

STATE OF NEW HAMPSHIRE

Honorarium or Expense Reimbursement Report (RSA 15-B)



Type or Print all Information Clearly:

Name: MARTHA S. HENNESSEY Work Phone No. 603-643-8672

Work Address: 4 Webster Terrace, Hanover, NH 03755

Office/Appointment/Employment held: NH State Rep

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.

Source of Honorarium or Expense Reimbursement:

Name of source: _____

Post Office Address: _____

Occupation: _____

Principal Place of Business: _____

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If source is a Corporation or other Entity:

Name of Corporation or Entity: State Innovation Exchange (SIX)

Name of Corporate/Entity Representative: John Magniho

Work Address of Representative: _____

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

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 [X] Estimate

Value of Expense Reimbursement: \$1162.00 Date Received: Oct 1-3, 2015 A copy of the agenda or an equivalent document must be attached to this filing. [] Exact [X] Estimate

Briefly describe the service or event this Honorarium or Expense Reimbursement relates to:

3 Day conference, including lodging + food

"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."

Signature of Filer: Martha Hennessey

Date Filed: 11/2/15

9/07

RSA 15-B:9 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.

Return to: Secretary of State's Office, State House Room 204, Concord, NH 03301



STATE INNOVATION EXCHANGE

2015 State **Innovation** Exchange Legislator Conference
Washington, D.C.
October 1-3, 2015
Hyatt Regency Washington on Capitol Hill

EXPENSE REPORT

Hotel Expenses: \$222.00 per evening*
Travel Cost: \$350.00 maximum allowance**
Event and Food Costs: \$45.00 - Thursday, October 1
\$222.50 - Friday, October 2
\$100.50 - Saturday, October 3

Full conference cost: \$1,162.00†

†This sum reflects the total the State Innovation Exchange spent for attendees that participated in the full conference, utilized two nights of hotel accommodations, and used the full amount of funds offered for travel.

*The State Innovation Exchange provided hotel for the evenings of Thursday, October 1st and Friday, October 2nd. Attendees were responsible for covering accommodations for additional evenings.

**The State Innovation Exchange offered to provide up to \$350.00 in travel coverage for attendees. However, many attendees did not use the full amount of funds.

For inquiries, please contact John Magnino at john@stateinnovation.org.