2020 NEW HAMPSHI	RE STATEMENT OF FINANCIAL IN	TERESTS - RSA 15-A	; ;
Type or Print Clearly			
Full Name Timothy Walter Drew	Work Address	29 Hazen Drive, Concord, NH 03301	
Primary Occupation Administrator-Env. & Public Health P	rgi e-mail timothy.drew@des.nh.gov	Work Phone	271-3306
	Administrator, Environmental and Public Health Protection, NH Dept. of Environmental Services		
directors, etc. or employment with state or county government held by you. NO ACRONYMS	SEE ATTACHED		
A. List below the name, address, and type of any profess proprietor, or employee, or served in any other professic calendar year. Sources of retirement benefits other than fed	anal or advisory capacity and from Will	n any income in excess of a lovoor wa	3 Ochred during the presenting
1.			- 1
2;			·
If you have no qualifying income indicate by writing your i	nitials next to the following statement.	My income does not qualify	τwo
B. Indicate below whether you or a family member has a s reportable special interest in an item on this list if a change discipline a licensee or permittee, or other decision by gov financial effect on you or a family member than it would on	e in law, a change in administrative rule, a rernment affecting the listed business, pro n the general public:	fession, occupation, group, or matter wo	iact, grante a need of persons,
1. Any profession, occupation, or business licen profession, occupation, or category of business:	sed or certified by the State of New Hamp		
	, Laterer mercaning arrangement,	vices X munici	te of New Hampshire, county, or pal employment
7. N.H. Retirement 8. Current use land assessment program	m lodging	 10. Sale and distribution of alcohologous beverages 	olic 11. Practice of law
12. Any business regulated by the Public Utilities Commission	13. Horse or dog racing, or other legal of gambling	1-12-20-20-10-11	Water Resources
T 16. Agriculture 17. N.H. Laxes: Profits To			ther area in which you have a
I have read RSA 15-A and hereby swear or affirm that the f person who knowingly fails to comply with the provisions	oregoing information is true and complet of this chapter or knowingly files a false	e to the best of my knowledge and belie statement shall be guilty of a misdemear	f. RSA 15-A:9 Penalty. Any nor.
Date January 16, 2020			!

Return to: Office of Secretary of State, 107 North Main Street, State House Room 204, Concord, NH 03301