



STATE OF NEW HAMPSHIRE

Lobbyists Report of Honorariums or Expense Reimbursement

Addendum B

(RSA Chapter 15:6)

PLEASE PRINT

I. Name of Lobbyist(s) Frank Harris

II. Name of lobbyist's partnership, firm or corporation, if any:

(Name of partnership, firm or corporation)

III. Name of Client Mothers Against Drunk Driving Date 4/21/14

State the full name of the person receiving the honorarium or expense reimbursement:

Harris Frank J
Last Name First Name Middle Name/Initial

What is the value of the honorarium or expense reimbursement? \$ 296.18

Describe the event to which the honorarium or expense reimbursement relates. (Include the date(s) and location(s) of the event).

Please view the Attached Expense Reimbursements

(If there is more than one honorarium or expense reimbursement use a separate addendum B form for each.)

Sworn Statement/Affirmation by Lobbyist

I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm that the foregoing information is true and complete to the best of my knowledge and belief.

[Signature]
(Signature of lobbyist)

4/21/14
(Date)

Frank Harris
(Print Name of lobbyist)

Frank Harris (MADD) Expense Reimbursement January 1, 2014 to March 31, 2014

Where		When	What	Amount
Durgin Garage	Manchester, NH	1/23/2014	Parking	2.45
Sunoco	Manchester, NH	1/23/2014	Food	6.48
Panera Bread	Manchester, NH	1/23/2014	Dinner	8.82
U.S. Airways	Manchester, NH	3/11/2014	Airline Boo	75
Elizabeth's Kitchen	Concord, NH	3/11/2014	Food	6.41
Convenience Plus	Manchester, NH	3/11/2014	Gas	10.44
EJ's on Main Street	Concord, NH	3/17/2014	Food	26.64
Panera Bread	Concord, NH	3/18/2014	Food	6.53
Holiday Inn	Concord, NH	3/18/2014	Hotel	134.07
Convenience Plus	Manchester, NH	3/18/2014	Gas	6.25
EJ's on Main Street	Concord, NH	3/18/2014	Food	13.09

296.18

State of New Hampshire
Signature Form for Associated Lobbyist
RSA Chapter 15

Use this form to swear or affirm the truth and completeness of
Income and Expense Statements and related Addendums.

Sworn Statement/Affirmation by Lobbyist
Statement of Income and Expenses for:

Name of Lobbying partnership, firm, or corporation: Mothers Against Drunk Driving

Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any particular client): Mothers Against Drunk Driving

Date of Report (check one):

April 30, 2014

July 30, 2014

October 29, 2014

January 28, 2015

I have read RSA 15, RSA 15-B, RSA 664, the Statement of Income and Expenses described above, and the following Addendums submitted with that Statement (insert the number of Addendum forms being submitted):

1 Addendum A(s).

1 Addendum B(s).

0 Addendum C(s).

I hereby swear or affirm that the foregoing information on the Statement and each Addendum is true and complete to the best of my knowledge and belief.


(Signature of lobbyist)

4/12/14
(Date)

Frank Harold
(Print Name of lobbyist)