

STATE OF NEW HAMPSHIRE

Honorarium or Expense Reimbursement Report (RSA 15-B)



Type or Print all Information Clearly:

Name: Art Ellison Work Phone No. 603-271-6698

Work Address: 21 South Fruit Street, Suite #20, Concord, NH 03301

Office/Appointment/Employment held: Administrator/Bureau of Adult Education

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: _____

Post Office Address: _____

Occupation: _____

Principal Place of Business: _____

RECEIVED

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NEW HAMPSHIRE DEPARTMENT OF STATE

If source is a Corporation or other Entity:

Name of Corporation or Entity: Mississippi Community College Board

Name of Corporate/Entity Representative: Sandy Crist

Work Address of Representative: 3825 Ridgewood Road, Jackson, MS 39211

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: \$521.59 Date Received: 3/11/13 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: To assist Mississippi adult ed program directors in the implementation of parts of the NH model for adult education.

"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

03/15/13

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

Ellison, Art

From: Sandy Crist <scrist@mccb.edu>
Sent: Monday, December 17, 2012 11:58 AM
To: Ellison, Art
Cc: Eloise Richardson
Subject: Advocacy Training
Attachments: W-9 form.pdf

Importance: High

Good Morning,

We are set for Friday, February 1st. The training will be held at the PBS Auditorium here at our office. You will be flying in to the Jackson Airport. (JAN). I recommend any of the following hotels. All of the hotels really very convenient to the airport and our office. The Best Western is the closest to our office but the others are less than 10 minutes away.

Holiday Inn Express Hotel & Suites Jackson - Flowood
112 Ridge Way, Flowood, MS
(601) 992-7773 () · hiexpress.com

Candlewood Suites Flowood, Ms
3810 Flowood Drive, Flowood, MS
(601) 326-3600 () · candlewoodsuites.com

Best Western Plus Flowood Inn & Suites
1004 Top Street, Flowood, MS
(601) 420-4944 () · book.bestwestern.com

When you book your reservations and get the cost of the trip, we will do a lump sum payment for your travel, food, and hotel and any other fees incurred for this training. If you will complete the attached W-9 form and return it to me, I will get you entered into the system for payment.

What do you need from me? Do you need our office to gather the legislative information for Mississippi? (districts, representatives...etc??) Also, we will be glad to make any copies and put together any packets. Just let me know what you need and I will try to make it happen!

Have a wonderful Christmas!

Thanks,
Sandy

Sandy Crist
Mississippi Community College Board