STATE OF NEW HAMPSHIRE

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



TURN OVER TO CONTINUE

RECEIVED

SEP 0 9 2022

NEW HAMPSHIRE DEPARTMENT OF STATE

Type or Print all Inform				
Name: MARY	A. HAI	KKEN-PHILLIF	Work Phone	#: N/A
Work Address: N/A	4 Mide	dle Last		
Office/Appointment/Em	ployment held:,	STATE REP. GRA	From 12 - AT	TORNEY (MATERIANE
		200		
Source of Expense Re	imbursement, E	Honorarium, Ticket or I	Free Admission, or M	eals and/or Beverages
reportable expense rein	mbursement, hor erages consumed	norarium, ticket or free	admission to a politic	if any, of the source of any al, charitable, or ceremonial to discuss official business,
If the source is an Ind	lividual:			
Name of Source:				
Post Office Address:	First	Middle	Last	
Occupation:				
Principal Place of Busine	ess:			
If the source is a Corn	constian or other	. Fuditu		
If the source is a Corp	oration or other	r Entity: ELEGIOLATIVE tion/Entity: STEPHEN		
Name of Corporation or	Entity: 3TATE	LEGISLATIVE	LEADERS TO	UNDATION
Name of Person Represe	nting the Corpora	tion/Entity: 578842N	G. LAKIS, PR	ESIDENT
Work Address of Person	Representing the	Corporation/Entity: 48	1 MAIN ST. CEN	TERVILLE, MA
				02632
I am reporting: ☐ An Expense Reim or reimbursed by a thin 14-C:2, III.)	bursement with rd party (other the	value over \$50.00. (Fo han the General Court)	r costs that are waived for attendance at a qu	, forgiven, reduced, prepaid, alified event, pursuant RSA
Value of Expense Reimb provide an estimate of the		Date Re	e value as an estimate.	If exact value is unknown, Exact Estimate
o milet modelling	tel nei Line mn m 60	moditality advisor. Of De	areicidation in a discuss	pearance, speech, written ion group or similar ct value is unknown, provide an Exact Estimate
A <u>ticket or free adn</u> 14-C:4, I.)	nission to a politic	cal, charitable, or ceremo	nial event with value or	ver \$50.00. (Pursuant to RSA
Meals and/or bever value over \$50.00. (Pur	ages consumed a suant to RSA 14-	at a meeting or event the C:4, II.)	purpose of which is to	discuss official business with
A Donation to a S	tate or National	Legislative Association	Event. (Pursuant to RS	SA 14-C:2, IV(b)(15).)

or an equivalent do event. Indicate belo	ocument which addres ow the names of the sp	ses the subjects addr	essed and the tim	red to attach a copy of the agend e schedule of all activities at th y are not indicated on the agend
or equivalent docur	nent.			
Provide a brief des	cription of the service	or event that gave	rise to this Expen	se Reimbursement, Honorariun
	sion to a political, cha LEADERSHIP			or beverages.
LEGISCATIOE	LZADZKOHTI	CONFERENC	Σ.	
Source of a Donati	on to a State or Natio	nal Legislative Asso	ciation Event	
Provide an itemized on behalf of a state	l report of all individu or national legislative	als, corporations, or association event.	other entities fror	n whom you received a donatio
Full Name of Donator	Post Office Address	Value of Donation	Date Received	Name of Legislative Association
	, , , , , , , , , , , , , , , , , , ,			
	-			
	(A	ttach Additional Sheets	f Necessary)	
"I have read RSA 14	4-C and hereby swear	or affirm that the for	egoing informatio	n is true and complete to the bes
of my knowledge ar	id belief.			
Marstta	The Phellips			9-6-202Z
SIGNATURE OF F	ILER 7			DATE FILED
201112				
files a false report s	y. Any person who kn shall be guilty of a mi	owingly fails to comp sdemeanor.Please pr	oly with the provis ovide the followi	sions of this chapter or knowingly ng information about the person
filing this report.		_		
I his information v	vill not be made publ			
Home Address:				
STRE Mailing Address if	The state of the s	TOWN/CITY		ZIP
Tradition II	difference.			
				NH 03301
				1111 03301



STATE LEGISLATIVE LEADERS FOUNDATION

Emerging Leaders Program

Darden School of Business, University of Virginia - Charlottesville, VA

July 11 - 14, 2022

Expense Breakdown

Hon. Mary Hakken-Phillips

Room and Board	\$975.00
Tuition and Fees	\$2,500.00
UVA Rotunda Dinner	\$112.75
Event Transportation	\$25.63
Monticello Ticket	\$22.00
Travel Reimbursement	Not yet received—Sec attached \$758.25
TOTAL	\$3,635.38
	+ 758.25

4,393.63

STATE LEGISLATIVE LEADERS FOUNDATION

OPERATING ACCOUNT 481 MAIN STREET CENTERVILLE, MA 02632

53-7107/2113

8/30/22

Mary Hakken-Phillips

\$**758.25

DOLLARS

Mary A. Hakken-Phillips 79 Lebanon Street Hanover, NH 03755

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MEMO

Travel Expenses Jul 11-14, '22 Charlottesville, VA TONGLOR PRESS NERE SED MAGE DISAPPEARS

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STATE LEGISLATIVE LEADERS FOUNDATION OPERATING ACCOUNT

Mary Hakken-Phillips

Date 8/30/22 Type Reference

Bill

Original Amt. 758.25

Balance Due

Discount 758.25

8/30/22

Check Amount 758.25

7300

Payment 758.25

758.25