER 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. Please provide the following information about the persor filing this report.
This information will not be made public:
Home Phone:
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STREET TOWISCITT LIF



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Honest Elections Project Academy Agenda

Monday, November 28, 2022

2:00 PM - 5:00 PM Registration Opens

2:00 PM - 2:45 PM Ice Cream Social

3:00 PM – 3:15 PM Opening Session

3:15 PM – 4:45 PM Opening Roundtable Discussion: How Did Your State Perform this Last Election?

5:15 PM - 5:30 PM Buses Depart for U.S. Capital

6:00 PM - 7:00 PM Reception

7:00 PM - 8:45 PM Dinner

U.S. Capital—Senate Dining Room

Tuesday, November 29, 2022

8:00 AM – 9:15 AM Breakfast: Dark Money and Ranked-Choice Voting

9:15 AM - 9:30 AM Break

9:30 AM - 10:30 AM Litigation Update

10:30 AM - 11:00 AM Data from the Poll Observer Program

11:00 AM - 11:30 AM Audit Updates

11:30 AM - 12:00 PM EAC and Federal Updates

12:00 PM – 1:00 PM Lunch: Polling Presentation and Updates

1:00 PM - 1:15 PM **Break**

1:15 PM - 2:15 PM Ranked-Choice Voting



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Arlington, VA 22202

Exchange TEL 703.373.0933 • FAX 703.373.0927

Council www.alec.org

2:15 PM - 3:30 PM Improving Voter List Maintenance and the Electronic Registration Information

Center (ERIC) Program

3:30 PM - 4:30 PM Roundtable: The Future of Election Reform in Your State

4:30 PM - 4:45 PM Closing Remarks

5:45 PM - 6:45 PM ALEC Opening Reception

7:00 PM Dinner

Del Frisco's Double Eagle Steakhouse