

STATE OF NEW HAMPSHIRE
Honorarium or Expense Reimbursement Report
Executive Branch – RSA 15-B



Type or Print all Information Clearly:

Name: PATRICIA H HIGGINS Work Phone No. 643-3989
First Middle Last

Work Address: State House of Representatives

Office/Appointment/Employment held: State 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:

RECEIVED

Name of source: _____
First Middle Last

NOV 01 2017

Post Office Address: _____

NEW HAMPSHIRE
DEPARTMENT OF STATE

Occupation: _____

Principal Place of Business: _____

If source is a Corporation or other Entity:

Name of Corporation or Entity: State Innovation Exchange

Name of Corporate/Entity Representative: Arriana Belkin, Assoc. Legislative Director

Work Address of Representative: PO Box 260230 Madison WI 53726

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: \$785 Date Received: expected in December *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:

Three day conference - mix of policy discussions, training sessions, networking w/ colleagues across country.

"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."

Patricia C Higgins
Signature of Filer

Oct 31, 2017
Date Filed

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

CONFERENCE SCHEDULE

The 2017 conference will begin on Sunday at 3:00 pm and wrap up at 2:00 pm on Tuesday. Please plan to join us for the full conference. Additional details will be available soon, but below is a general snapshot of activities.

Sunday, October 8 (3:00 pm to 8:00 pm):

Afternoon: Kick off the conference by participating in one of three interactive, discussion-based workshop sessions

Evening: Hors d'oeuvres, keynote speaker, networking

Monday, October 9 (7:00 am to 9:00 pm):

Morning: Registration, breakfast, keynote speakers, networking, plenary panels

Afternoon: Lunch, breakout sessions

Evening: Dinner, keynote speakers, networking

Tuesday, October 10 (7:00 am to 2:30 pm):

Morning: Breakfast, breakout sessions

Afternoon: Lunch, keynote speakers, plenary panels