

STATE OF NEW HAMPSHIRE

Honorarium or Expense Reimbursement Report (RSA 15-B)



Type or Print all Information Clearly:

Name: Pamela Z Tucker Work Phone No. 531.0085
First Middle Last

Work Address: 15 Eagle Ct Greenland NH 03840

Office/Appointment/Employment held: Representative

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: Gary Daniels - NH ALEC - Chairman
First Middle Last

Post Office Address: 127 Whitten Road Milford, NH 03055

Occupation: STATE Representative

Principal Place of Business: _____

If source is a Corporation or other Entity:

Name of Corporation or Entity: ALEC - NH

Name of Corporate/Entity Representative: _____

Work Address of Representative: WASHINGTON, DC

Food and/or beverages consumed pursuant to RSA 15-B:6, II with value over \$25.00

Value of Honorarium: _____ 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

Value of Expense Reimbursement: 300⁰⁰ 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:

REGISTRATION FEE FOR Spring TASK Force

"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."

Pamela Tucker
Signature of Filer

May 15, 2013
Date Filed

RECEIVED
MAY 16 2013
NEW HAMPSHIRE
DEPARTMENT OF STATE

Purchase Confirmation No. 067470 (Rep. Pamela Z. Tucker)

From : meetings@alec.org
Subject : Purchase Confirmation No. 067470 (Rep. Pamela Z. Tucker)
To : pamzt@comcast.net
Reply To : meetings@alec.org

Mon, Mar 11, 2013 03:12 PM

Dear Rep. Pamela Z. Tucker,

Thank you for your purchase!

For your records, here is a summary of your purchase from **The American Legislative Exchange Council**.

Date/Time: 3/11/2013 3:09 PM

Purchased By:
Rep. Pamela Z. Tucker
Customer ID: 269471
(Organization: NEW HAMPSHIRE LEGISLATURE)
(603) 431-8982
pamzt@comcast.net

Your confirmation number is: **067470** Please keep this number for any references.**Shopping Cart Items**

2013 Spring Task Force Summit

Main Registration - Badge Name: **Pamela****Fee Type: Attendee Registration - Legislator**
Event

Amount	Quantity	Total
\$300.00	1	\$300.00
Subtotal		\$300.00
Taxes		\$0.00
Shipping		\$0.00
Invoice Total		\$300.00
 Grand Total		 \$300.00
Payment		\$300.00
Order Balance		\$0.00

Payment Information

Payment Amount: **\$300.00**
Payment Method: **PayPal**
