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JUN 12 2009

STATE OF NEW HAMPSHIRE

Honorarium or Expense Reimbursement Report (RSA 15-B)

NEW HAMPSHIRE DEPARTMENT OF STATE

Type or Print all Information Clearly:

Name: Joseph P Harding Work Phone No. 603-271-8564

First Middle Last

Work Address: 105 Pleasant Street, Concord, NH 03301

Office/Appointment/Employment held:

HHS/Division of Community Based Care Services/Bureau of Drug and Alcohol Services.

Director

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: Bob Thompson, B. Sc., CPS

First Middle Last

Post Office Address: 7 Main Street, Suite 7, Whitefield, NH 03598

Occupation: North Country Prevention Coordinator

Principal Place of Business: 7 Main Street, Suite 7, Whitefield, NH 03598

If source is a Corporation or other Entity:

Name of Corporation or Entity: North Country Health Consortium

Name of Corporate/Entity Representative: Bob Thompson, B. Sc., CPS

Work Address of Representative: 7 Main Street, Suite 7, Whitefield, NH 03598

Food and/or beverages consumed pursuant to RSA 15-B:6, II with value over \$25.00 X L

Value of Honorarium: \$154.00 Date Received: June 11, 2009 If exact value is unknown, provide an estimate of the value of the gift or honorarium and identify the value as an estimate. L L

Exact L X Estimate

Value of Expense Reimbursement: \$185.00 Date Received: June 11, 2009 A copy of the agenda or an equivalent document must be attached to this filing. L L Exact L L Estimate

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

Director Harding has been invited to be the keynote speaker for the annual Region A North Country Prevention 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 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

Please complete the following information on the filing person.

This information will not be made public:

Home Phone: 603-483-0380

Home Address: 664 Candia Road, Chester, NH 03036

Street Town/City Zip

Mailing Address if different:

E-mail Address: jharding@dhhs.state.nh.us

North Country Substance Abuse Prevention Network
Recognition Dinner

Thursday June 11, 2008

- 5:00 Arrival and Networking
- 5:20 Welcome and Introductions – Dinner Served
- 5:30 Keynote Presenter – Joe Harding, Director, New Hampshire Bureau of Drug and Alcohol Services “A Vision for Statewide Prevention”
- 6:15 Prevention Successes and a look forward
Coos County – Valerie Herres
Northern Grafton County – Bob Thompson
Data and Assessment – Nicole LaPointe
- 6:45 Dessert Served
- 7:00 “Substance Abuse Prevention Champion Award”
Coos County Champion
Northern Grafton County Champion