

**STATE OF NEW HAMPSHIRE**

Honorarium or Expense Reimbursement Report (RSA 15-B)



Type or Print all Information Clearly:

Name: Kathryn G. Dodge Work Phone No. (603) 271-2555 X350  
First Middle Last

Work Address: 3 Barrell Court, Suite 300, Concord, NH 03301-8543

Office/Appointment/Employment held: Executive Director - Postsecondary Educ. Commission

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: \_\_\_\_\_ **RECEIVED**  
First Middle Last

Post Office Address: \_\_\_\_\_ **JUN 30 2009**

Occupation: \_\_\_\_\_ **NEW HAMPSHIRE DEPARTMENT OF STATE**

Principal Place of Business: \_\_\_\_\_

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

Name of Corporation or Entity: N.E. Board of Higher Education (NEBHE)

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

Work Address of Representative: 45 Temple Place, Boston, MA 02111-1305

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: \$100.71 Date Received: 10/9/08 *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:

Executive Board Meeting

"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: [Signature]

Date Filed: 6/29/09

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



# NEW ENGLAND BOARD OF HIGHER EDUCATION

45 Temple Place, Boston, Massachusetts 02111-1305 • Tel. 617.357.9620 • Fax 617.338.1577 • www.nebhe.org

## DRAFT

### Regional Student Program (RSP) Advisory Council Meeting

Friday, September 19, 2008

11 a.m. to 1 p.m.

*Note: Lunch will be provided.*

Kathryn G. Dodge, *Chair, RSP Advisory Council*

- 11:00 a.m.                    **Welcome and Comments by Chair**
- 11:15 a.m.                    **Minutes, April 10, 2008, Meeting**
- Discussion and approval
- 11:30 a.m.                    **Strategies to Strengthen and Expand the RSP to increase its value, visibility and participation**
- Continue discussion from the April 10 meeting
  - Criteria for approval of unique concentrations, and a pilot program
  - The capacity model as a possible direction for the RSP
  - Other ideas
- 11:50 p.m.                    **Issues regarding Institutional Participation**
- Review of guidelines for in-depth program comparisons by participating campuses
- 12:10 p.m.                    **2007-08 Annual RSP Report**
- Update on enrollment and tuition savings/revenue data.
- 2009-10 Annual RSP Catalog**
- Update regarding program offerings.
- 12:20 p.m.                    **Expanding Publicity and Outreach**
- Online networking
  - Increased communications with guidance counselors.
- 12:30 p.m.                    **Next Steps**
- 12:40 p.m.                    **Other Business**