

STATE OF NEW HAMPSHIRE

Honorarium or Expense Reimbursement Report (RSA 15-B)



Type or Print all Information Clearly:

Name: Nancy F Stiles Work Phone No. 603 271-6933
First Middle Last

Work Address: 33 North State St., Concord, NH 03301

Office/Appointment/Employment held: Senator - District 24

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: St. John's International University
First Middle Last

Post Office Address: Castello Della Rovere, P.zza Rey, 10048

Occupation: University Vinova, Torino, Italy

Principal Place of Business: Torino, Italy

If source is a Corporation or other Entity:

Name of Corporation or Entity: _____

Name of Corporate/Entity Representative: _____

Work Address of Representative: _____

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

Value of Honorarium: \$2850, Date Received: 9-25-9-28 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: _____ 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:

I attended St. John's International Univ. as a Board Member

"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."

Nancy F Stiles
Signature of Filer

10-6-13
Date Filed

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

RECEIVED
OCT 16 2013
NEW HAMPSHIRE
DEPARTMENT OF STATE

Prenotazione numero JSHDMJ

[Ottenerne una ricevuta di biglietto elettronico](#)

| | | | |
|--|---|--|---|
| Traveller | | | |
| Passenger Name STILES, NANCYFRANCES | Billing Address: No Address On Record | Delivery Address: No Address On Record | |
|  Agency Information CTS TORINO Corso Belgio 141 A Torino 10124 ITALY Agency Phone: CTS TORINO TEL 0039 011-8124534-ALEXA Codice IATA: 96006960 | | | |
| e-Ticket Receipt - 0014300552259 - AA 5949 - 25 Sep 2013 -BOS | | Today's Date: 20 Sep 2013 | |
| e-Ticket Number : 0014300552259 | | Galileo Reservation Number: JSHDMJ | Ticket Issue Date: 20 Sep 2013 |
| Flight Information | | | |
| 25 Sep 2013 | | | |
| American Airlines (AA) 5949 | | Economy (H) | American Airlines Confirmation Number: WOWQAA |
| Flight Operated By: | | IBERIA | |
| Depart: | Logan Intl Arpt (BOS) , Terminal E Boston | 8:30 PM | Fare Basis: HKXE1NA |
| Arrive: | Barajas Arpt (MAD) , Terminal 4S Madrid | 9:20 AM 26 Sep 2013 | Not Valid Before: 25 Sep Not Valid After: 25 Sep |
| Carry-On+: 2 Piece Plan | | | |
| 1st Bag+: NO FEE CARRY 18KG 40LB UPTO 45LI 115LCM | | | |
| 2nd Bag+: NO FEE CARRY ON HAND BAGGAGE ALLOWANCE | | | |
| | | | Status: Confirmed |
| 26 Sep 2013 | | | |
| American Airlines (AA) 5892 | | Economy (H) | American Airlines Confirmation Number: WOWQAA |
| Flight Operated By: | | IBERIA | |
| Depart: | Barajas Arpt (MAD) , Terminal 4 Madrid | 12:10 PM | Fare Basis: HKXE1NA |
| Arrive: | Malpensa Arpt (MXP) , Terminal 1 Milan | 2:25 PM | Not Valid Before: 26 Sep Not Valid After: 26 Sep |
| Carry-On+: 2 Piece Plan | | | |
| 1st Bag+: NO FEE CARRY 18KG 40LB UPTO 45LI 115LCM | | | |
| 2nd Bag+: NO FEE CARRY ON HAND BAGGAGE ALLOWANCE | | | |
| | | | Status: Confirmed |
| Applies to: BOS - MIL | | | |
| Baggage Allowance+: 1 Piece Plan | | | |
| 1st Bag+: NO FEE UPTO 50LB/23KG AND UPTO 62LI/158LCM | | | |
| 2nd Bag+: 100.00 USD UPTO 50LB/23KG AND UPTO 62LI/158LCM | | | |
| <u>Confirm Baggage Fees</u> | | | |
| | | | Status: Confirmed |
| 28 Sep 2013 | | | |



ST. JOHN
INTERNATIONAL
UNIVERSITY

**Board Meeting
September 27, 2013**

**3.00 PM Italian Time
9.00 AM US time**

AGENDA

- Update on SJIU's current situation: students, faculty and staff
- SJIU Tuition and Fees
- NHHEC November report
- Development projects
- Others

Around Dec. 15th

Dec. 12th confirmation NH