

STATE OF NEW HAMPSHIRE

Honorarium or Expense Reimbursement Report (RSA 15-B)



Type or Print all Information Clearly:

Name: MATH J QUANT Work Phone No. 603 772 3417

Work Address: 45 Franklin St Exeter N.H. 03833

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.

Source of Honorarium or Expense Reimbursement:

Name of source: State employees Association

Post Office Address:

Occupation: Student

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Principal Place of Business:

If source is a Corporation or other Entity:

MAY 16 2007

Name of Corporation or Entity:

NEW HAMPSHIRE SECRETARY OF STATE

Name of Corporate/Entity Representative:

Work Address of Representative:

Value of Honorarium: 1900 Date Received: 5/28/07 If exact value is unknown, provide an estimate of the value of the gift or honorarium and identify the value as an estimate.

Value of Expense Reimbursement: Date Received: A copy of the agenda or an equivalent document must be attached to this filing.

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

National Republican Leadership Meeting For Sen. DC

"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

6/16 Date Filed