

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



Type or Print all Information Clearly:

Name: Christopher T. Sununu Work Phone No. 603-271-2121  
First Middle Last

Work Address: 107 North Main Street., Room 208, Concord, NH 03301

Office/Appointment/Employment held: Governor

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.

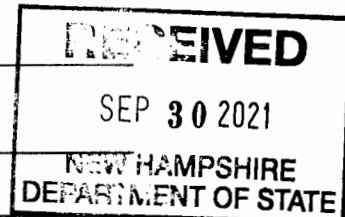
**Source of Honorarium or Expense Reimbursement:**

Name of source: Dean Kamen  
First Middle Last

Post Office Address: 340 Commercial Street, Manchester, NH 03101

Occupation: CEO

Principal Place of Business: DEKA Research & Development Corp.



**If source is a Corporation or other Entity:**

Name of Corporation or Entity: \_\_\_\_\_

Name of Corporate/Entity Representative: \_\_\_\_\_

Work Address of Representative: \_\_\_\_\_

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: \$700.00 Date Received: 8/30/2021 *A copy of the agenda or an equivalent document must be attached to this filing.* Exact \_\_\_\_\_ Estimate X

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

Aircraft transportation from Manchester, NH to Frankfort, KY in order to learn more about COVID-19 surge.

"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."

Christopher T. Sununu  
Signature of Filer

9/30/2021  
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, 107 North Main Street, State House Room 204, Concord, NH 03301

**Monday, August 30<sup>th</sup>**

**Attire: Business**

---

**8:15 - 10:00 AM: FLY FROM MANCHESTER TO FRANKFORT, KY**

**DRIVE FROM CAPITAL CITY AIRPORT THE KENTUCKY STATE CAPITOL**

**MEETING AT FRANKFORT REGIONAL MEDICAL CENTER**

**DRIVE FROM FRANKFORT TO LOUISVILLE**

**MEETING AT UNIVERSITY OF LOUISVILLE HOSPITAL**

**DRIVE FROM LOUISVILLE TO FRANKFORT**

**ARRIVE AT CAPITAL CITY AIRPORT**

**6:00-8:00 PM: FLIGHT FROM FRANKFORT, KY TO MANCHESTER**